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Challenges of Man Management and Combat
Stress in LIC Environment

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The Centre for Land Warfare Studies (CLAWS), New Delhi, is an autonomous think tank dealing with contemporary issues of national security and conceptual aspects of land warfare, including conventional and sub-conventional conflicts and terrorism. CLAWS conducts research that is futuristic in outlook and policy-oriented in approach.

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About the paper

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About this series

CLAWS Working Papers are unedited works in progress. Disseminated online, the final version of this paper may nevertheless appear in future CLAWS publications, peer-reviewed journals, or edited volumes.

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CHAPTER 1: INTRODUCTION

Low Intensity Conflict (LIC) is a limited politico-military struggle to attain political, military, social, economic or psychological objectives. It is often of lengthy duration and extends from diplomatic, economic and psychological pressure to terrorism and insurgency. LIC is generally confined to a specific geographical area and is often characterized by limitations of armaments, tactics and level of force. LIC involves the actual or contemplated use of military means up to just below the threshold of battle between regular armed forces.¹ In essence LIC operations would come under the purview of Army's secondary role. The primary role of the Indian Army is "to preserve national interests and safeguard sovereignty, territorial integrity and unity of India against any external threats by deterrence or by waging war."²

As we are primarily trained to fight a conventional war and think in clear-cut extremes like black and white, and friend and foe, it often leads to problems in LIC since we are fighting our own people and not an 'enemy' *per se*. It would be seen that development of militancy often has its roots in the regional aspirations of a people governed by an insensitive, unresponsive and corrupt administration. The local population tends to think that they have been wronged by the corrupt administration and hence, look at the militant as their 'Robin Hood' fighting for a just cause, and the security forces are considered the long and insensitive hand of the administration. In this background the soldier is looked upon as an outsider.³

In a conventional war, the battle lines are clearly drawn. Goals are clear and unambiguous. Troops operate from familiar bases where all the basic amenities are readily available. Limited periods of intense stress are followed by adequate recovery time and hence, do not denude the psychological resources of a soldier unless, of course, the operations are unduly prolonged or are faced with repeated reverses⁴. The situation in LIC is diametrically opposite. Prolonged operations capped by inadequate rest and relaxation impose great stress on soldiers. Ambiguity of aim, lack of visible success, high casualty rates tend to erode the morale. Operational factors such as fatigue, unpredictability of threat, prolonged tenures, absence of basic amenities, domestic worries, problems related to leave and travel increase the level of frustration. This may result in psychological distress, combat stress or post-traumatic stress disorder (PTSD). In addition, overstaying leave, desertion, abuse of alcohol or drugs, suicide, and cases of soldiers running

¹United States Department of the Army, *Field Manual 100-20: Military Operations in LIC*.

²*Indian Army Doctrine* published by HQ Army Training Command.

³Ray A. *Kashmir Diary. Psychology of Militancy*. Delhi: Manas Publications; 1997.

⁴Badrinath P. *Psychological Impact of Protracted Service in Low Intensity Conflict Operations (LICO) on Armed Forces Personnel: Causes and Remedies*. United Service Institution of India, 2003.

'amok', shooting at their superiors and colleagues may be symptoms of a serious malady plaguing the troops⁵.

Need for Introspection

Today, while India is being described as an 'emerging' nation, its Army is reportedly having numerous man-management problems, ranging from suicides cases to the fratricides to problems of 'internal health', as termed by our present Army Chief while referring to the allegations of corruption in the Army. Perhaps, many of these issues are over-hyped by the media, but media cannot be entirely blamed. The changing socio-economic balances and an indifferent and, at times, biased politico-bureaucratic establishment have definitely aggravated the problem.

Incidents of fratricide and suicide have been on the rise during the last few years. This is, perhaps, as a result of modern life, concomitant with fast pace of change and excessive operational commitments, which has impacted the soldier and his family causing tremendous stress. One may be tempted to blame the leadership or the lack of it; however, it would be unfair to blame the junior and middle level leadership. The same leadership, if we recollect, had given us victory in Kargil. Statistics show that during the Kargil war the ratio of officer casualties as compared to other ranks was quite high— this, be assured, was not because the Pakistanis were excellent marksmen, but because our officers led from the front. Even in counter insurgency operations our officers continue to lead from the front. To that extent the common refrain that the present generation of officers is less committed to the uniform is a misplaced perception. Our junior leadership deserves all the kudos for its excellent showing under adverse circumstances despite all the constraints. It is at the higher echelons of leadership where, it is felt, a little introspection would benefit the Army.

Given the fact that LIC environment is extremely stressful, leadership has to manage stress by innovative man-management techniques, interactive style, personal example, humane touch and keeping the men well informed. What must be understood is the fact that deploying the military, trained to fight enemy hostility, to deal with civilian population is bound to have negative fallouts. Notwithstanding the negative fallouts, the final responsibility of containing or fighting insurgents in the NE or J&K will continue to remain with the Army; or for that matter, the subsequent taming of the Maoist in the 'Red Belt' region would also fall on the Army, even if temporarily, since, so far, the men in khakis have proved ineffective. And therefore, there are reasons for the nation to

⁵Haas KL. *Stress and Mental Health Support to Australian Defence Service Personnel on Deployment: Pilot Study*. Australia Defense Force Health, 2003.

seriously contemplate findings alternative to the Army and not expect it to fight endlessly while the government has little time and empathy for the men in olive green.

CHAPTER 2: STUDY/ SURVEY REPORTS ON EFFECTS OF COMBAT

The present study is an attempt to look at the problem of combat stress facing the Army holistically. The aspect of man management is inherent in the study and therefore, is not being covered separately. It is an unstated fact that many of the problems related to combat stress stem from man management and leadership issues. There are many other factors –intrinsic and some extrinsic influences, which are constantly at play in the life of a soldier and contribute to this ailment. Therefore, prior getting down to the subject of combat stress and related man management issues, it may be worthwhile going through various surveys/ studies conducted on the subject by other armies of the world as well as our own army, and derive lessons from past experiences. It is a recorded fact that in combat it is the psychological effects on troops more than the physical damage which is more alarming. The statistics and data so gathered reveal certain facts and clues, and provide the basis on which we can draw deductions, and in turn, help evolve ways and means to manage our troops and control combat stress.

Experiences of Other Armies

Some interesting data and statistics⁶ which have been compiled by various armies of the world are listed below:

- In the WWII European theaters, the average incidence of combat exhaustion casualties was one case requiring medical holding and treatment for every four wounded in action (WIA) (a 1:4 ratio). In really intense or prolonged fighting, the ratio rose to 1:2. Overall, with correct treatment, 50 to 70 percent of combat exhaustion casualties returned to combat within 3 days, and most of the remainder returned to useful duty within a few weeks.
- In the Pacific theater in WWII, there was about one neuropsychiatric casualty evacuated from the theater for every one WIA (a 1:1 ratio). Most of these, however, did not come from the combat units or areas. They were combat service support (CSS) troops left behind by the war on the hot jungle or coral islands or the cold, damp Aleutian Islands. The stressors were the combination of isolation, monotony, boredom, chronic discomfort, and low-grade illness from the environment, plus fear of disease, injury, and surprise attack. In retrospect, it was realized that evacuating these bizarre stress reaction cases home only encouraged more soldiers to "go

⁶Field Manual No. 22-51: Leaders' Manual for Combat Stress Control: Booklet 1 Headquarters, Department of the Army, Washington, DC.

crazy" when they temporarily reached their limit of tolerance to stress. It would have been better to have sent them to rest camps close to their units.

- It was also shown in WWII that tough training and esprit de corps prevented many battle fatigue casualties. Elite units, such as the ranger and airborne units had less than one battle fatigue casualty for every ten WIA. This unit cohesiveness prevailed even in combat assaults, such as Normandy and Arnhem, where extremely high casualties were suffered.
- During the Yom Kippur War (1973), the Israeli experience confirmed the risk of stress casualties in the modern, high-tech, continuous operations (CONOPS) battle. The Israelis counted on the high cohesion and training of their troops and leaders to keep stress casualties to a minimum. They were caught, however, by strategic and tactical surprise and were forced to mobilize on a religious (fasting) holiday. Israeli estimates of stress casualties suggest that large numbers of Israeli soldiers, including veterans and leaders, became unable to function solely because of stress. Since the Israeli Defence Force had no plans for treatment and return to duty, all such cases were evacuated to hospitals in Israel. True to the experience of WWI and WWII, many of these Israeli soldiers who were evacuated remain psychiatrically disabled today.
- Retrospective study⁷ of all sailors returning from an overseas deployment between 2002 and 2006 showed that deployment to Iraq and Afghanistan increased the probability of PTSD by 6.3 and 1.6 percentage points respectively compared to those who were deployed on ships. This probability was increased by 2.2 percentage points for those deployed longer than 180 days.
- Data collected from personnel systematically selected from current combat regions participating in a rest and recuperation program in Doha, Qatar involving 40,620 troops between October 2003 and January 2005⁸ revealed that rates of self-reported depression among troops in Afghanistan were lower than those of Iraq (32.3 vs 69.7 per 10,000). Moreover, feelings of depression and self-harm were inversely correlated with rank. These data support previous reports of higher mental health problems among troops in Iraq as compared with troops in Afghanistan.

⁷ *Self-reported Combat Stress Indicators among Troops Deployed to Iraq and Afghanistan: An Epidemiological Study.* [Journal Article, Research Support, U.S. Gov't, Non-P.H.S.] *Medical Journal Compr Psychiatry* 2008 Jul-Aug; 49(4):340-5.
⁸ Same as above.

- Routine mental health screening data collected from September 2005 to April 2007, were compared between soldiers evaluated after their first or second deployment to Iraq (1322)⁹. Standardized measures were used to screen for post traumatic stress disorder (PTSD), panic, other anxiety, major depression, other depression, and hazardous alcohol consumption 90 to 180 days after the soldiers returned from Iraq. There was a significant association between number of deployments and mental health screening results such that soldiers with 2 deployments showed greater odds of screening positive for PTSD.
- Non battle injury (NBI) continues to be a leading cause of morbidity among troops currently deployed to Iraq and Afghanistan. To assess NBI incidence, impact, and risk factors, a survey¹⁰ was given to soldiers during mid or post deployment from Iraq, Afghanistan, and surrounding region, from January 2005 through May 2006. Among 3,367 troops completing a survey, 19.5% reported at least one NBI, and 85% sought care at least once for their symptoms. NBI continues to be a problem in recent deployments, and given the findings on individual and potential operational impact indicators, NBI should be viewed as a primary force health protection problem.
- Population-based descriptive study¹¹ of all Army soldiers and Marines who completed the routine post deployment health assessment between May 1, 2003, and April 30, 2004, on return from deployment in Afghanistan (16,318), Iraq(222,620), and other locations (64,967) showed that the prevalence of reporting a mental health problem was 19.1% among service members returning from Iraq compared with 11.3% after returning from Afghanistan and 8.5% after returning from other locations. 35% of Iraq war veterans accessed mental health services in the year after returning home; 12% per year were diagnosed with a mental health problem. More than 50% of those referred for a mental health reason were documented to receive follow-up care although less than 10% of all service members who received mental health treatment were referred through the screening program.
- A study¹² of the mental health of the UK Armed Forces to assess the prevalence and risk factors for common mental disorders and post traumatic stress disorder (PTSD) symptoms during the main fighting period of the Iraq War and later deployments to Iraq and elsewhere and how

⁹ Association Between Number of Deployments to Iraq and Mental Health Screening Outcomes in US Army Soldiers. Medical Journal J Clin Psychiatry 2009 Aug 11.

¹⁰ Non battle Injury among Deployed Troops: An Epidemiologic Study. [Journal Article, Research Support, U.S. Gov't, Non-P.H.S.] *Mil Med* 2009 Dec; 174(12):1256-62. Medical Journal *Mil Med* 2009 Dec; 174(12):1256-62.

¹¹ Mental Health Problems, Use of Mental Health Services, and Attrition from Military Service after Returning from Deployment to Iraq or Afghanistan. [Journal Article] Medical Journal *JAMA* 2006 Mar 1; 295(9):1023-32.

¹² Iversen AC, van Staden L, Hacker Hughes J, et al. The Prevalence of Common Mental Disorders and PTSD in the UK Military: Using Data from a Clinical Interview-Based Study. Medical Journal *BMC Psychiatry* 2009 Oct 30; 9(1):68.

these vary by enlistment status (regular or reserve), and compare the prevalence of depression, PTSD symptoms and suicidal ideation in regular and reserve UK Army personnel deployed to Iraq with their US counterparts revealed that the weighted prevalence of common mental disorders and PTSD symptoms was 27.2% and 4.8%, respectively. The most common diagnoses were alcohol abuse (18.0%) and neurotic disorders (13.5%). The prevalence of depression, PTSD symptoms and subjective poor health were similar between regular US and UK Iraq combatants. The most common mental disorders in the UK military are alcohol abuse and neurotic disorders.

Experiences of Own Army

On an average, the Army is losing more than 100 soldiers per year to suicides¹³. There were 129 suicide cases in 2006, 118 in 2007 and 124 in 2008¹⁴. In addition, there are a significant number of fratricide cases, with an average of about 30 per year. Statistics covering the period from 2003 to 2007 reveal 635 cases of suicides and 67 cases of fratricidal killings in the Armed Forces.¹⁵ In 2006, 508 personnel were discharged from service for being mentally unsound. Clearly we have an enemy within. Most 'experts' attribute the growing stress to low morale, bad service conditions, lack of adequate home leave, unattractive pay and a communication gap with superiors. The media also acknowledges that though the army has not fought a full-blown war in decades, the force is bogged down in fighting domestic insurgencies, and guarding restive borders, and at times providing assistance to the local governments in dealing with natural calamities or civilian rioting.

Study Report: Indian Army

Though the Indian army is engaged in low intensity conflict operations (LICO) for over five decades, the psychological effects of LICO on soldiers have not been adequately studied. To evaluate the psychological effects of deployment in LIC on service personnel a study was conducted in 2006 under the aegis of Director General of Medical Services of the Indian Army headed by Dr Suprakash Chaudhury, Department of Psychiatry, Ranchi Institute of Neuropsychiatry and Allied Sciences (RINPAS), the methodology of which has been explained briefly.

¹³The Pioneer, New Delhi 07 May 2007.

¹⁴Written reply from the Defence Minister to Lok Sabha in July 2009.

¹⁵Action Taken Report on Standing Committee on Defence Report 2009-10.

A multidimensional approach was adopted to acquire data for the study¹⁶. There were visits to forward areas by a team of professionals to assess ground realities and to interact with officers and troops deployed there. The subjects of the study consisted of 568 officers, junior commissioned officers and other ranks randomly selected from units deployed in LIC. None of the subjects had a past or family history of psychiatric disorders. All subjects gave informed consent. To ensure confidentiality the subjects were not required to fill identifying personal data in the questionnaire. After explaining the aims of the study and assuring full confidentiality, all subjects were administered a self-made personal questionnaire and the following self-rating scales administered in group setting.

- *Personal Questionnaire* - Personal questionnaire comprised demographic data, length of service in LIC, operational stressors, domestic stressors, unit stressors, physical environment, living conditions, officer-man relationship and administrative aspects such as leave, welfare, posting/tenures, mail, rest and recreation, etc.
- *Carroll Rating Scale for Depression (CRSD)* - CRSD was developed as a self-rating instrument for depression. CRSD has acceptable face validity, reliability and internal consistency. It can be used to assess the severity of depression.
- *Michigan Alcoholism Screening Test (MAST)* - MAST is a 24item screening instrument designed to identify and assess alcohol abuse and dependence. MAST has a high internal consistency. Some critics of self-report instruments suggest that their reliability is reduced by the reluctance of those with problem drinking to accurately report the extent and nature of their alcohol use
- *General Health Questionnaire (GHQ)* - GHQ is a selfadministered screening test, which is sensitive to the presence of psychiatric disorders in individuals presenting in primary care settings and non-psychiatric clinical settings. The GHQ is not designed to detect symptoms that occur with specific psychiatric diagnoses; rather, it provides a measure of overall psychological health or wellness. The GHQ has reasonable test-retest reliability.
- *State-Trait Anxiety Inventory (STAI)* - STAI is a self-report assessment device which includes separate measures of state and trait anxiety. State anxiety reflects a 'transitory emotional state or condition of the human organism that is characterized by subjective, consciously perceived

¹⁶Chaudhury S, Goel DS, Singh H. Psychological Effects of Low Intensity Conflict (LIC) Operations published in Indian Journal of Psychiatry. <http://www.indianjpsychiatry.org/text.asp?2006/48/4/223/31553>.

feelings of tension and apprehension, and heightened autonomic nervous system activity'. In contrast, trait anxiety denotes 'relatively stable individual differences in anxiety proneness...' and refers to a general tendency to respond with anxiety to perceived threats in the environment.

- *Perceived Stress Questionnaire (PSQ)* - PSQ is a 30-question self-rating scale for assessment of stress in general (past year or two) and recent (past month) forms. The recent PSQ has acceptable validity and reliability.
- *Impact of Events Scale (IES)* - IES was developed to measure current subjective distress related to a specific event. The IES scale consists of 15 items, 7 of which measure intrusive symptoms, 8 tap avoidance symptoms, and combined provide a total subjective stress score.
- *Multidimensional Fatigue Inventory (MFI)* - MFI is a selfreport instrument containing 20 statements which cover different aspects of fatigue. These 20 items are organized in five scales. Each scale contains four items. The scales are balanced to reduce the influence of response tendencies as much as possible; each scale contains two items indicative of fatigue and two items contra-indicative of fatigue. The five scales measure general fatigue, physical fatigue, reduced activity, reduced motivation and mental fatigue.
- *Satisfaction with Life Scale (SWLS)* - SWLS consists of 5 items that are completed by the individual whose life satisfaction is being measured. Administration is brief-rarely more than a few minutes-and can be completed both by interview (including phone) and by paper-and-pencil response. Test-retest reliabilities have been generally acceptable.
- *The Hindi PEN Inventory (PEN)* - PEN measures four dimensions of personality, viz. *psychoticism* (P) tendency to develop psychotic symptoms under stress; *extraversion* (E) (Eysenckian model of introversion-extraversion dimension, defining extroversion as social, mixing, outgoing); *neuroticism* (N) or emotional instability defined as the propensity to develop and sustain neurotic symptoms under stress, and Lie scale (L) or tendency to give socially desirable responses in place of real responses. Higher the score greater the strength of that particular dimension of personality.
- *Locus of Control (LOC) Scale* - LOC scale is a construct embedded in social learning theory of Rotter. It stresses the role of expectancy and reinforcement value related with the outcome of

behaviors or events. The scale has acceptable internal consistency, temporal stability and validity.

The mean age of subjects in LIC and other areas was 29.89 (SD=5.88; range 21-51) years and 30.37 (SD=6.31; range 20- 50) years, respectively. All the subjects were male. The mean length of service of subjects in LIC and other area was 10.87 (SD=5.54) years and 11.12 (SD=6.03) years, respectively. There were no statistically significant differences between the two groups with regard to age, length of service, duration of stay in present location, rank, education and marital status. The mean duration of present deployment in LIC and other areas was 19.46 (SD=12.81) months and 19.88 (SD=11.20) respectively. However, it was observed that a small number of men had served for a continuous period of five years or even more in various LIC/difficult areas. Vast majority of the subjects (82.9%) felt that two years should be the optimal duration of the tour of duty in LIC. 11% of the respondents felt that the tenure should be one year, while only 5.99% opted for 3-year tenure.

Findings of the Study

[Table-1] depicts some of the major determinants of motivation and morale. A feeling of insecurity with regard to families back home, lack of societal support, adverse publicity in the media, hostile attitude of human rights groups, lack of cooperation/hostility on the part of the local population, dissatisfaction with regard to the financial compensation, difficulties encountered in rail travel, and a sense of disgust towards a corrupt polity were some of the factors affecting morale.

In the operational context the factors exercising a negative impact included ambiguity with regard to aim, feelings of uncertainty, feeling of fighting a futile war with no benefits to the country, fear of ever-present danger/attack from unexpected quarters, feelings of anger/frustration at fighting with 'one arm tied behind the back' and anger/bitterness at not being able to deal with the unarmed but vicious ideologues/ motivators/ financiers of militants, the 'jamayatis' who were blatantly misusing religious institutions such as 'madrasas' in their antinational activities. These negative factors were counter-balanced by factors such as regimental spirit, group cohesiveness and the feeling of organizational support which contributed to high morale despite the dangers and hardships involved in LIC.

Results of the psychological tests indicated that compared to personnel from other areas, respondents from LIC area had significantly higher scores on CRSD (Depression), MAST

(Alcoholism), GHQ (Health), IES (Events), and general fatigue, physical fatigue, and mental fatigue subscale of the MFI. It was seen that the majority of soldiers had external locus of control in both operational and peace locations indicating high adaptability. An extremely important finding was that there was no significant difference in the scores on the SWLS (Satisfaction with Life) in personnel from LIC and other areas, despite the former group obtaining significantly higher scores on CRSD, GHQ, MAST, IES and MFI (Fatigue)

[Table-2] Further analysis of the scores of the IES on dimensions revealed that as compared to individuals in other areas, significantly more individuals in LIC scored in the mild and moderate range

[Table-3] Analyzing the scores of the CRSD, MAST and GHQ as screening tests, it was found that individuals in LIC had significantly higher depression, alcohol abuse and psychiatric distress compared to those in other locations

[Table-4] Further analysis of the psychological test results showed that adverse psychological effects were significantly related to the level of intensity of LIC

[Table-5] and the length of service in LIC

[Table-6] The operational factors most often cited by the personnel as having a negative impact on morale was anger at fighting with constraints, which along with bitterness at inability to deal with 'jamayatis', ambiguity regarding aim, feeling of uncertainty and feeling of futility about LIC

[Table-1] are inherent parts of such operations. In fact the low figure for ambiguity regarding aim, feeling of uncertainty and feeling of futility is indicative of good morale. However, anger at public admonishment mentioned by 77.11% of respondents is definitely a matter of concern because in the surcharged atmosphere of LIC this can be the spark that starts a fire. An important point was that fear of ever-present danger/unexpected attack was endorsed by only 20.07% respondents indicating that despite all the adversity the morale of the troops is high and that they are ready for every eventuality.

PTSD is the most widely reported disorder related to combat in both lay accounts and published research. Surprisingly, no Indian study has addressed this aspect of LIC, though clinical experience suggests that PTSD is uncommon in Indian soldiers exposed to LIC or combat. This finding underlines the inherent resilience of the Indian soldier. The better resilience could be due to group

cohesiveness, good leadership and high morale. Moreover, unlike western troops our soldiers are operating in their own land to protect the integrity of the country and so the mission is clearly defined.

The finding that soldiers in LIC had significantly higher depression, alcohol abuse and psychiatric distress compared to those in other locations

[Table-4] and that these adverse psychological effects were significantly related to the level of intensity of LIC

[Table-5] and the length of service in LIC

[Table-6] is in agreement with earlier studies. This indicates the need to sensitize medical and administrative authorities about these problems so that preventive measures can be instituted. An extremely important finding was that there was no significant difference in the scores on the SWLS scale in personnel from LIC and other area, despite the former group obtaining significantly higher scores on CRSD, GHQ, MAST, IES and MFI

[Table-2] This finding again confirms the belief that despite the adversities and hardships of service in LIC areas the morale of the troops is high and that the general attitude towards life was optimistic.

Thus, the results of the psychological tests in the study revealed that there was no increase in anxiety, stress, psychoticism and neuroticism between troops in LIC and other locations; and most importantly both groups of personnel had similar SWLS scores. It undoubtedly speaks volumes about the high morale, astute leadership and most importantly the resilience of the Indian soldier. The results of the psychological tests indicate that some of the soldiers are depressed and psychologically unwell, and this is related not only to the intensity of LIC but also to the length of time spent in these areas. This may well be a portent of things to come and indicate the need for instituting immediate remedial and preventive measures.

Lastly, the findings of the study emphasize the need to further increase the availability of mental health services for the security forces. Somehow psychiatric treatment in the security forces has acquired a dirty label and stigmatizes the individual seeking help from a psychiatrist. There is an urgent need for all, most importantly the commanders, to move away from this thinking. Innumerable studies attest the fact that troops who operate for protracted periods under stressful

conditions are bound to suffer from psychological distress as well as psychiatric disorders. This is very natural and there is no need to look upon psychiatric problems with alarm and hide them in the closet.

Other Surveys/ Studies

15 Corps Study Report on Stress and Incidents of Suicide - A total of 100 officers and 350 other ranks were surveyed across all formations of 15 Corps. Answers were sought based on questionnaire forwarded to respondents. Interviews were conducted wherever felt necessary. A few pertinent results of the survey are attached as **Appendix A**.

Study Report on Factors Contributing to Stress and Inter Personal Violence - A survey of troops deployed in active operational areas (14, 15, 16, 3 & 4 Corps) was carried out. The survey included a questionnaire containing 39 questions covering physiological, psychological and organizational factors. The questionnaire was distributed among troops of different arms and services serving in both regular Infantry and Rashtriya Rifle (RR) battalions. Bracketing was carried out on the basis of service and rank profile, i.e. below 5 yrs, 5-10 yrs, Non Commissioned Officers (sub divided into Lance Naiks, Naiks and Havaldars) and Junior Commissioned Officers (sub divided into NaibSubedars and Subedars). Salient features of the survey¹⁷ are attached as **Appendices B & C**.

Important Findings on Suicides by Studies and Surveys

Some important findings on suicide patterns are as follows:

- *National Data* - Suicide rate in India is 11/1, 00,000 (2nd in South East Asia & 45th globally). The suicide rate is the highest in Kerala at 29/1, 00,000, whereas Bangalore City contributes 17% of total suicides in country.
- *Risk Profile* - Risk of committing suicide among survived attempters is about 10% and 30-60% of all completed suicides were preceded by an attempt in the past.
- *Inter Service Comparison* - Air Force has the highest whilst the Navy has the lowest rate of suicide. The mean rate of suicides for the Army is approximately 10.5 per lac.

¹⁷ Major R Rajan, The Infantry (India) Journal, Jan 2004, P. 30-35.

- *Peace – Field Pattern* - Rate of suicides in peace is almost double that of field areas. However, in field area rates become marginally higher than peace station rates if negligent discharge weapons are also included.
- *Rank-wise Trend* - Rate of suicides is highest amongst the officers of the rank of major and below (14 / per lac) followed by Sepoys / LNks (11 per lac).
- *Arms/Service wise Trend* - Within the Army suicide rate is highest in the Artillery, followed by Army Medical Corps, Infantry, Engineers and Signals.
- *Higher Trend while on ERE* - It has been observed that suicide rates are considerably higher when individuals are on Extra Regimental Employment or when they are away from their parent unit due to prolonged temporary duty etc.
- *Extremely Low Suicides while at Permanent Home* - Only 4% of the total cases committed suicides while on leave at their permanent home stations/ residence. This raises questions on the organizational climate, which is possibly conducive to the suicide process.
- *State wise Distribution* - Tamil Nadu, Kerala, Punjab and Haryana dominate the list. However, the rate of suicide per lac may change the trend if the cadre strength from these states is taken into account. It is assumed that the cadre strength of Tamil Nadu and Kerala is likely to be considerably lower than Punjab and Haryana; therefore, the rates would become higher in the case of Tamil Nadu and Kerala. This also will then conform to the national trends.
- *Seasonal Pattern* - There is a marginally higher rate of suicides in the third quarter of the year, possibly due to increase in personal problems such as leave requirements, children education, marriage/ social engagement and weather conditions.
- *Marital Status* - The number of married personnel committing suicide is more than double than that of the unmarried. The primary cause of this pattern could be attributed to the adjustment problem along with associated organizational factors in terms of lack of married accommodation, children education facilities etc.

CHAPTER 3: UNDERSTANDING THE PHENOMENON OF STRESS

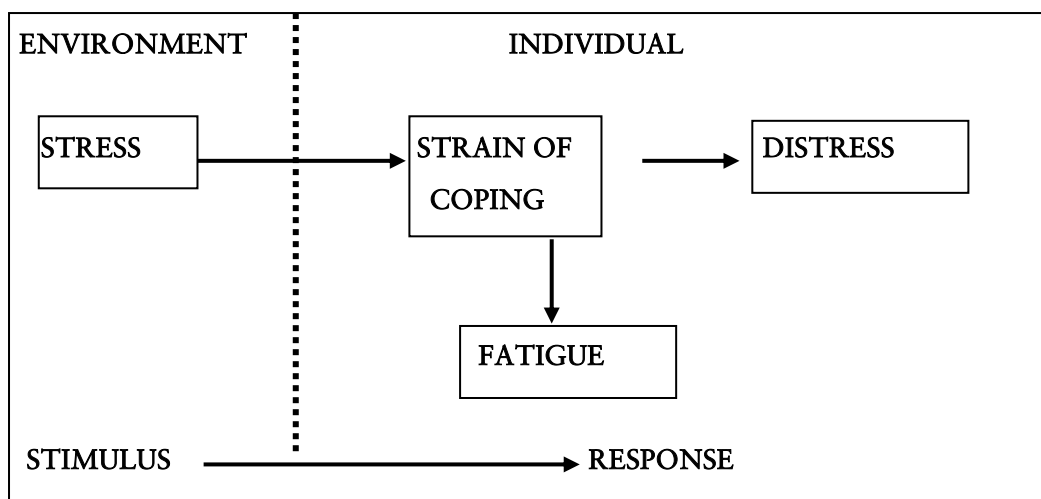
Having seen the results of various studies on combat stress conducted from time to time it is imperative that we understand the nuances of stress in general and combat stress in particular and identify the causative factors in our kind of environment and evolve measures to counter these. Some of the stress situations can be easily overcome, while some situations create severe stress. Stress may involve biological or psychological processes and may be experienced at the individual or group or societal levels. In common parlance, the terms 'stress' and 'strain' are synonymous and literally means pressure or anxiety .

What is Stress?

Stress can be defined in various ways. Some definitions are:-

- Stress is a constraining or impelling force e.g. under the stress of poverty.
- Stress is an effort or demand on energy e.g. individual subjected to great stress.
- Stress is also defined as a force exerted on the body.
- The Penguin Medical Encyclopedia defines stress as any influence, which disturbs the natural equilibrium of the body and includes within its reference physical injury, exposure, deprivation, all kinds of diseases and emotional disturbances.

A simple model¹ of stress shown below defines it as a 'constraining' force acting on a person who is trying to cope with this force, exerts or strains himself and feels fatigued or distressed.

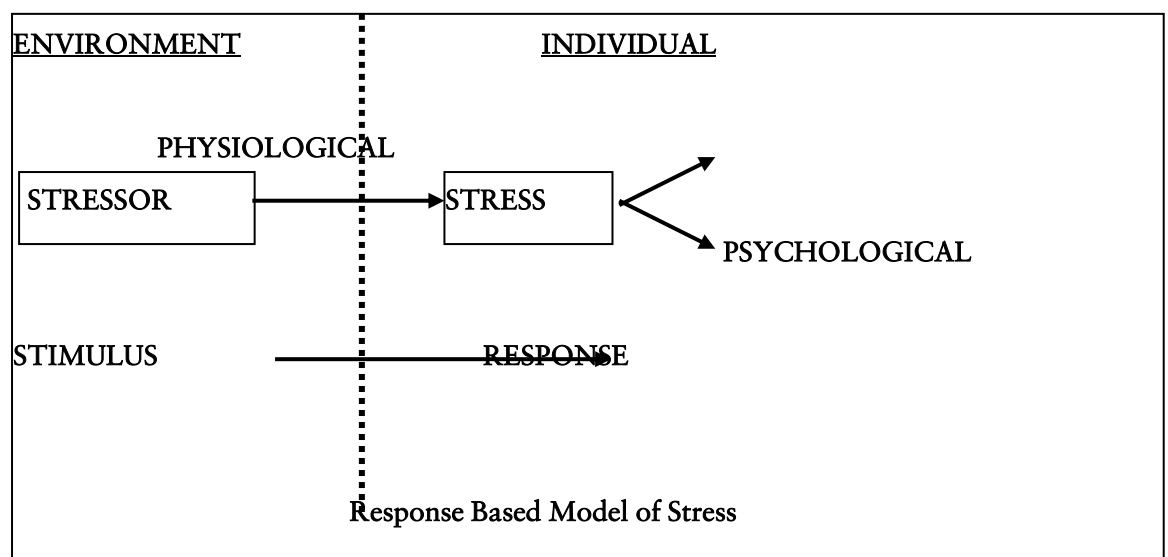


¹ Cox, Tom, *Stress*, (London, The Macmillan, Press Ltd, 1979), p.3

Layman's Model of Stress

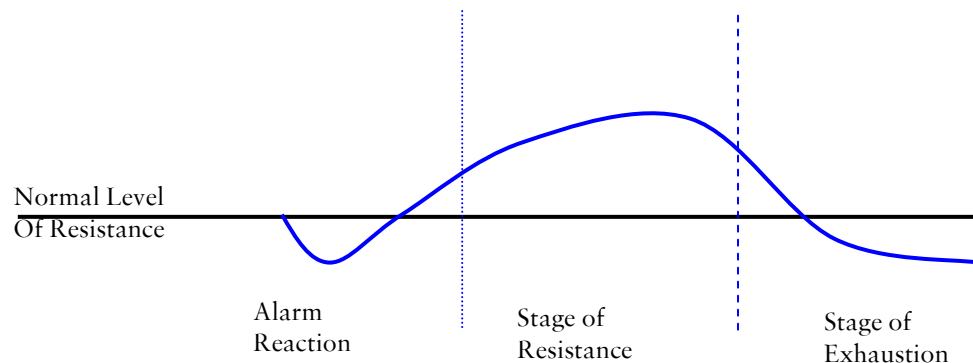
Approaches to Study of Stress - The term stress is used to connote a variety of meanings. The study of stress can be easily placed into one of the three groups representing the main approaches to its definition.

- *Stimulus Based Model* - This model suggests that external stresses give rise to a stress reaction or strain within the individual. It is based on *Hooke's Law of Elasticity*, which states that if the strain produced by a given stress falls within the elastic limit of the material and when the stress is removed; the material will return to its original condition. If, however, the strain passes beyond the elastic limit some permanent damage will occur. This analogy suggests that just as physical systems have an elastic limit, people have some in-built resistance to stress. Stress can be tolerated up to a point but when it becomes intolerable, permanent physiological and psychological damage may result.
- *Response Based Model* - This approach describes how stress is reacted to and how people function under stress. Such a response may in turn act as stimulus for the production of further responses. This approach suggested that most life changes evoke physiological stress response, which prepares the person for the physical activity of coping. The Response Based Model of stress is shown below.²



²Tom Cox, *Stress* (London, The Macmillan, Press Ltd, 1979), p.4.

- *Psychodynamic Model*³ -Hans Selye's General Adaptation Syndrome (GAS) Model has been widely held as a comprehensive model to explain the stress phenomenon. He defined stress as a non- specific, conventional response of the body to any demand made on it. His primary concern was for the physiological mechanism and close relationship between the response based and physiological models of stress. Selye found that the body's reaction to a wide range of stressors followed three stages. The GAS model is illustrated below:



- *Alarm Reaction* - This stage includes an initial 'shock phase' in which resistance is lowered and a 'counter shock phase' in which defence mechanism becomes active. Alarm reaction is characterized by autonomous excitability, adrenaline discharge, increased heart rate and gastro-intestinal ulceration. Depending on the nature and intensity of threat and condition of the organism, the periods of resistance vary and the severity of symptoms may differ from mild invigoration to 'disease of adaptation'.
- *Resistance Stage* - Maximum adaptation occurs during this stage. The bodily signs characteristic of the alarm reaction disappear, resistance increases to levels above normal. If the stressor persists or the defensive reaction proves ineffective; the organism deteriorates to new stage.
- *Exhaustion Stage* - If the stress continues for too long or increases in severity, body defences breakdown and further exposure leads to a stage of exhaustion, consequently many of the physiological dysfunctions or systems which appeared during alarm reaction begins to reappear. If the stressor continues to act on the organism, after this time, the resistance level begins to decline irreversibly resulting in complete disintegration or death.

³Selye, Hans, *The Stress of Life*, London: McGraw Hill Book Company, 1976.

- *Transactional Model*⁴ - Tom Cox and Mackay evolved the Transactional Model treating stress as an intervening variable, the reflection of a transaction between the person and his environment. It underlines that stress is an individual perceptual phenomenon rooted in psychological processes. It also draws specific attention to the feedback components of the system. It has five recognizable stages:
 - Stage 1 - It is represented by the source of demand relating to the person and is part of his environment. Demand is usually regarded as a factor of the person's external environment.
 - Stage 2 - The person's perception of demand and his own ability to cope usually results in an imbalance between perceived demand and capability. This results in stress.
 - Stage 3 - This stage is described as critical imbalance accompanied by changes in physiological state and by cognitive/behavioural attempts to reduce the stress results in response to stress.
 - Stage 4 - It constitutes feedback, which also occurs in all the preceding stages and is effective in shaping the outcome at each stage. Inappropriate or ineffective responses strategies will invariably prolong the experience of stress.

Effects of Stress

Whenever any situation stimulates the response on the physiological level, the individual experiences increase in metabolism, blood pressure, heart rate, breathing rate and muscle tension. On the psychological level, the individual experiences tension, anxiety and increased alertness. The major effects of stress are summarized as under:-

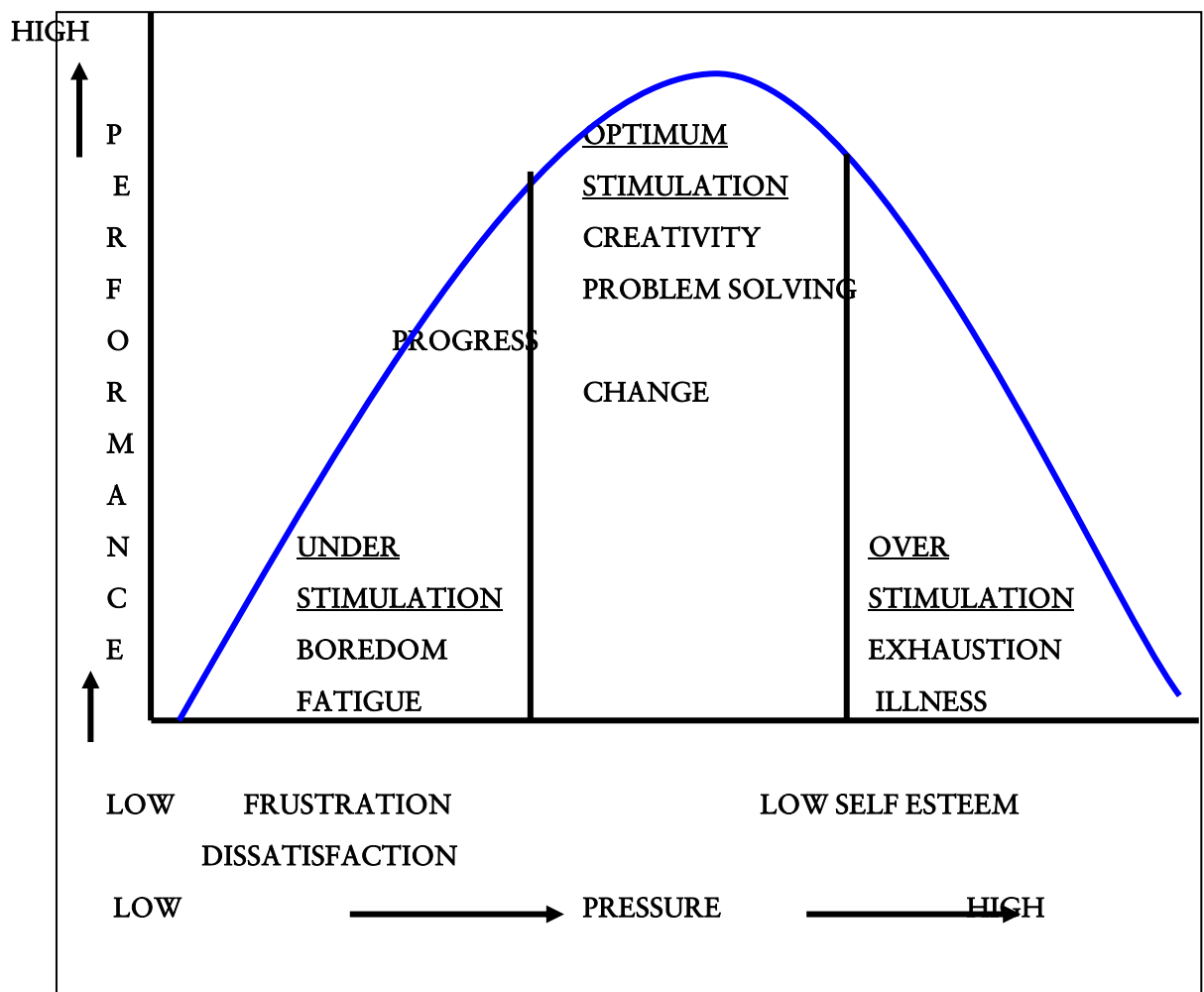
- Subjective Effects - Anxiety, aggression, apathy, boredom, depression, fatigue, frustration, guilt, shame, irritability, bad temper, threat, tension and loneliness.
- Behavioural Effects - Accident proneness during addiction, emotional outburst, excessive eating or loss of appetite, excessive drinking or smoking, excitability, impulsive behaviour, impairment of speech, restlessness and trembling.
- Cognitive effects - Inability to make decisions and concentrate, frequent forgetfulness, hyper sensitivity to criticism and mental blocks.
- Psychological effects - Increased blood glucose level, increased heart rate, blood pressure, sweating, dilation of pupils, and difficulty in breathing, hot and cold spells.

⁴Tom Cox, *Stress* (London, The Macmillan, Press Ltd, 1979),

- Health effects - Asthma, chest and back pains, coronary heart disease, diarrhea, dizziness, frequent urination, insomnia, ulcers and loss of sexual interest.

Stress and Performance

The relationship between stress and performance resembles an inverted 'U' curve. In general performance rises as stress increases, consequently boredom and frustration levels decrease. Once an optimum point is reached, further increase in stress impairs judgement and alertness. It means that some stress or stimulation is necessary for optimal performance. Optimum Stress Level (OSL) is indicated in stress performance curve in the figure below.⁵



STRESS PERFORMANCE CURVE

Optimum Stress Level - The inverted 'U' model of stress performance curve is moderated by the personality of the individual and the job. The model explains that stress is desirable to be maintained at the OSL, the benefits of which are:

⁵Rodney Freedman, *Managing Stress-From Morning to Night* (Time Life Books, 1987), p.24.

- Creates a feeling of alertness and confidence.
- Augments quick and effective thinking.
- Arouses a feeling of well being and enthusiasm which facilitates in performance of task.
- Widens the area of interest making him socially acceptable.
- Helps individual to bring out his best potential.

Stress and Personalities

The effects of stress on the behaviour of an individual are moderated by his personality. Friedman has categorized individuals with either type 'A' or type 'B' personality depending on the traits and behaviour pattern. The main differences between the two are:

- Type 'A' Personality - In this kind of personality an individual is hard driving and demanding both of self and others and is aggressively involved in his struggle to achieve more in less time. Type 'A' displays the following:
 - Is always walking, moving and eating fast.
 - Is impatient with progress of events.
 - Strives to think/ do many things simultaneously.
 - Is obsessed with number measures, success is in terms of how much.
- Type 'B' Personality - Type 'B' individuals are opposite of Type 'A'. They display the following characteristics:
 - Never suffer from a sense of urgency with its accompanying impatience.
 - Feel no need to display or discuss either their achievements or accomplishments unless such an exposure is demanded by the situation.
 - Play for fun and relaxation rather than to exhibit their superiority at any cost.
 - Can relax without guilt.

Type 'C', which is the ideal one, draws some of the best attributes from the type 'A' and type 'B' patterns and adds new elements to meet the challenge head-on for success and vitality.

Stress and Arousal

Arousal can be described as the level of psychological energy that is stimulated in a given situation. At very low level of arousal the individual will not be sufficiently aroused to do anything in a given

situation. This can result in stressful experience. At a very high level of arousal also there may be a stressful situation.⁶

Stress and Pressure

Pressure is the aggregate of all the demands placed on an individual. These can be physical demands or psychological demands. Stress is the response to an appropriate level of pressure. There is an optimum level of pressure for each individual. Both high pressure and low pressure are inappropriate and thus stressful.

Stress and Frustration

When a motive is thwarted it leads to frustration. It may be due to some obstacle that blocks the progress towards a desired goal or by absence of an appropriate goal. Frustration may arise from outer (environment) or inner (personal) sources. The effects of frustration are as under:

- If the goal is seen as reachable, there is a greater effort towards the attainment of goal by aggression or attack response.
- If the goal is seen as unreachable there is an acceptance of substitute goals through lowered aspirations. The common responses are anxiety, depression, apathy, regression and fantasy.

Severity of Stress

The severity of stress is the degree of strain or disequilibrium produced in the individual. In mild stress, there is little disturbance in the equilibrium and the adjustive action is usually simple. In moderate stress, there is proportionately greater degree of strain and adjustive action may be difficult. In excessive stress, severe disequilibrium occurs and the adaptive capacities are overtaxed. The severity of stress depends partly upon the characteristics of the individual, partly on the characteristics of the adjustive demand and partly on the situational context⁷.

⁶Tom Cox, *op cit.* p.45.

⁷James Coleman, *Psychology and Effective Behaviour*, Taraporevala Sons & Co Private Ltd, 1971p.191.

Sources of Stress and Combat Stressors

Stress is the body and mind's process for dealing with uncertain change and danger. Elimination of stress is both impossible and undesirable. For the purpose of understanding stress as a managerial phenomenon, it can be defined as “a fairly predictable arousal of psycho-biological (mind-body) system, which if prolonged, can fatigue or damage the system to the point of malfunction or disease.”

All human reactions are in response to stress of one type or other. These reactions, which relate to the ability to cope, even with stretching, are desired. They constitute fire of life and help human personality to develop and progress. But the lack of those reactions on the one hand, and too many of these on the other, cause stress and need to be controlled. When the reactions are inadequate, the human system ‘rusts out’. When they are too many and fall beyond the coping ability of the individual, they eat into his vitals and incapacitate him. Supply of stress to human system, to serve as a contributory factor to its growth and development, therefore, needs to be managed.

Organizational Stressors

In organizations, frequent causes of stress are task demands, role demands, interpersonal demands, organizational structure, organizational leadership and organization’s life cycle. Task demands are factors related to a person’s job. They include the design of the individual’s job, working conditions, and the physical work layout.⁸ Role demands include role conflict, role ambiguity, role erosion, and role overload. Excessive rules and lack of participation in decision that affect an employee are example of structural variables that might be potential stressors. Organizational Leadership represents the leadership style of the seniors. Some leaders create a culture characterized by tension, fear and anxiety. They establish unrealistic pressures to perform in the short run, impose excessively tight controls, and routinely fire employees who fail to measure up.⁹ Organizations like human beings pass through a life cycle. The life cycle of an organization comprises eight stages – birth, growth, policy, procedure, theory, religion, ritual and last rites. Each stage of the life cycle poses its own challenges and problems. While the early stages are exciting, the latter ones create anxiety and tension.

⁸Stephen P Robbins, *Organizational Behaviour* (New Delhi PH I, 1996), p. 200.

⁹*Ibid* p. 608.

Group Stressors

The group can also be a potential source of stress. Group stressors can be categorized into lack of *group* cohesiveness, lack of social support and inter-personal/inter-group conflict. All of these could be stress producing.¹⁰

Individual Stressors

Among individual factors contributing to stress are personality, life and career changes and life trauma. In respect of personality, the distinction between Type 'A' and Type 'B' behaviour patterns becomes relevant. The Type 'A' personality is one for which stressful behaviour patterns such as always moving, walking and eating rapidly, feeling impatient with the pace of things, hurries others, dislikes waiting, does several things at once, feels guilty when relaxing, tries to schedule more and more in less and less time, uses nervous gestures such as clenched fist, banging hand on table and does not have time to enjoy life. The achievement orientation, impatience and perfectionism of individuals with Type 'A' personalities may create stress in work circumstances that other persons find relatively stress free. Type 'A' personalities, in this sense, bring stress on themselves¹¹. Type 'B' personality, on the other hand, who is not concerned about time, is patient, does not brag, plays for fun and not to win, relaxed without feeling guilty, has no pressing deadline, is mild mannered and is never in a hurry, is less stress prone.

¹⁰Luthans, *op cit.* p. 200.

¹¹Schermerhorn, *Managing Organisational Behaviour* (New York: John Wiley & Sons, 1985), p.658.

CHAPTER 4: UNDERSTANDING COMBAT STRESS

Combat Stress is the mental, emotional or physical tension, strain, or distress resulting from exposure to combat and combat-related conditions. Controlling combat stress is a command responsibility. In terms of soldiers lost in action and reduced performance, combat stress seriously affects mission accomplishment. It is a leader's responsibility to take action to strengthen soldiers' tolerance to combat stress and manage it in his or her unit. Rates of combat stress casualties vary greatly, with higher ratios during lengthy periods of intense combat. It is important to emphasize that "combat stress" is not restricted only to combat, but may also arise from combat-like conditions such as LIC operations. In LIC, our forces may experience high rates of stress casualties unless small-unit leaders are trained and prepared to manage stress.¹

Success as a fighting force is dependent on leadership that maintains balanced focus between mission accomplishment and troop welfare. The small-unit leader is the key to building and maintaining high unit morale and peak efficiency. He achieves this in part by knowing his troops and understanding their strengths and weaknesses. To maintain that same level of morale and efficiency in combat, the small-unit leader must understand how to recognize, prevent, and even personally contend with reactions to combat stress when it occurs in his unit. If a condition accounted for as many casualties in combat and the condition was at least partially preventable, the prudent combat leader would be interested in knowing more about it. Combat stress reaction(s), also called battle fatigue, is that condition. It has the potential to disable the most courageous soldier and influence the success or failure of a unit in accomplishing its mission.

There is an often heard misconception in the environment that only weak persons exhibit combat stress behaviors. Even the highly motivated and trained Israeli troops suffered heavy psychiatric casualties during Yom Kippur War. Continued exposure to stressful combat situations may wear and tear their body and mind due to prolonged imbalance between demands and resources. Such stresses are manifested at somatic and behavioral levels, causing cognitive and emotional impairment which in turn makes the soldier prone to disorders like combat fatigue, misconduct behaviors and other negative stress behaviors and post-traumatic stress disorders (PTSD). There has been a tendency in the past to look at the somatic dysfunction more often following stress with relatively less emphasis on psychological deficits. However, over the last few years there has been a growing recognition of the fact that soldiers operating in combat environment have unique psychological needs that require special attention.

¹ *Combat Stress*' a publication by Dept of the Navy, HQs US Marine Corps, Washington, D.C.

Reactions to Combat Stress

Soldiers exposed to danger experience physical and emotional reactions that are not present under more tranquil circumstances. Some reactions sharpen abilities to survive and win; other reactions may produce disruptive behaviors and threaten individual and unit safety. These adverse behaviors are collectively called combat stress reaction. The operative word is “behaviors.” People in combat experience a range of emotions, but their behavior influences immediate safety and mission success. Combat and combat-related military missions can also impose combinations of heavy physical work; sleep loss; dehydration; poor nutrition; severe noise, vibration, and blast; exposure to heat, cold or wetness; poor hygiene facilities; and perhaps exposure to infectious diseases, toxic fumes or substances. These, in combination with other influences—such as concerns about problems back home—affect the ability to cope with the perception of danger, and diminish the skills needed to accomplish the mission. Environmental stressors often play an important part in causing the adverse or disruptive combat stress reaction behaviors. The leader must keep himself and his unit working at the level of stress that sustains performance and confidence. It must be borne in mind that each individual responds to a given stressor in a different way since stress response depends upon the individual’s appraisal of the situation, individual’s efficacy and individual’s social support system.²

Recognizing Common Reactions to Combat Stress

Ranges of fatigue, fear, anxiety, and depression affect most soldiers in war and LIC. Mild stress reaction may be signaled by changes in behavior and only be discernible by the person himself or by close comrades. The unit leader and medical personnel depend on information from the soldier or his comrades for early recognition of combat stress reactions to provide prompt and appropriate help. Combat stress behavior³ can be categorized as under:

- *Positive Combat Stress Behavior* - Positive behavior promotes strength and tolerance to discomfort which leads to horizontal and vertical bonding and esprit de corps. Personal trust, loyalty and cohesiveness which develops among soldier is horizontal bonding while bonding between leaders and subordinates become vertical bonding. Esprit de corps is the sense of pride and shared identity the soldier develops with the unit’s history and mission. Positive behavior also include sense of uniqueness, sense of mission, strength and endurance, tolerance to hardship, discomfort, pain and injury and a sense of purpose.

² ‘*Combat Stress*’ a publication by Dept of the Navy, HQs US Marine Corps, Washington, D.C.

³ ‘*Combat Stress Behaviors in LIC Environment*’ published by Defence Institute of Psychological Research (DIPR), Delhi.

- *Negative Combat Stress Behavior* - Negative combat stress behaviors are discussed in the succeeding paragraphs.
 - Combat Fatigue - Normal signs and symptoms:
 - Physical Signs
 - Fatigue – feel tired, drained out and slow reaction time.
 - Tension – aches and pains, trembling and fidgeting.
 - Jumpiness – startle at sudden sounds or movement.
 - Cold sweat, dry mouth, pale skin and difficulty in focusing the eyes.
 - Pounding of heart and light headedness, insomnia and nightmares.
 - Feeling out of breadth and have cramps in the hands and the feet.
 - Indigestion, vomiting, diarrhea, constipation and frequent urination.
 - “Thousand-yard” stare.
 - Emptying bowel or bladder at the instance of danger.
 - Emotional Symptoms
 - Anxiety – Keyed up, worrying and expecting the worse.
 - Irritability – Swearing, complaining and easily bothered.
 - Grief – Crying for the dead or wounded buddies and fearfulness.
 - Guilt – Feeling guilty for mistakes.
 - Anger – Feeling let down by leaders or others in the unit.
 - Loss of confidence – Beginning to lose confidence in self and unit.
 - Difficulty in paying attention and remembering details.
 - Difficulty in thinking, speaking and communicating.
 - Warning Signs and Symptoms
 - Physical Signs
 - Agitation – Cannot keep still or constantly moving around.
 - Flinching, ducking at sudden sound or movement.
 - Trembling or cowering in terror.
 - Loss of body function – May not feel sensation in parts of the body or may not be able to move part of the body.
 - Total immobility.

- Physical exhaustion – just sits or stands in a dazed condition.
- Behavioral Signs
 - Rapid talking and constantly making suggestions.
 - Arguing, reckless actions or fighting.
 - No attention to self care and shows indifference to danger.
 - Loss of memory.
 - Inability to speak, stammering or mumbling.
 - Unable to sleep or afraid to fall asleep.
 - Hallucinations.
 - Rapid emotional shifts, crying.
 - Silent and sulking.
 - Apathy – No interest in food, water or any activity.
 - Strange behavior.
 - Panic running or freezing under fire.
- *Disruptive Reactions* - Soldiers with disruptive, combat stress reactions:
 - Cannot Function on the Job - In some cases, stress produces symptoms often associated with head injuries. For example, the person may appear dazed and may wander around aimlessly. He may appear confused and disoriented, and exhibit either a complete or partial memory loss. Soldiers exhibiting this behavior should be removed from duties until the cause for this behavior can be determined.
 - Compromise Own Safety -In a desperate attempt to escape the danger that has overwhelmed him, an individual may panic and become confused. The term *panic run* refers to a person rushing about without self-control. In combat, such a soldier easily compromises his safety and could possibly get killed. His mental ability becomes impaired to the degree that he cannot think clearly or follow simple commands.
 - Compromise the Safety of Others - If panic is not quelled early, it can easily spread to others. A person in panic is virtually out of control and needs to be protected from himself. More than one person may be needed to exert control

over the individual experiencing panic. However, it is also important to avoid threatening actions, such as striking him.

Misconduct Behaviors - Misconduct behaviors include a broad range of breaches of good order and conduct. They are most likely to occur in poorly trained and undisciplined soldiers.

- Signs and Symptoms of Misconduct Behavior

- Recklessness and indiscipline.
- Drunken behavior and drug intoxication.
- Shirking and malingering.
- Absent without leave and desertion.
- Self inflicted wounds and excessive sick report.
- Ill treating captured enemy.
- Looting and rape.
- Combat refusal.
- Threatening and killing own colleagues and leaders.
- Attempted suicide and suicide. Signs and symptoms of suicide and preventive measures are attached as **Appendix D**.

Referral to Religious Teacher or Medical Officer

Although the more serious or warning behaviors described in the preceding paragraphs usually diminish with help from comrades and small unit leaders, and time, some do not. An individual usually improves when he is able to get warm food, rest and an opportunity to share his feelings with comrades or small unit leader. If the symptoms endanger the individual, others or the mission or if they do not improve within a day or two, or seem to worsen, get the individual to talk with the unit religious teacher or medical officer. Access to mental health/combat stress control specialists may be sought, if available. Do not wait too long to see if the experience is better with time. Specialized training is not required to recognize severe stress reactions. The small-unit leader can usually determine if the individual is not performing his duties normally, not taking care of himself, behaving in an unusual fashion, or acting out of character.

CHAPTER 5: CAUSES OF COMBAT STRESS

All human reactions are in response to stress of one type or other. These reactions, which relate to the ability to cope, are desired since they constitute 'fire of life' and help human personality to develop and progress. When reactions are inadequate, the human system 'rusts out'. When there are too many and fall beyond the coping ability of an individual, they eat into his vitals and incapacitate him. Supply of stress to human system, to serve as a contributory factor to its growth and development, needs to be managed. It would, therefore, be prudent to analyze the causes of combat stress in our environment to facilitate measures to counter them. Causes of stress are not confined only to battlefield or operational environment. Being a social being a soldier is affected by the happenings in the society and organization at large and to his family in particular; it is a combination of various factors. The likely contributing factors causing combat stress amongst the soldiers are discussed in the succeeding paragraphs.

Economic Progress

It is probably the socio-economic changes since the early 1990s that is partly to blame for the professional disorientation of the soldiers. The visible gap based on material symbols between officers and men is fast receding. While it may be a positive change from a purely developmental viewpoint, it is eroding the hierarchal structure of the Army which is so essential for the system to function effectively. Thanks to the never ending unemployment problem prevailing in the country there are no dearth of aspirants for the Army; it is the quality which is in question. The youth today often opt for a commission in the Armed Forces not as a first choice, but, probably after having explored all other avenues. As a consequence, and quite obviously, there is substantial lack of youth, who have the combined qualities of head, mind and body to become leaders of men in battle¹. In essence, the drop in quality of leadership as also the erosion of our hierarchal structure, which are consequences of the economic progress our nation has been experiencing in recent years, have added to the problem of combat stress.

Breakdown in Governance

In earlier times a letter from the army authorities to civil administration seeking assistance on behalf of a soldier elicited swift and appropriate response, which no longer is the case. Civil

¹[Fratricide Incidents in the Army](#) by RSN Singh in Indian Defence Review Issue: [Vol 21.4](#)

administration is plagued by corruption, insensitivity and inefficacy. In 40 percent of India's territory, the writ of the government does not operate or is tenuous. About 180 districts of India are consumed by violent left wing extremism and suffer from extreme insecurity and lack of development². The families of soldiers residing in these areas are as vulnerable. Can a soldier hailing from these naxalite infested areas be expected to be mentally at peace and discharge his duties efficiently? Or for that matter would a soldier hailing from the Valley in J&K ever feel safe?

Shortage of Officers

Prior to 6th Pay Commission and the economic melt down which had affected the entire world around the same time, number of officers from the Armed Forces seeking premature retirement was growing. This was not only on account of growing opportunities due to economic growth, but also due to insecurity and stress syndrome. Armed Forces have a very steep pyramidal structure which is compounded by the slow pace of promotion vis-à-vis the civilian counterparts. Most officers get filtered at middle level of our hierarchy not because they are incompetent, but because there are fewer vacancies at the higher echelon. The existing deficiency of officers in the Army is approximately 11,500, which is about 25% of the authorized strength of 46,615 officers. Intake at the training academies is far from satisfactory. With increased risks to life but without visible advantage in pay, perks and promotions vis-a-vis other central government organizations youth with better options are certainly not opting for the Armed Forces. The resultant shortage of officers has been severely impacting on the officer-men relationship as also the efficacy of the unit.

Family Structures

The breakdown of the joint-family system and the emergence of nuclear-families have robbed the soldier of the inherent physical and economic security, which the joint families provided. Today the emphasis is more on education, thus, entailing a shift from agricultural backgrounds to a life in towns and cities with all its attendant problems. The emancipation of women in India is also impinging on the existence of joint family system. A soldier's family, in the absence of the soldier, no longer enjoys the same family and social security and care.

Improved Communication

²Same as above.

Use of mobile telephone has inundated the country at an amazing pace. It has given a tremendous sense of empowerment to the people of the lower economic strata. For troops serving in far flung and remote areas it is a blessing. At the same time it is also a distraction. Earlier, the families of soldiers generally refrained from conveying unpleasant news or incidents while writing letters. Today, the same soldiers are in touch with their families 24 x 7. Even minor untoward incidents are being conveyed to a soldier on mobile phones, which otherwise could have been treated as mundane and transitory. In many cases, it has resulted in stress and incidents of suicide and fratricide³.

Lack of Clear Objectives

This is one factor which appears prominently as one of the causes of psychological disorders in the studies mentioned in the previous chapter. A soldier is exhorted to take on the terrorists and insurgents while a ceasefire is being brokered, thus, creating confusion in his mind. In the absence of clear-cut long term objectives or policy, there is lack of synergy between the local administration and the Army. This also erodes the confidence of own troops on the leaders and the organization. It also leads to a feeling of being used by the powers that be, for short term gains. Within the Army we need to be clear about what success means and entails in LIC. Is it number of kills and recoveries? Or is it ensuring normalcy in an otherwise militancy affected area? This is an issue which has plagued our organization, probably because of the myopic view a senior commander is constrained to take owing to a short tenure in command where he is expected to prove his worth as a professional soldier. Kills and recoveries are visible successes whereas a peaceful environment could be construed as passivity.

Prolonged Tenure in Operational Areas

Operating in harsh and insecure conditions for prolonged periods; being exposed to the vagaries of nature and climatic conditions and operating at odd timings take its own toll on a soldier. If this is carried on indefinitely with no end in sight, it will result in battle fatigue and a sense of despondency amongst the soldiers. This further gets magnified when a soldier realises that not everyone shares his poverty.

Leave

³[Rapidly Changing Military Sociology](#) by RSN Singh in Indian Defence Review Issue: Vol 24.3

Leave, unless meticulously planned, becomes difficult to manage resulting in denial or restriction of full and timely leave. The soldiers, on the other hand, look forward to their leave eagerly to take a break from the demanding task as also to meet their loved ones. Denial of timely leave or restriction of leave could lead to frustration and anger amongst the troops. There are numerous cases of a subordinate either shooting himself or shooting the superiors as a fall out this. This is one single factor, which contributes to the high morale of troops. In most cases, this aspect is not handled correctly.

Media

Local vernacular press normally gets intimidated to speak the language of the militants. Reporters often have scant knowledge of the CI operations and tend to sensationalize events. The success of militants against the SFs is printed in the front pages while success of the SFs is downplayed. Such biased reporting generally results in causing a lot of hurt to the soldiers, thereby, eroding his will to fight. Even at the national level every little scandal involving the Armed Forces is blown out of proportion giving the impression that every one is gunning for the soldier – this, in spite of all the sacrifices he is making for a nation which is as such rated very high on the corruption index.

Propaganda and Psychological Operations

Militants also make extensive use of propaganda and psychological operations through sponsored newspapers, posters, leaflets and foreign media. Allegations of atrocities and molestation are often made in an attempt to malign the SFs and also to impose caution on them in conducting operations. In a case in the NE, a young girl committed suicide due to a fight with her lover. Under pressure from the militants, the next of kin of the deceased accused the Army of having gang-raped the girl leading to her suicide. The issue took a political turn and the matter got referred to the Human Rights Commission. It turned out to be a false allegation once inquiries were completed. Irrespective of the outcome of the findings the troops and officers involved had to undergo endless agony and pain due to pressures from the hierarchy as well as the media. Such incidents can greatly affect the morale and motivation of the troops.

Legal Constraints

While the Armed Forces Act provides certain legal protection, the insurgency laws are found to be inadequate for extracting truly actionable intelligence as also to quickly pursue operations. Army is not authorized to detain any militant beyond 24 hours. In addition, the requirement of the presence of a magistrate and police personnel for carrying out search poses impediments. The kind of operations and the frequency at which they are undertaken by the Army, the civil administration would require a posse of officers to provide magisterial support. Police personnel are often lacking in will and stamina to keep up with the soldiers and hence, actually end up being liabilities in an operation. Such legal bindings prove to be dampeners.

Political

Due to vacillating political will to resolve the problem clear cut long term directives are seldom issued to the Army. In fact, some political parties and local politicians with vested interests, joined by some likeminded government officials, may even oppose the employment of the Army and also exploit odd isolated incidents to serve their narrow interests. All these create some amount of confusion and doubt in the minds of the troops. In a shocking revelation, the Chief Minister of a state was reportedly paying money to the militant organizations, apparently as a part of a bargain. Such dichotomies demoralize the troops to a great extent. In some cases smaller militant outfits are created by the leaders themselves to add muscle to his authority and provide him a tool to bully his opponents. How futile and exasperating for the Army to be trying to undo what the political class had created in the first place.

Population

It has been widely experienced that some villagers either due to hostile propaganda, fear of the militants or due to affinity of religion, is hostile towards the SFs. Hostility can create a sense of being unwanted and cause psychological barriers in a soldier. Unfriendly behaviour can cause negative fallouts in an individual. It is, therefore, imperative that the Army takes up the process of winning the hearts and minds of the people more seriously so that a conducive atmosphere is created for troops to operate and the local population is not alienated further. Need for social acceptance is a strong emotion in a human being, and if denied, can cause a lot of distress to the affected individual.

Habitat

After a hard day's work an individual looks forward to a comfortable and safe place to rest and recoup for the next day. However, in operational areas this basic need is often denied. Due to operational reasons senior commanders often rush the units and sub-units to far-flung places which are often devoid of any habitat. As a result troops are denied the basic amenities, often living in tentages or abandoned government buildings which itself are devoid of the basic fittings. During monsoons it is a fight against rain while in summers it is a struggle against mosquitoes and heat and humidity. Shortage of water, electricity and paucity of recreational facilities add to the woes of a soldier.

Use of Minimum Force

It may be prudent to follow the policy of 'use of minimum force', but, it could be quite a different ball game when it comes to actual practice; especially so, when the same is not applicable to the militants. One is expected to exercise restraint whereas the militants get away with the most blatant acts of atrocities. It also impedes on the use of weapons, and troops are more or less fighting the militants with a hand tied behind their backs. This sort of disparity can certainly affect the level of motivation of the troops.

Training

Pre-induction training is very important to infuse confidence amongst the men in fighting an invisible enemy. Many a time, due to paucity of troops and time, troops are inducted into inhospitable environment with very little training. Even while engaged in CI operations training often takes a back seat since it is assumed that 'on the job training' is the best way to learn. Peacetime commitments of units, inability to muster the required strength for individual training and inadequate supervision are some of the reasons for poor standards of training. It leads to lack of confidence in oneself and on the organization.

Lack of Appreciation at National Level

While the troops are fighting militants and getting killed the politicians and bureaucrats are busy scratching each other's back; soldiers are forgotten. The hue and cry which followed when the Armed Forces sought a review on certain issues in the pay package after the declaration of the Sixth

Pay Commission shows the apathy prevailing in our country towards men in uniform. Those who died during the attack on Parliament or 26/11 were instantly rewarded, but those who are doing it on a daily basis are not being given equal recognition. It is as if our soldiers are expected to die for the nation as a part of his job. The nation also appears to have a different yardstick for the Armed Forces to measure the rot when it came to propriety and accountability. The manner in which minor aberrations in the Armed Forces are declared as 'scandals' and hyped in the media, it gives the feeling that a very deliberate attempt is being made to tarnish the image of the Armed Forces. Sadly, it is the only organization in the country which still has some semblance of honesty and integrity.

Weak Leadership

This is one of the most devastating demotivators. Any weak link in the system starting from the political leadership down to the junior leaders in the field can prove to be debilitating. Lack of clear cut objectives leads to lack of clear strategies to deal with militancy. Nevertheless, despite lack of clear cut policies, the junior leaders can motivate his troops by setting personal example. To that extent, we should be proud of the sterling leadership displayed by our young leaders. It is in the higher echelons that we need to carry out some introspection and provide the kind of leadership our men on ground are hoping for.

Human Rights Violation

Not that a soldier commits human rights violation intentionally, but in the course of anti militancy operations there are times when aberrations occur. Such incidents are then blown out of context and the soldiers made to look like criminals. Finding oneself at the receiving end for no fault of theirs can be very distressing. To make matters worse, similar yardstick is not applied to the militants.

Inhospitable Terrain and Climate

The terrain and climate in which troops are employed to combat insurgency is inhospitable and harsh. A very high level of human will and endurance is required to sustain over a prolonged period. Under such circumstances, whenever motivation is lacking for whatever reasons, there is

bound to be a general breakdown of discipline and morale, which could affect some of the individuals adversely.

Fear of Unknown

The possibility of getting killed and constant threat of loss of limb puts a tremendous pressure on the soldier. Fear of militant, who is elusive and indistinguishable from the local populace; striking at any time in any manner, looms large in the minds of the troops. To an individual soldier, it is primarily the danger of death or injury, which makes the combat situation so harassing an experience.

Use of Improvised Explosive Devices (IEDs), Mines by Militants

Every soldier is confident of taking on a militant in a one to one encounter and getting the better of him. The use of IEDs and mines has, however, given the militant ghost like qualities; the capability to strike without being seen. This leads to *frustration* where a soldier hit by the militant is unable to retaliate, thereby increasing psychological stress.

Lack of Mental Respite

Combating insurgency is a 24-hour job. Militants can strike at any time and, therefore, the level of alertness required at all times is very high. The routine on post, operational commitments and move at short notices give soldiers no respite during the period he is deployed in LIC environment. This leads to fatigue and exhaustion and have a telling effect on his psyche.

Inadequacy of Equipment

Lack of special equipment to combat militancy has a demoralizing effect on the troops, more so, when a mine casualty could have been avoided with a better quality of mine detector. At times it gives a feeling of being pushed into 'Counter Insurgency' operations without being adequately equipped. At times, better and sophisticated equipment/ radios are recovered from dead militants. Soldiers prefer not to put on the bulletproof vests as they restrict movements and cause undue fatigue because of weight and size. All these lead to a feeling of being neglected by the govt.

Declining Discipline and Values

There are incidents when officers overlook major breaches of discipline in counter insurgency areas; perhaps, fearing negative repercussions on themselves and the unit. Many a time, they do not wish to 'waste' their time on inquiry due to preoccupation on urgent operational matters. Such attitude breeds indiscipline leading to discontent among the disciplined soldiers.

Frustration Due to Absence of Results

The effect of operating in LIC areas for months without any tangible results is frustrating. Such operations call for days of foot slogging in inhospitable terrain, which saps both morale and energy. No amount of hard work is recognized in these operations unless one has a few dead militants and some weapons.

Lack of Conviction towards the Cause

Knowing that the monster was created by politicians in the first place, it becomes a distasteful effort to tame the same monster now that it is beyond the masters. Most of the soldiers deployed in these operations are fighting militancy for the sake of the *izzat* of their units. The stress factor is greatly increased when his life is at stake for a cause he is not convinced about. The soldiers are caught in the crossfire of moral versus immoral, and the dividing lines are blurred. In sum, insurgency imposes severe stress and strain on those engaged in it.⁴

No Mistake Syndrome

Genuine mistakes must be accepted in the right spirit. Such an approach will certainly infuse a lot of desire to perform without fear of failure. 'Need for dependency', as suggested by Pareek, a well known behavioral scientist, gets manifested in a hierarchical organization like ours.⁵ Placing trust and faith on subordinates brings out the best in a soldier. What is important to understand is that no individual with self-pride would want to be ticked off for not doing his job well. Getting punished for a mistake which happened inadvertently in the line of duty can be devastating to the affected individual.

⁴Major General Samay Ram, UYSM, AVSM, VSM (Retired), *Management of Stress in CI Environment*, (Journal of the United Service Institution of India, Jul-Sep, 1998).

⁵*Motivation Management* by Ritchie S & Martin P.

CHAPTER 6: PREVENTION AND MANAGEMENT OF COMBAT STRESS

Having understood the meaning of stress and combat stress and also, having identified the causes of the phenomenon it would be quite logical to discuss the measures to prevent and manage combat stress. The US Navy has published a book on management of combat stress which is quite comprehensive. Although some of the contents are more applicable to their troops the pertinent parts can be modified to suit our requirements. Most parts are universally applicable and hence, should be adopted to bolster our own efforts in fighting combat stress.

Principles of Combat Stress Management

- *Primary Prevention* - Control or reduce stressors which are known to increase negative stress behaviors.
- *Secondary Prevention* - Minimize disability by training commanders, religious teachers and medical personnel for:
 - Identifying warning signs and symptoms.
 - Immediate treatment of signs and symptoms.
 - Prevention of contagion by segregating combat fatigue cases.
 - Reintegration of recovered combat fatigue cases back into the units.
 - Talking/ publicizing disciplinary action against misconduct behaviors.
- *Tertiary Prevention* - Minimize potential for chronic disability. Debriefings after combat or traumatic incidents and effective treatment of combat fatigue reduce chronic disability and PTSD.

Preventing and Managing Combat Stress¹

The same leadership skills that apply to troop welfare and war fighting can effectively reduce or prevent combat stress reactions. Leaders should take preventive actions and address stress symptoms as they appear. Positive action to reduce combat stress also helps soldiers cope with

¹ 'Combat Stress', a publication by Dept of the Navy, HQs United States Marine Corps, Washington, D.C.

normal everyday situations and makes them less likely to experience harmful combat stress reactions.

- *Stress Management Techniques*
 - Instill confidence in each soldier and his equipment, unit, and leadership.
 - Be decisive and assertive; demonstrate competence and fair leadership.
 - Provide sleep and/or rest, especially during continuous operations.
 - Set realistic goals for progressive development of the individual and team.
 - Recognize that battle duration and intensity increase stress.
 - Recognize that individuals and units react differently to the same stress.
 - Learn the signs of stress in yourself and others.
 - Recognize that fear is a normal part of combat stress.
 - Rest minor stress casualties briefly, keeping them with their unit.
 - Facilitate flow of information to minimize stress due to a lack of communication.
 - Look out for soldiers' welfare.
 - Communicate with soldiers personally to detect signs of stress.
 - Create a spirit to win under stress.
 - Act as role model for self-control of stress reactions.
 -
- *Training in Stress-Reduction Technique* - Realistic training is the primary stress-reduction technique. It assures soldiers' maximum confidence in their skills and belief that their leaders are doing their best for them. Since the basic necessities of life assume even greater importance on the battlefield, leaders should:
 - Ensure personnel are properly trained.
 - Place welfare of subordinates before personal welfare, but keep them capable.
 - Practice stress control through cross-training, task allocation/ matching/ sharing.
 - Look for stress signs and a decreased ability to tolerate stress.
 - Practice and master stress-coping techniques.
 - Face combat stress; it is unhealthy to deny the stress of combat.
 - Keep soldiers well supplied with food, water, and other essentials.
 - Provide mail, news, and information avenues.
 - Provide the best medical, logistical and other support.
 - Maintain high morale, unit identity and esprit de corps.
 - Keep the same unit members together.

The unit's encouragement and support of soldiers' efforts to cope with stress have a decisive effect. Unit actions can determine if soldiers will endure combat exposure and accomplish their mission. Controlling stress requires practice. Coping with stress should be practiced under conditions as similar to combat as possible.

- *Physical Fitness* - Good physical conditioning delays fatigue, builds confidence, and shortens recovery times from illness and injury. It also prepares individuals to better cope with the physiological demands of stress. Soldiers in top physical condition can better control their internal physiological functions, which will improve their overall performance. Physical fitness—including aerobic fitness, muscular strength, and endurance—must be developed in all soldiers to strengthen their ability to rebound from exhaustion. Physically fit soldiers are less affected than those unfit.
- *Effective Leadership* - An effective leader in combat is competent and reliable. He knows his job without question, and he can be counted on to do it regardless of the situation or circumstances. Effective small-unit leadership reduces the impact of stress in several ways. Leaders must understand the sources of combat stress and reactions to them. In addition, leaders must manage stress problems to keep them from spreading throughout the organization by implementing the following actions:
 - Focus on immediate mission.
 - Expect soldiers to perform assigned duties.
 - Remain calm and in control at all times.
 - Let soldiers know their reactions are normal.
 - Keep soldiers productive (when not resting) through recreational activities, equipment maintenance and training to preserve perishable skills.
 - Ensure soldiers maintain good personal hygiene.
 - Ensure soldiers eat, drink, and sleep as soon as possible.
 - Let the soldiers express their thoughts. Do not ignore expressions of grief or worry.
- *Confidence in Leaders²* - Leaders must demonstrate effective leadership to earn their subordinates' loyalty and trust. Leaders are responsible for:

²'*Combat Stress*', a publication by Dept of the Navy, HQs United States Marine Corps, Washington, D.C.

- Committing the unit to missions commensurate with abilities.
 - Planning operations carefully and thoroughly.
 - Preparing the unit to accomplish the mission.
 - Leading and guiding the unit to mission accomplishment.
 - Showing consistent good leadership that convinces subordinates their leaders know best what should be done, how it should be done, who should do it, and how long the task should take. Authority and respect are earned based on confidence in a leader's ability to guide the unit to success.
- *Confidence in Training* - Training helps soldiers develop the skills required to do their jobs. Confidence is the result of knowing they have received the best possible training for combat, and are fully prepared.
 - *Confidence in Unit* - Each soldier in a unit needs to become confident of the other unit members' competence. Individuals must stay and train together to gain that personal trust. Unless absolutely necessary, teams should not be disbanded or scrambled. Confidence in the unit leads to feelings of security, which in turn allows members to sleep and positively focus stress. The unit must receive each member's highest commitment to unit loyalty. Mission accomplishment is the unit's highest priority.
 - *Confidence in Equipment* - Soldiers who learn to operate and maintain assigned equipment develop confidence in their ability to employ it. This, in combination with an individual's belief in his personal capabilities, raises the overall confidence in his fighting ability.
 - *Cohesion and Morale* - Good unit cohesion and morale offset the negative effects of combat stress. The foundation for any stress reduction program should include trust and confidence in the following:
 - Fellow soldiers.
 - Competence and fairness of the unit leaders.
 - Unit's technical abilities and military power.
 - Equipment.
 - Personal combat ability.
 - Sense of support from the civilian community.
 - Personal spiritual well-being.

- *Family Care* - Soldiers entering combat with financial worries or family problems risk breaking down under the additional stress of combat. Even positive but unfinished changes on the home front, such as a recent marriage or parenthood, can distract the soldiers' focus on combat missions with worries that they will not live to fulfill their new responsibilities at home. Leaders must be aware of this risk and assist members in handling personal matters before deployment. Pre-deployment and post-deployment family briefings should be conducted, and programs established to assist families before, during, and after deployment. When soldiers know their families are cared for, they are better able to focus on their combat duties.

- *Coping with Individual Stress* - Stress pushes the body to its limits and causes tension; relaxation reverses this process. Stress-coping skills should be incorporated into unit training early, and command emphasis placed on practicing them. The stress-coping exercises include deep breathing, muscle relaxation, and cognitive exercises.
 - Deep-Breathing Exercise - *SudarshanKriya (SKY)*, a type of breathing exercise based on ancient Vedic tradition, if practiced regularly activates and harmonises various body and mind activities. Of all the yoga-centric stress management tools available today one that has been tried and tested and proved immensely successful is SKY. It offers practical tools that eliminate stress and bring greater peace, energy and awareness and joy to daily life. This unique breathing technique uses specific rhythms of the breath to restore harmony to our whole being. During SKY every cell in our body becomes fully oxygenated and flooded with a new life. It allows deep rooted negative emotions and toxin to be released.

 - Muscle Relaxation Exercises - They generally consist of concentrating on various muscle groups and the tensing and relaxing of limbs to relax the entire body. Quick versions for use in action consist of tensing all muscles simultaneously, holding for 15 seconds or more, then letting them relax and “shaking out the tension.” Deep relaxation versions start in the feet and work up (or start in the head and work down), body part by body part (muscle group by muscle group), tensing and then relaxing each in turn, while noticing how each part feels warm after it relaxes.

 - Cognitive Exercises - These consist of self suggestion (positive self-talk); imagery (imagine being fully immersed in a deeply relaxing setting); rehearsal (imagine performing the stressful or critical task under pressure and doing it perfectly); and

meditation (clearing the mind of all other thoughts by focusing on every breath and silently repeating a single word or phrase). These techniques involve creating positive mental images that reduce the effects of stressful surroundings, redirecting mental focus and learning to detach from stress. Soldiers are encouraged to practice stress management techniques and discuss their use in combat.

*Critical Event Debrief*³ - A Critical Event Debrief (CED) is a suggested structured group process designed to mitigate the impact of a critical event and to accelerate normal recovery of those personnel involved. It should normally be conducted by a team composed of trained members (medical officers, religious teachers, trained unit members). A CED's main value is to quickly restore unit cohesion and readiness to return to action. It may also reduce the possibility of long term distress through sharing and acceptance of thoughts, feelings, and reactions related to the critical event. Ideally, CEDs should be conducted 24 to 72 hours after the occurrence of the event.

*After Action Review*⁴ - Although a CED would be warranted following a traumatic event, if access to CED trained professional team is not available, small-unit leaders can modify their After Action Review (AAR) to assist in identifying the level of stress reaction of unit members. Accordingly, it will provide a familiar, non-threatening forum for leaders to identify the levels of stress reaction experienced by the unit members. It may also identify personnel who need immediate or later referral for combat stress-related symptoms. The unit leader should incorporate the following questions in the AAR:

- Fact Phase - Ask unit members to describe the event from their individual perspectives. What was each member's specific role in the event?
- Thought Phase -What were each member's first thoughts at the scene (or when the incident was first heard of)?
- Reaction Phase -What was the worst thing about the event? What was thought and/or felt?
- Symptom Phase -Describe probable thinking, physical, and emotional responses both at the scene and a few days afterward.

³'*Combat Stress*', a publication by Dept of the Navy, HQs US Marine Corps, Washington, D.C.

⁴'*Combat Stress*', a publication by Dept of the Navy, HQs US Marine Corps, Washington, D.C.

- Training Phase - Relay information regarding stress reactions and what can be done about them. If prepared handouts are available, distribute them. Include points of contact within the unit.
- Wrap-up Phase - Reaffirm positive things. Summarize. Be available and accessible. Debriefing team/unit leaders together decide which individuals need more help or referral.

CHAPTER 7: CONTROL OF COMBAT STRESS

LIC environment leads to generating stressful situations, which manifests in varied forms and affect the performance of soldiers. Controlling combat stress is often the deciding factor - the difference between victories and defeat - in all forms of human conflict. Stressors are a fact of combat and soldiers must face them. It is *controlled* combat stress (when properly focused by training, unit cohesion, and leadership) that gives soldiers the necessary alertness, strength, and endurance to accomplish their *mission*. Controlled combat stress can call forth stress reactions of loyalty, selflessness, and heroism. Conversely, uncontrolled combat stress causes erratic or harmful behavior that disrupts or interferes with accomplishment of the unit mission. Uncontrolled combat stress could impair mission performance and may bring disgrace, disaster, and defeat. To win, combat stress must be controlled. In combat, stress is inevitable; incapacitation due to stress is not. While the incidence of stress reaction is highest under extreme conditions, casualties can occur even in units not under direct fire. Units in which cohesion among group members is strong and for whom training gives a realistic perspective on combat, suffer the least number of stress reaction casualties.

Objectives of Stress Control

The objectives of stress control could be summarized as follows¹:

- 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.
- To progressively increase tolerance to stress so that soldiers can endure and function under extreme stress.

Effective Combat Stress Control Program² (CSC)

An effective stress management program will start with early planning, continue during employment, and extend beyond return to peace location. The CSC program will comprise of three phases: pre-deployment, deployment and combat, and post combat.

Phase 1: Pre-deployment

¹Field Manual 22-51 of The United States Army on Combat Stress (www.vnh.org/FM).

²'*Combat Stress*', a publication by Dept of the Navy, HQs United States Marine Corps, Washington, D.C.

During pre-deployment, some stressors facing soldiers include long working hours, preparation for training, fear of the future, family worries, and anxiety about the unit's readiness. Signs of poor coping include insomnia, increased use of alcohol, marital problems, increased bickering in the unit, irritability, and suicidal feelings. The most important preparatory steps to take in the pre-deployment phase are to:

- Conduct unit training and mission rehearsals.
- Prepare for changed sleep schedules.
- Attend to task assignments and allocations.
- Conduct equipment and supply maintenance checks.
- Attend to personal and family matters.
- Integrate new members into the unit positively and actively.
- Brief about the operation but consistent with operations security measures.
- Familiarize the unit members with the stressors and horrors they may encounter, but always follow up with what the unit need to do in those situations.

Unit Training - Because unit leaders have combated the stressors associated with garrison living and peacetime training, they have learnt to know their soldiers and what affects their performance. All soldiers should believe unit training has prepared them thoroughly for combat. Realistic mission rehearsal helps desensitize soldiers against potential combat stressors. For example, wearing and realistically training in protective gear is important. By doing so in pre-deployment training soldiers become less distressed in combat. Leaders who provide their soldiers with advance knowledge about the enemy prepare them for the stress created during deployment and initial enemy encounter. It is important during such training to talk realistically about enemy strengths and weaknesses as well as those of their own units. While inspirational pep talks are also important at this time, they should not include biased, inaccurate information. Leaders earn trust and respect if their troops perceive them as accurate, dependable sources of information.

Physical Fitness Training -While preparing for deployment, leaders must ensure that physical fitness is sustained, either by the work involved or by selective physical training exercises. New unit members who are insufficiently fit should receive special training.

Stress-Coping Skills Training - During preparation for deployment, the leaders should direct the unit to practice stress coping and relaxation techniques, and must act as positive role

models by demonstrating use of these techniques. A few stress coping techniques available on the internet could be made available to the soldiers.

Sleep Discipline - Before deployment, unit leaders must consider fatigue and sleep loss occurring during combat. The enforcement of work and rest schedules must begin early in pre-deployment training. During continuous operations, fatigue caused by lack of sleep is a major source of stress. Breaks in combat are irregular, infrequent, and unscheduled. Extended sleep is unlikely. *Sleep logistics* must be emphasized such that sleep and rest are allocated or supplied like rations, water, equipment, and ammunition. Sleep discipline training should address the following points:

- A unit-specific work-rest-sleep plan must be developed and practiced.
- Officers should be included in the allocation of sleep and rest time, as lack of sleep will impair their judgment and decision-making skills as well.
- The plan should allow soldiers at least 5 hours of uninterrupted sleep, ideally between 2300 and 0500, every 24 hours.
- Persons receiving only 5 hours per 24 hours over a period of several days will accumulate a significant sleep debt.
- Sleep priority should be assigned to those whose judgment and decision-making are critical to mission accomplishment. If received frequently, 1 hour of sleep or even 15-minute naps help.
- Relaxation exercises complement sleep schedules. These exercises must be used as an alternative or as an aid to help soldiers rest under difficult circumstances.

Task Allocation and Management - Overloading soldiers with tasks or responsibilities is another major source of stress. Allocating tasks fairly among available soldiers improves unit effectiveness as also reduces stress. Proper allocation of tasks should include:

- Selecting the Right Person for the Job - The right person must be fitted to the right task according to the task requirement and the individual's talents, abilities and training.

CHALLENGES TO MAN MANAGEMENT AND COMBAT STRESS IN LIC ENVIRONMENT

- Duplicating Critical Tasks - Two soldiers should be assigned to a critical task requiring mental alertness and complete accuracy. They check each other's work by performing the same task independently.
- Cross-Training -Each soldier should be trained in a secondary duty position to ensure competently stepping into the position of another.
- Developing Performance Support -Develop standing operating procedures, checklists or other mental aids to simplify critical tasks.

Personal and Family Matters -Family stress adds to combat-imposed stress and causes distraction, interference with performance of essential duties and a negative impact on stress-coping ability. The unit should help the soldiers resolve important family matters before deployment and develop methods for helping families. Encourage soldiers to:

- Generate or update their wills.
- Finalize power of attorney.
- Update life insurance policies.
- Develop lists of telephone numbers of contact for specific problems.

Phase 2: Deployment and Combat

In addition to the normal stress associated with moving to an LIC environment, soldiers in this phase will start worrying about their survival and performance under fire. Their thoughts would become centered on fear of the unknown. Leaders should emphasize that stress under these circumstances and conditions are expected, and are a natural reaction. This will help prevent "normal" stress reactions from escalating into extreme reactions. Unit leaders should provide as much information as necessary to their survival and mission success, reinforce the stress control techniques learned during pre-deployment, and help their subordinates understand what happens to them when stressors occur.

- Information Flow -Since uncertainty about the future is a major source of stress, timely and accurate information becomes vital. Lines of communications should be clearly defined and kept open. Informational meetings must be conducted at regular intervals, even when there is no new information to disseminate. This would reinforce the

organizational structure and the importance of unit meetings as the source of current, accurate information. Reliable sources of information are especially important for countering rumors. Soldiers also need information or *performance feedback* after mission completion. *Debriefing* must be conducted after each mission. The knowledge of mission accomplishment and progress builds unit cohesion, develops a winning attitude and reduces the effects of stress.

- Religious Teacher Support -The Religious Teacher is an integrated part of the battalion or unit. RTs are organic to commands. Using their professional training, skills, knowledge and relationship with the soldiers, religious teachers can provide care focusing on prevention of mild and moderate combat stress reactions. Before, during and after the mission, the RT must provide comfort, assurance and encouragement to soldiers as they integrate their experiences into their lives. In addition to being a spiritual/pastoral mentor for soldiers they should be trained in some form of CED process and stress management techniques.
- Physical and Recreational Activities -Soldiers need an outlet for the anger, frustration, hostility, and grief developed in combat. It may be unwise to conduct sports and recreation activities in the open, but these activities can be conducted under adequate security cover. Other activities, such as listening to music, reading or practicing relaxation exercises should be encouraged. Time and access to personal hygiene items and facilities are psychologically valuable in combat.
- Integration of New Unit Members - The arrival of young soldiers requires small-unit leaders to conduct continuous training programs. Leaders must teach newcomers to use stress coping skills. New arrivals should be quickly integrated into their units and made to become thoroughly acquainted with all aspects of the new unit. A brief orientation with a sincere welcome, with JCOs and officer support, would ease transition for combat. It is important that soldiers adjust to a new unit quickly and effectively. If they do not feel they are part of the group, unit cohesion and morale will suffer, decreasing unit effectiveness. New unit members are much more likely to become battle or stress casualties than members of a seasoned and cohesive group. The veterans need to give support and advice to the newcomers, by example and direct action, if necessary.

Phase 3: Post-Combat

Just as pre-deployment and combat are stressful, the period after combat is also difficult. Today's rapid transportation enables soldiers to travel from the battlefield to their hometowns in 48 to 72 hours. This short time often does not give them reflection time with their comrades. Units should, therefore, set aside time to conduct their own debriefing. There should also be appropriate memorial ceremonies and rituals that formally bring the operation to a close. Soldiers must be briefed that startled reactions to sudden noise or movement, combat dreams and nightmares and occasional problems with sleeping, and feeling bored, frustrated and out of place are common when first returning from combat to a peacetime, civilian setting. Soldiers should also be advised on resources available to help deal with such symptoms, if they are persistent and become upsetting. Certain important aspects to be borne in mind at post combat stage are as under:

- Leadership Actions and Interventions for Combat Stress -It is important for military leaders to know something about the treatment of combat stress reactions. As most cases of initial combat stress symptoms do not require medical treatment, it has been found that military leaders are often quite adept at treating less severe cases of combat stress. In most cases, debriefing the mission, including any traumatic events, coupled with rest, food, and sleep, is often sufficient to alleviate the symptoms. If the operational tempo permits the soldier to remain with his unit, and he responds to simple reassurance (e.g., "You just need rest, you'll be okay tomorrow"), he is not a casualty (by definition), and may not require further referral for specialized care. Military leaders in combat often make such decisions. When a soldier requires medical attention to rule out a possible serious physical cause for his symptoms, or because his inability to function endangers himself, the unit, and the mission, he should be transported to nearest medical support facility. Interventions at the small-unit level include:
 - If a soldier's behavior endangers the mission, himself or others the leader should take appropriate measures to control him.
 - If a soldier is upset, let him talk about what is upsetting him, listen, then try to reassure him.
 - If a soldier's reliability becomes questionable:
 - Unload the soldier's weapon.
 - Remove the weapon if there is a serious concern.

- Physically restrain the soldier only when safety is a concern or during transport.
- Reassure unit members that the signs are probably a normal combat stress reaction, and will quickly improve.
- If combat stress reaction signs continue:
 - Get the soldier to a safer place.
 - Do not leave the soldier alone. Keep someone he knows with him.
 - Have the soldier examined by medical personnel.
- If the tactical situation permits, give the soldier simple tasks to do when not sleeping, eating or resting.
- Assure the soldier that he will return to full duty as soon as possible.

There are very few men who can be classified as cowards. Most men have too much self-respect to let their buddies down. It is the rare man indeed who will willingly violate the trust of his peers. The vast majority of men will give their lives rather than violate this trust. In this environment, courage and sacrifice are the rule, not the exception. At any given moment, anyone can be rendered ineffective by fear if one realizes that he is going to die. When this happens to a man, do not overreact. He knows he has let his buddies down, and he knows that his buddies and leaders know he has let them down. This is a very uncomfortable feeling for a combat soldier. To make an issue of this situation will destroy the man and usually alienate the rest of your men. The man will most likely bounce back to his normal performance. The biggest pitfall to be avoided is to judge the man's actions as a failure of your leadership as this will indeed cause you to overreact.

Combat Stress Casualty Management³

Management of combat stress reactions is unlike the treatment of physical trauma. Severely injured soldiers are stabilized as rapidly as possible and then transferred to the rear. In all wars since World War I, combat stress casualties treated in the rear rarely returned to full duty. In contrast, when the same casualties were treated near the front, approximately 75 percent returned to full duty. Of those returned to full duty, only 10 percent experienced continued symptoms requiring further

³ 'Combat Stress', a publication by Dept of the Navy, HQs United States Marine Corps, Washington, D.C.

treatment. Some studies suggest half of those treated at the rear go on to have chronic psychiatric symptoms, and approximately half return to full duty. Therefore, it is clearly in the soldier's best interest to be treated at the front and returned to duty. Guidelines for dealing with soldiers unable to function because of combat stress reaction are summarized in the memory aid BICEPS.

- Brevity - Critical Event Debriefing should take 2 to 3 hours. Initial rest and replenishment at medical facilities should last no more than 3 or 4 days. Those requiring further treatment should be moved to the next level of care.
- Immediacy - Treat as soon as possible.
- Centrality - Soldiers requiring observation or care beyond the unit level will be evacuated to facilities in close proximity. It would be best to send soldiers who cannot continue their mission and require more extensive respite to a central facility other than a hospital, unless no other alternative is possible. The soldier must be encouraged to continue to think of himself as a war fighter, rather than a *patient* or a *sick person*.
- Expectancy - The individual must explicitly be told that he is reacting normally to extreme stress and is expected to recover and return to full duty in a few hours or days. A military leader is extremely effective in this area of treatment. Of all the things said to a soldier suffering from combat stress, the words of his small-unit leader have the greatest impact due to the positive bonding process that occurs during combat. Small-unit leaders should tell soldiers that their comrades need and expect them to return. When they do return, the unit must treat them as every other soldier and expect them to perform well.
- Proximity - In LIC, movements are frequent and treatment of many combat stress cases takes place at hospitals. A visit from a member of the individual's unit during restoration is very effective in keeping a bond with the organization. A soldier suffering from combat stress reaction is having a crisis, and there are two basic elements to that crisis working in opposite directions. On the one hand, the soldier is driven by a strong desire to seek safety and to get out of an intolerable environment. On the other hand, the soldier does not want to let his comrades down. He wants to return to his unit. If a soldier starts to lose contact with his unit when he enters treatment, the impulse to get out of the war and return to safety takes over. He feels that he has failed his comrades and they have already rejected

him as unworthy. The more out of touch the soldier is with his unit, the less likely he will recover.

- **Simplicity** - Treatment should be kept very simple. Psychotherapy should not be done. The goal is to rapidly restore the soldier's coping skills so that he functions and returns to duty again. Sleep, food, water, hygiene, encouragement, work details, and confidence-restoring talk are often all that is needed to restore a soldier to full operational readiness. Every effort should be made to reinforce soldiers' identity. However, if a member fails to adequately respond to actions taken by the unit, then he should be evacuated for appropriate medical evaluation.

Differential Diagnosis of Combat Stress Cases⁴

It is important to keep in mind some of the physical conditions which can produce symptoms similar to combat stress or fatigue. These conditions may coexist with combat fatigue and will require specific additional treatment. These conditions are given as under:

- *Dehydration* -Soldiers may become extremely dehydrated without feeling thirsty especially in hot desert conditions, with NBC protective suits and while wearing arctic clothing.
- *Hyperthermia* -Causes mild elation and excessive energy which may be followed by irritability, disorientation and confusion. When the core body temperature touches 105 F to 106 F he may have visual hallucinations and may turn violent. Hyperthermia may occur in hot climate, cold weather clothing, after heavy physical work and by wearing chemical protective gear.
- *Hypothermia* -Individual gets disoriented when core body temperature falls to 94 F; his skin may feel warm.
- *Head Injury* -Concussion may stun the individual and may cause amnesia, residual confusion and perhaps impulsive behavior. Check scalp, eyes, ears, nose, cranial nerve signs and vital signs for evidence of head injury.

⁴'Combat Stress Behaviors in LIC Environment' published by Defence Institute of Psychological Research (DIPR).

- *Spinal Cord Trauma* -Spinal trauma may lead to spinal shock and loss of sensory and motor functions below the level. The loss of function may be unilateral, bilateral or partial. These cases could be confused with paralysis and sensory forms of combat fatigue.
- *Air Embolism and Focal Brain Ischaemia* -High blast pressure from high explosive shells or a nuclear blast may produce air emboli and focal brain ischaemia. Air bubbles may re-absorb and functional recovery may occur in minutes or weeks. However, symptoms may persist as functional type of combat fatigue.
- *Substance Abuse*
 - Intoxication or withdrawal from alcohol, barbiturates and benzodiazepines may be mistaken for combat fatigue.
 - Over use of stimulants may cause panic attacks, manic hyperactivity, rage attacks or acute paranoid schizophrenia like condition. Cessation or stimulant use may cause depression.
 - Hallucinogenic drugs cause sensory distortion, panic, bizarre thoughts and potentially dangerous actions.
 - Phencyclidine blocks pain, produces psychosis and makes a person abnormally strong. Physically restrain the patient and sedate with diazepam or lorazepam.
- *Anticholinergic Delirium* - Atropine is used as first aid against nerve agents. Atropine like effects may be produced after eating certain plants like Datura. Causes rapid pulse, dry skin, dilated pupils, disorientation and hallucinations. Keep the patient cool and give diazepam. Avoid antipsychotics.
- *Major Psychiatric Disorders* -These conditions will continue to occur in combat soldiers at peace time rates. A few soldiers who have undergone treatment on own arrangement may come with relapse after their medicine supplies is exhausted.

- *Endemic Bacterial, Viral and Parasitic Infections* -A definitive diagnosis of any organic or functional psychiatric disorder will be given only after adequate observation at a Base, General or Military Hospital by a psychiatrist.

Psychological First Aid of Combat Fatigue Cases

Most of the combat fatigue cases with ‘normal signs and symptoms’ or with ‘early warning signs and symptoms’ can be given psychological first aid in the operational area itself by buddies, small unit commanders, paramedical personnel or at RAP. This simple technique includes the following:

- Remain calm and calm the soldier. Talk and find out the problem.
- Show understanding or even identify with him. Reassure the soldier.
- Provide emergency treatment to life and limb threatening conditions.
- Treat combat fatigue while covertly observing for other more serious conditions.
- Treat as soldier not as sick.
- Keep combat fatigue cases separate from other serious patients.
- Keep treatment deliberately simple and provide hygiene facilities, food and sleep.
- Avoid sedative and antipsychotic drugs.
- Severely disturbed cases should be evacuated to the next higher echelon.

CHAPTER 8: CHANGES AND CHALLENGES

The challenge the country faces is that the society has changed very quickly for the military. The imprint that gave rise to the armies of the 20th century, and the imprint around which they have become institutionalized, is no longer as aligned as it once was to contemporary challenges. There is a need to have a good assessment and understanding of these new challenges and changes, but ultimately align these internal structures with this environment; and at the same time overlay it with the notion that in this country, there is a pressing need for an effective military⁵. Our aspirations of emerging as a major global power can never be achieved without the corresponding development of a strong military set up. Towards this end, we need to highlight and reinforce the fact that the problems facing the Army are indeed the problems facing the country and that the nation as a whole must take collective responsibility to redress this situation. To alleviate the problems being faced by the Army certain other issues, besides what have been covered in the previous chapter, need to be deliberated upon. Many of these may not have a direct bearing on a soldier but in the overall analysis they would link up. Such issues would invariably require an institutionalised approach for them to benefit the Army.

Change in Mindset

Our approach of 'fixing responsibility' every time there is a goof up may need a relook especially in LIC context. It is routine for our higher commanders to blame the soldier on ground and find a scapegoat. Punishment is swiftly meted out with a view to 'nip the problem in the bud' - this, for committing an aberration inadvertently while following orders 'to produce more visible results'. Such a lopsided approach leads to frustration and disgruntlement amongst the affected individuals. There is, therefore, a need to effect changes in our system of '*fault finding*'.

For such a change in our mindset to be imbued, the higher hierarchy must share the enthusiasm and exuberance of the junior leadership. Higher HQs must provide unambiguous guidelines for operating in LIC environment and thereafter give units the freedom to plan and execute tasks on ground. They must neither try to impose and template the GS pamphlets on to LICO, which is a sure recipe for disaster, nor should they interfere too much in the operations being undertaken by the units. In stead HQs should be handling non-operational issues like human rights, political issues, and media and provide logistic support to the troops so that units can then concentrate on the job at hand. This relative freedom of action will give a sense of purpose and achievement to the

⁵ *An Unappealing Military Career*, The Indian Economy Blog, 15 Oct 2007. www.indianeconomy.org.

troops. On the other hand, if and when an aberration occurs the higher HQ must hold the hands of the affected unit; basic aim being to generate confidence in our hierarchy. Corrective action must follow but unobtrusively.

Concept of Welfare⁶

Welfare today entails provisioning good medical, educational and housing facilities for the troops and facilitating adequate time to spend with their families either in the form of timely leave from field areas or by reducing commitments in the peace stations. Peace stations are hard-won interludes between intense CT operations and LC tenures. We must identify activities which can be permitted in peace stations to enable troops to rejuvenate. Training must be realistic, crisp and mission-oriented to instill self-confidence in combatants. Non-training activities must be curtailed with a view to minimize the non core-competence activities. Stability of tenure, quality time with the wife and children and resemblance of a regular family life are simple yet great healers which no mental health professionals or psychologists can provide.

Bureaucracy Within

Ironically, while we constantly bicker about the bureaucratic bottlenecks we encounter in our day to day functioning in the civil administration or in the Ministry, in the recent years we have created our own bureaucracy within the Army.⁷ There is an urgent need to cut down all but very essential paperwork and simplify the procedures. Numbers of reports and returns a unit is expected to file to the higher HQs are mind boggling and most of these need to be scrapped. The office procedures need to be made time bound. We must consider evolving a single-window clearance for all the needs of soldiers i.e. leave certificates, withdrawals from provident fund, loans, transfer applications, publication of part two orders etc. Other simplified procedures like quick admission of children in central/ army schools and smart card option to enable travel, hospital and canteen facilities without unnecessary formalities will also contribute in reducing stress, besides enabling a soldier to focus on his assigned duties. This will also enable the officers and the junior leaders to spend more time to interact with the men rather than sitting in an office trying to meet deadlines.

⁶ 'Stress Management in the Armed Forces' by Maj Shailender Arya, Journal of the USI of India, Vol. CXXXIX, No. 576, April-June 2009.

⁷ Same as above.

Government Policies

For a soldier the government is a very powerful entity. Any welfare measure for soldiers by the government has tremendous impact on the morale of troops. That is the reason why each pay commission and every annual budget is awaited with bated breath. But, when one reads about the bureaucracy trying to 'clip our wings', where no wing exists, and learn of some high ranking government official talking of 'teaching us a lesson' for questioning the disparity existing amongst the central government organisations, it certainly creates a sense of *déjà vu*. The government must think 'long term' and help maintain the high standards of defence preparedness at all times. This entails recruiting the best candidates for commissioning as officers, implying that the Armed Forces be made more attractive in terms of *pay, perks and promotions*. The least it can ensure is to bring it at par with the civil servants, which is not too much of an asking considering the kind of risk to life a soldier faces in his career as compared to all other central government employees who operate from the comforts of their air-conditioned offices while drawing more allowances and getting faster promotions, not to mention the other sources of income.

⁸In the mean time there is a need to implement a time-bound system of addressing the civil grievances of the serving soldiers. This system should have legal sanctity and should be enforceable in a court of law. The government needs to go beyond mere redressal of grievances. This involves strengthening of land-records and land-revenue documentation down to village level so as to ensure that the lands of the soldiers are not encroached upon, causing them undue worry at their place of duty. The police must respond positively to a soldier. The soldiers should be accorded priority in official and legal dealings due to the limited duration of their leave. The government may also consider granting priority in seats for their wards in educational institutions including vocational training and professional institutions. The help of the government is also needed for infrastructural development to create adequate facilities for the soldiers in the military stations and cantonments. This includes increasing the authorisation of married accommodation and its construction, creation of schools, colleges, hostels, hospitals and other basic infrastructure. The last issue is of compensation; soldiers must get what they deserve, or in any case a pay package which reasonably satisfies the aspirations of the troops. A neglect of this issue will negate many other strengths of the organisation.

Leadership

⁸'Stress Management in the Armed Forces' by Maj Shailender Arya, Journal of the USI, Vol. CXXXIX, No. 576, April-June 2009.

Good leadership and training are the real antidote for combating stress. Majority of the operations, especially the counter insurgency operations, are fought at platoon and company levels; hence platoon and company commanders must plan and execute missions by leading from the front and setting personal example. The leaders, either it be the commanding officers or brigade commanders, must be seen and their presence felt by all rank and file. Troops should develop confidence in the professional abilities of their commanders. While moving out for operations they must be convinced that the operations have been planned and ordered after due deliberations and all assistance for their success catered for. During execution of operations, men must see their commanders facing the same hardship and dangers to life as being faced by them. For a soldier it is a motivational leader whom they would follow with little care for personal comfort and with utter disregard to personal safety. Leaders, therefore, at all levels up the chain need to be equally involved in the life of a soldier. Constant interpersonal communication at every level will ensure that his *social need of belonging* is satisfied which, as per Maslow,⁹ a renowned behavioral scientist, is one of the basic needs of a human being for enhancing motivation. A good leader is the difference between a good unit and a not-so-good unit.

At the unit or subunit level, it is critical for the officers to understand the behaviour of the personnel and select the right person for the job while helping others to adjust in the group. Soldiers and officers must be able to relate to each other as trained professionals. The role of junior leadership in minimising stress is crucial. In recent wars such as in Afghanistan, the crucial and in a way “strategic” role of corporals and sergeants has already been recognized in the Special Forces. The Indian Army is no different. Here too, from the small team operations in LICO to the nitty-gritty of training activities, finally the mantle of execution falls on the junior leadership. We need to bring about an institutional change in delegation of combat and administrative tasks to JCOs/NCOs¹⁰.

Enhancing the Role of a Soldier

Stephen R. Covey, in his international bestseller *The 7 Habits of Highly Effective People*, underlines that the effectiveness of people lies in maintaining the *P/PC* balance, where P stands for ‘production’ of desired results and PC stands for ‘production capability’. Our quest for short-term returns should not ruin the PC which is much more important in the long-term. This involves due focus on the human resource development of a soldier with adequate promotional avenues and organisational support for his housing, health and educational needs. It also includes equipping a

⁹ *Management of Organizational Behaviour: Leading Human Resources* by Hersey, Blanchard and Johnson.

¹⁰ *Conscription is not the Answer* by P.K. Gautam, 25 Jan 2008, IDSA Strategic Comments, www.idsa.in.

soldier with the latest weapons and equipment, ensuring hardware superiority over the adversary. A good *P/PC* balance will also involve moderating the demands on the troops in CT operations.¹¹ The emphasis must shift from counting kills or surrenders to environment management and own man-management. The nation must not degrade its conventional military capabilities for non-conventional tasks.

Religion as a Source of Strength

Religious beliefs, spiritual pursuits and faith in something greater than man can be major sources of strength for daily living and times of crisis. Choice is ours for the making. One very important facet in our unit's day to day routine is the regular '*Mandir*' or '*Gurudwara*' parade in which everyone gets an opportunity to pray and seek solace. This acts as a great catharsis for relieving us of our fears and stresses. It is often seen that men develop great faith in something supernatural in times of adversity. They start to believe that they are not alone in their struggle, and that God is personally blessing them. This safeguards them against the psychological isolation that batters so many people with serious psychological disorders.

Harvard Medical School, Associate Professor, Dr H Benson has brought new understanding of the physiology involved in such healing faith. He notes that 60 to 90 percent of doctor visits are for stress related illness- including hypertension, infertility, insomnia and cardiovascular disease. But Benson has shown that the relaxed state brought on by prayer and meditation reduces the impact of stress hormones and helps in curing the ailment.

Nurturing Positive Psychological Emotions

- *Loyalty to Comrades* - First and foremost among the positive psychological emotions is one's loyalty to his comrades. One may not bother about causes, country, even kith and kin, but one always cares for his comrades, their safety and welfare. This *comraderie* transcends all caste, community, race, religion and almost all barriers. This should be nurtured assiduously in times of peace, so that it comes good in war.
- *Ego* -Every nation gets the army it deserves. In a nation like ours where there is no conscription, it is the bounden duty of every citizen to show utmost regard and concern at

¹¹ *The 7 Habits of Highly Effective People* by Stephen R. Covey, Simon & Schuster UK Limited, London.

all times for the welfare of the men in uniform. A soldier's ego should be nurtured. Uniform should become a symbol of pride. If a soldier feels proud to wear the uniform, he can be expected to live up to the ideals of valour and self-sacrifice in war. Police and PMFs should not be allowed to wear uniform or badges of rank even remotely resembling those of the Armed Forces. The prestige given to the military uniform and to the men wearing it in peacetime will pay rich dividends to the nation in times of war.

- *Hope* - Hope is the best preservative in war. If a man can look forward to leave, re-uniting with his family or best of all winning a decoration and going back home after the war as a hero, he carries on regardless. As Napoleon has said "Men are ruled by their vanity" and again "What will a man not do for a piece of ribbon? "
- *Morale* - Eisenhower had said "Attention to the individual is the key to success." Generally, a soldier who feels that everything possible under the circumstances has been done for him, and who trusts his superiors and comrades, and believes in the cause for which he is fighting, is bound to have high morale. High morale reduces stress to a great extent as it reduces the effect of stressors on the human mind.

Medical Strategy

In 2007, Armed Forces had proposed to hire 400 psychologists in five years as a part of their strategy to resolve the issue of combat stress. There were two major flaws in this proposal. Firstly, it did not address the problem 'today' especially since we are critically placed on the matter with stress triggered incidents on the rise. Secondly, it did not address the need for creating an environment for preventing such incidents; instead addressed the issue of dealing with the problem after it had manifested itself.

Presently, on occurrence of a combat fatigue case, Form 10 is initiated and individual is subjected to anti depressants and other prescribed medications. He is also subjected to Electro Convulsive Therapy and, over a course of time, boarded out of service. As a result, the soldier who has contributed so much to the organisation by performing duty in extremely inhospitable conditions becomes a non-entity, left to fend for himself and his family in the harsh world outside.

There is a need, therefore, for the Armed Forces to evolve a more soldier-friendly approach in dealing with cases of combat fatigue or any other stress related psychological disorder. Perhaps, we

should consider supplementing conventional treatment with unconventional stress coping techniques like YOGA, acupressure, massage, sound therapy, music therapy etc. In view of the immense potential of SudarshanKriya (SKY) as a stress combat technique (as brought out in the previous chapter), and keeping in mind its curative qualities, it is ideally suited to form the fulcrum of a proposed *stress alleviation programme* around which other coping mechanisms could be factored in. The broad frame work of this strategy could be as under:

- Take up SKY as an experimental measure for a period of two-three years and analyse its effects. Soldiers serving in difficult areas should be exposed to SKY purely as a stress relief technique.
- This should be treated as a welfare project for self development. Such an arrangement would ensure that the workshop is conducted in a controlled environment where participation could be made voluntary.
- Workshop could be offered to volunteer trainees or even made a part of the curriculum at Training Institutions.
- The medical fraternity could introduce SKY as a complement to conventional medicines in the treatment of various stress related diseases.

Media Management

This is one aspect where the Army is lagging and lacking. Often, there is a complete media ban. Only formation commanders are given the clearance to interact with the media and issue statements. While it may be prudent to remain media shy, in the long run we are the losers. During Kargil war media gave wonderful accounts of the exploits of our soldiers and this fostered a very positive image of the Army. There has definitely been some progress since then, but a lot more needs to be done. The nation needs to know what is happening in J&K or parts of the NE. They need to appreciate the efforts made by the Army towards nation building. Due recognition of its effort will be felt when the public develops more respect for the uniform. In turn, such public adulation can act as a balm for the fatigued soldier for whom each and every positive stroke is an energizing potion.

Training the Police

Pressure on the Army can be reduced to a large extent in case we have a better trained police force which could share the load of fighting the militants. What must be borne in mind is that the difference between the two forces is in its leadership and the degree of training – that is all. Else, they are from the same stock. To begin with, good training can be imparted. Modalities for training can be worked out between the Ministry of Home and the Defence Ministry. The long term gains would be immense if this can be implemented.

The recent massacre of 76 policemen by the Maoists is indicative of lack of proper training. Perhaps, calling in the Army would be the easiest way out, but not as a long term measure. In stead if police can be inducted into these areas after intense anti-insurgency training they would do an equally good job of it. The same could be replicated in other states as well. It is a question of a joint approach by the Centre and the State governments.

Joint Approach to Insurgency

Pumping in more forces is not a solution to the problem of insurgency. To that extent our fundamental approach to insurgency operations needs a revisit. At present Army is fighting on its own most of the time with little or no assistance from the civil administration and police. A joint doctrine needs to be evolved by Govt of India wherein the instruments of the State Govt i.e. the civil administration, police and the judiciary need to be strengthened, and unity of effort ensured between all the agencies operating in the environment. The concept of Unified Command needs a revamp to make it more effective and efficient. Keeping the type of operations in view it would be prudent for the State governments to give more handle to the Army without worrying too much about protocol and precedence. In fact, it should be mandatory for the officials, say, the Home Secretary and the officials dealing with law and order of the affected states, to get an orientation course on LIC operations when newly posted in. This would obviate a great deal of unwanted bureaucratic hassles while interacting with the Army.

This besides, if the population of the state can be mobilised through all the available resources it could mark the end of militancy. The military civic action must continue as hitherto fore. A little effort by the state machinery to provide security and good governance to the populace would then facilitate faster mobilisation of the people against the militants. No militancy can survive without local support. External support by interested neighbours can be denied through proactive

international diplomacy by garnering support against terrorism and militancy. Thus, forging a joint approach amongst all the instruments of the government would certainly expedite the process of neutralising militancy.

CHAPTER 9: CONCLUSION

“When employing the Army in LICO, conflict management rather than conflict resolution will be the political objective. Therefore, operational objectives and intensity of operations should be oriented towards achieving a qualitative improvement in the situation which may not necessarily be possible in a short timeframe. It will be preferable to aim at low profile and people-friendly operations rather than high intensity operations related only to body and weapon counts.”¹ Given the present state of affairs in the country LIC is here to stay. The conflict situations will continue to provide multi-dimensional challenges to the Army in dealing with subversion, terrorism and militancy where the men in uniform will get involved over protracted periods. The armed forces will continue to fight with virtually their hands tied behind their back in view of several immunities to the militants, inadequate support from civilians, adverse media coverage, intelligence vacuum, lack of clear political directive *et al.* The complex situations which have given rise to many psychological problems will continue to plague the Army. In such a hostile and adverse atmosphere, our soldiers need to be highly motivated and a high degree of man management by the leadership is required to combat insurgency and its attendant problems.

At a macro level, LICs are a serious threat to regional political stability and a big drain on the country's economy. Moreover, they generate social tensions, dividing people along caste, ethnic, communal, sectarian and regional lines. They need to be tackled in a comprehensive manner. India will have to evolve a long-term policy for tackling LICs, and has to examine the basic causes that have led people in a particular area to take up arms. These causes should be analyzed threadbare and the legitimate grievances addressed. At the same time, there should be a conscious effort to bring disaffected groups into the national mainstream without snapping their cultural moorings. LIC operations should be well orchestrated, with complete unity of command at the apex. Human rights must be respected and there should be no recourse to short-cut methods. Intelligence available with different agencies should be pooled together. External support, where it exists, must be cut-off. The local police needs to be energized and motivated to engage the insurgent outfits. The paramilitary forces require greater mobility, weaponry and improved communications. It will also have to be ensured that the right force is deployed at the right place. There is also an urgent need to reform the civil administration in order to make it more loyal, committed and responsive to the aspirations of the people².

¹ *Indian Army Doctrine* published by HQ Army Training Command, 2004.

² *An Indian Assessment of Low Intensity Conflicts & High Intensity Crime* by Prakash Singh* in Faultline Volume 5.

To that extent, Government of India claims to have a multi-dimensional strategy to tackle the situation. It includes, *inter alia*, strengthening the border management, neutralizing the militants by proactive action against them, gearing up the intelligence machinery, reorganizing the police forces and giving them sharper teeth, raising special battalions of Central Paramilitary Forces for counter-insurgency operations, providing the Village Defence Committee (VDCs) with sophisticated weapons and integrating them with the counter-insurgency grid, greater functional integration through an improved institutional framework at the Unified Headquarters and, at the same time, accelerating the economic development of the affected states³. The year 2009-10 witnessed several new measures taken by the Government to strengthen the security apparatus of the country to equip it to meet the grave challenge posed by global terrorism. These include operationalization of the National Investigation Agency (NIA), establishment of four National Security Guards (NSG) Hubs to ensure quick and effective response to any possible terror attack, augmentation of the strength of Intelligence Bureau (IB), strengthening of the Multi-Agency Centre in the IB to enable it to function on 24 X 7 basis and strengthening of coastal security. The measures are specially aimed at improving the overall internal security situation after the terrorist attack in Mumbai in November 2008. The Centre has taken some major initiatives to deal with the menace of Naxalism and, after wide-ranging consultations with the Naxal affected States, approved a joint action plan to kick off coordinated and combined action, especially at the bi-junctions and tri-junctions of the affected States. Funds are being provided to the States under the Police Modernization Scheme to modernize their police forces in terms of modern weaponry, latest communication equipment, mobility and other infrastructure.⁴

In the mean time, it is the responsibility of the Army to take care of its problem of combat stress and related man management challenges. First thing is to admit the fact that there is a problem – a problem of combat stress and related man management issues. Secondly, it must identify measures to be implemented, some of which have been outlined in this study, to minimize this problem since elimination would be nigh impossible. And lastly, it must follow up on these measures on a war footing *without creating yet another cause for stress*. Charity begins at home. So, before one can point a finger at the government for its apathy and partisan approach to all problems military, we must put our house in order first. We must remember that the younger generation of soldiers and officers are not much different from their counterparts in other professions. They are willing to make positive contributions to improve the system, but in the absence of organisational willingness to change, they are confronted with a *status quo* quagmire. To mitigate stress and related man management problem, we need to change faster than the world, capitalise on our inherent strengths

³Government of India, Ministry of Home Affairs, *Annual Report 1998-99*, p.26.

⁴Government of India, Ministry of Home Affairs, *Annual Report 2009-10*, p.6-7.

and reduce the operational commitments to a manageable level.*It's a mental and attitudinal battle whose result is not dependent on government largesse but hinges on our own ability to swiftly reform the organisation*⁵.

⁵ *'Stress Management in the Armed Forces'* by Maj Shailender Arya, Journal of the United Service Institution of India,

APPENDIX A

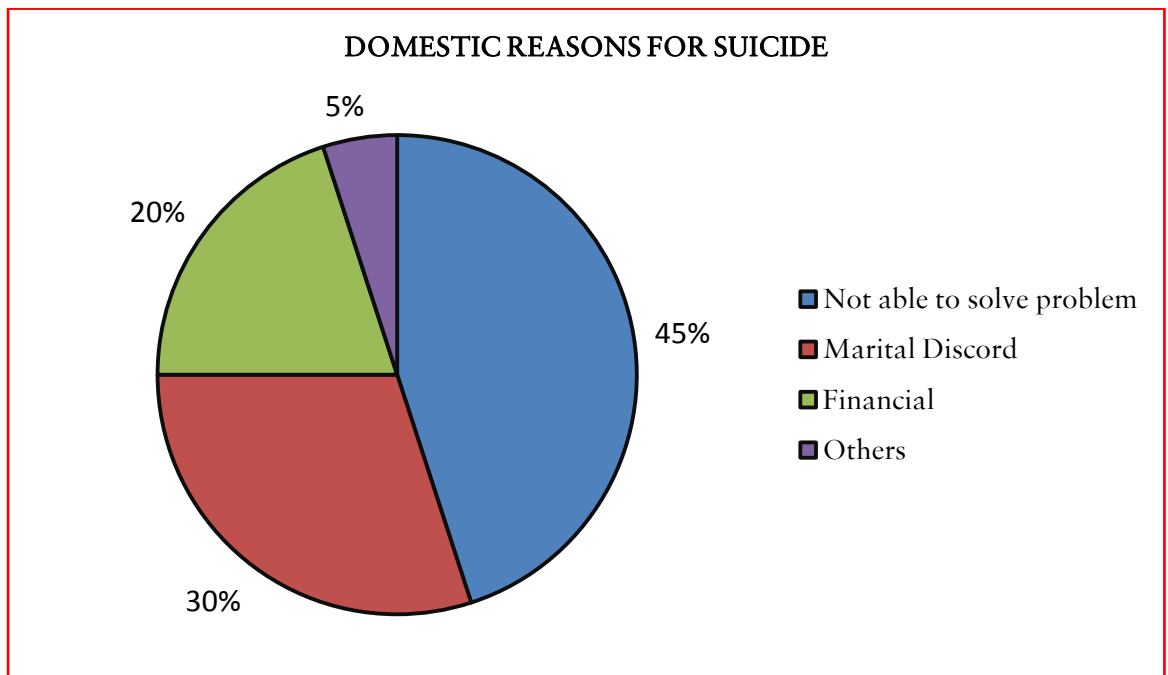
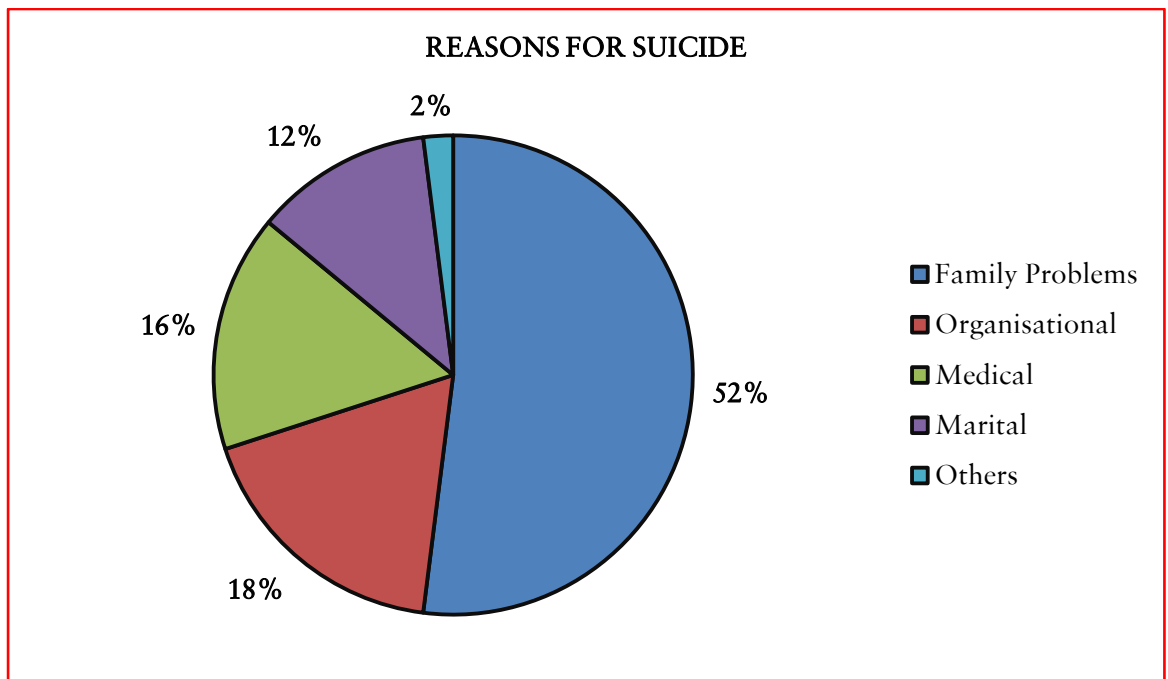
15 Corps Study Report on Stress and Incidents of Suicides

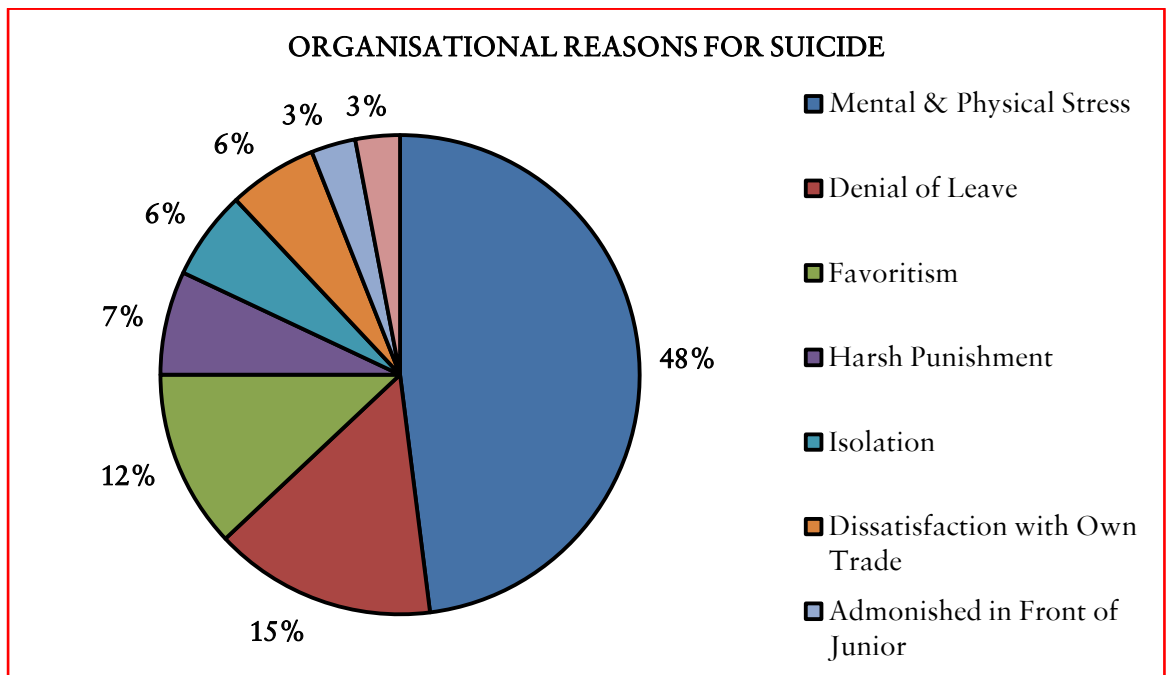
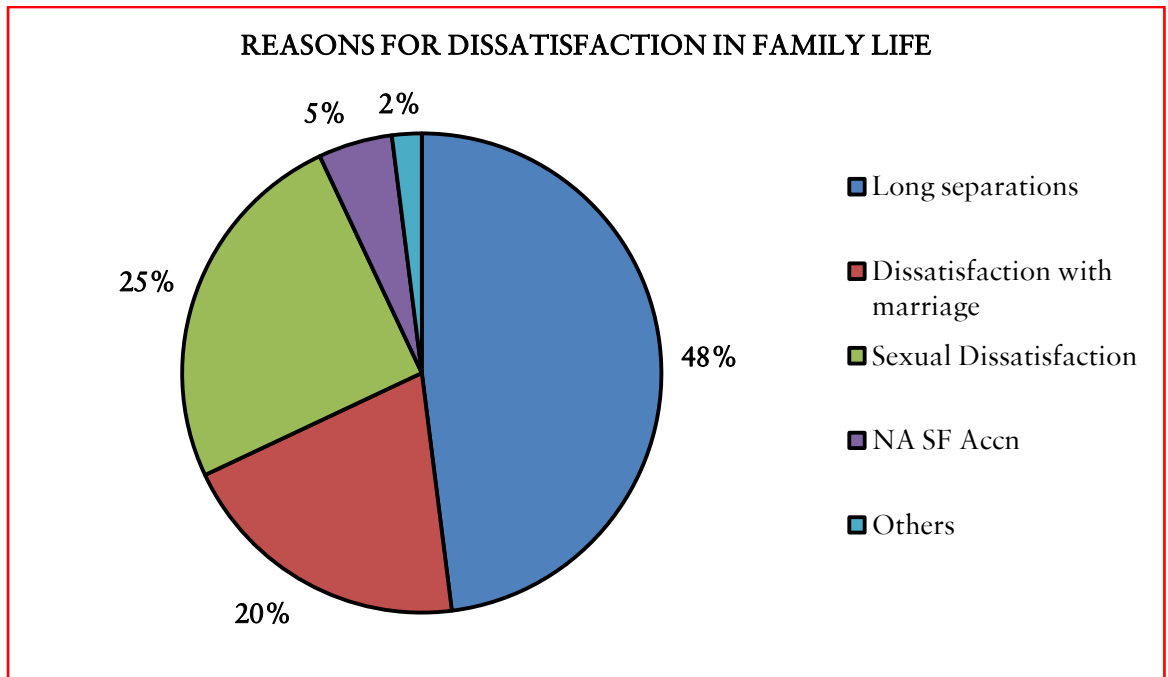
A total of 100 officers and 350 other ranks were surveyed across all formations of 15 Corps. Answers were sought based on questionnaire forwarded to respondents. Interviews were conducted wherever felt necessary. The reasons for stress and incidents of suicide and fratricide were summarized as under:

- **Operational**
 - Pressure of killing maximum terrorists.
 - Pressure of relentless operations in hostile terrain and weather.
 - Lack of clear objective.
- **Occupational**
 - Harsh living condition.
 - Insensitive behavior of superiors and lack of individual space.
 - Lack of interaction with chain of command.
 - Inability to express oneself.
 - Lack of timely leave.
 - Favoritism and poor man management.
 - Odd working hours.
 - Overload and ambiguity of role and tasks.
- **Administrative**
 - Lack of source of entertainment.
 - Bad living condition.
 - Non adherence to basic unit routine.
 - Lack of awareness amongst soldiers.
- **Social**
 - Breakdown of joint family system.
 - Prolonged separation from family.
 - Inability of a soldier to be present for important social functions.
 - Insensitive attitude of local administration towards a soldier's problem.

- Increased financial needs due to social demands.
- Rising aspirations of children and spouses of soldier.

CHART DEPICTING REASONS FOR SUICIDE





APPENDIX B

Extracts from Study on Factors Contributing to Stress and Inter-Personal Violence among Army Units deployed in Active Operational Areas

The study, projected by 92 Base Hospital, was sponsored by DGMS (Army). This was undertaken with a view to investigate the possible causes of interpersonal violence among service personnel deployed in active operational areas. Some of the major findings of the Study related with stressful situations are enumerated as follows:⁶

- Other ranks (OR) were found to be higher on neuroticism as compared to JCOs and Officers. They were highly sensitive to stressful environmental situations and displayed low degree of stress tolerance. They also displayed low self-esteem, excessive and conflicting motivations, emotional instability and inadequate coping prowess.
- In an environment of constant threat to life, loneliness, lack of communication and inadequate inter-personal relations led to alcoholism among OR and JCOs.
- Empathy was considered important for people in leadership positions. Officers committed in combat perceived themselves to be more understanding of others' feelings, needs and sufferings as compared to JCOs and OR.
- OR and JCOs were found to be significantly higher on measures of pessimism as compared to officers. They had the tendency to look upon the future with uncertainty, disbelief and disdain.
- OR and JCOs were found to be more introverts as compared to officers. OR and JCOs were more self –oriented, sentimental and idealistic than realistic. They appeared to be highly ego-involved in competitive situations and thus vulnerable to threat of failure.
- The expression of anger differed drastically among officers, OR and JCOs. The officers preferred to give vent to their anger verbally i.e. by shouting, abusing, humiliating etc.

⁶ Courtesy Defence Institute of Psychological Research (Extracts of a Study Report on Interpersonal Violence among Armed Forces units deployed in Insurgency Areas).

whereas OR tended to become physical and thus, resort to beating and taking the extreme step of shooting.

- Among OR and JCOs, the expression of anger was more displaced and intra-punitive as compared to officers. The JCOs and OR displaced their anger on less powerful, instead of the direct source of anger and most of the time it was directed inwards i.e. against oneself. This led to accumulation of frustration and feelings of helplessness. This tendency often resulted in OR taking up arms for seemingly small issues such as sanctioning of leave etc.
- OR who experienced most stressful conditions considered harsh nature of job also as an important cause of stress & inter-personal violence.
- An overwhelming majority of OR, JCOs and Officers have cited poor man-management, feeling of injustice and domestic problems as key causes of inter-personal violence.
- The overwhelming majority of officers, JCOs, and OR reported that constraint threat to life; poor man-management; injustice, and humiliation were main causes stress resulting in suicides and self-inflicted injuries.

APPENDIX C

Causes of Interpersonal Violence

PERCENTAGE VALUES OF FACTORS PERCEIVED/ NOT PERCEIVED (YES/NO) AS CAUSES OF INTERPERSONAL VIOLENCE AMONG OFFICERS (87), JCOs (98) AND JAWANS (172)

Causes of Inter-Personal Violence	Officers			JCOs		
	Yes(%)	No(%)	Chi-square	Yes (%)	No (%)	Chi-square
<i>Poor man-mgt</i>	85.5	14.5	29.82**	76.5	23.5	21.78**
<i>Injustice</i>	79.0	21.0	19.76**	81.5	18.5	30.86**
<i>Domestic problem</i>	67.7	32.3	7.12**	72.8	27.2	16.00**
<i>Disrespect to religion</i>	54.8	45.2	0.40	49.4	50.6	0.00
<i>Humiliation</i>	85.5	14.5	29.82**	61.1	30.9	11.11**
<i>Lack of communication</i>	27.4	72.6	11.76**	61.7	38.3	4.00**
<i>Alcohol</i>	24.2	75.8	15.50**	69.1	30.9	11.11**
<i>Loneliness</i>	40.3	59.7	1.95	70.4	29.6	12.64**
<i>Poor interpersonal relations</i>	53.2	46.8	0.15	65.4	34.6	7.11**
<i>Nature of job</i>	46.8	53.2	0.15	56.8	43.2	1.23**

** p <.01. *p<.05

Causes of Interpersonal Violence	Other Ranks		
	Yes (%)	No (%)	Chi-Square
<i>Poor man-mgmt</i>	80.0	20.0	60.01**
<i>Injustice</i>	85.3	14.7	83.30**
<i>Domestic problem</i>	78.8	21.2	55.35**
<i>Disrespect to religion</i>	52.3	47.7	0.29
<i>Humiliation</i>	74.7	25.3	40.52**
<i>Lack of communication</i>	67.7	32.3	20.48**
<i>Alcohol</i>	58.8	41.2	4.95*
<i>Loneliness</i>	88.2	11.8	97.89**
<i>Poor interpersonal relations</i>	74.7	25.3	40.52**
<i>Nature of job</i>	74.1	25.9	38.59**

**QUESTIONNAIRE ON PHYSIOLOGICAL, PSYCHOLOGICAL AND ORGANISATIONAL
FACTORS**

Ser No	Questionnai re	Percentage							
		A	A	B	B	C	C	D	D
1.	Do you think the level of training given to you before committing you in actual operations was adequate?	Adequate	60	Partial True	10	No	22	Can not say	08
2.	Are you convinced about the cause for which you are fighting the enemy and or militants?	Yes	80	No	10	No Comment	02	Can not say	08
3.	Has there been a gradual decline in discipline and values in the recent past?	Yes	11	Partial yes	04	Can not say	08	No	77

CHALLENGES TO MAN MANAGEMENT AND COMBAT STRESS IN LIC ENVIRONMENT

4.	Do you get to go on leave to meet the important family commitments?	No	0 1	No	0 7	No	7 1	No	2 1
5.	Do you have complete trust in your company /battery/ squadron commanders ?	Yes	7 4	No	1 1	Not at all	0 6	Not sure	0 9
6.	Do you feel that higher commanders will hold your hand at the time of crisis?	Yes	3 0	At times yes	3 0	Seldom	1 2	No	2 8
7.	Do you think that the organisation is making adequate efforts towards your rest, recreation and personal growth?	Yes	4 1	At times yes	0 7	Not sure	1 1	No	4 1

8.	Do you think undue pressure is put by higher HQ / senior commanders to show tangible results in operations?	Yes	64	No	21	At times yes	06	Not sure	09
9.	Do you think only deserving personnel are recommended for gallantry awards?	Yes	75	Most of the time	10	Not sure	10	N0	05
10.	Do you think your family will be well looked after if something happen to you during the ongoing operations?	Yes	62	Only in the initial period	08	Not sure	15	No	15

CHALLENGES TO MAN MANAGEMENT AND COMBAT STRESS IN LIC ENVIRONMENT

11.	Do you think one of the reasons of low morale in the army is?	Corruption which has set in the army	37	Better off counter parts in services	15	Better off counter parts in civil	08	Too much stress	39
12.	Do you think your family is getting totally neglected?	Yes	15	Partially	38	No	47	-	0
13.	Do you think you find it difficult to operate because of Human Rights Problems?	Yes	60	Partially	21	No	19	-	0
14.	What do you think while going for an operation?	Fear of unknown	0	Remember my family members	02	Aim to kill max No of enemy / militants	98	Pray to God to come back unscathed	0
15.	Who do you think is responsible for such a poor state of Army in CI operations?	Commanding Officer	01	Senior Mil officers	07	State Government	71	Central Government	21

16.	Who is more reliable during CI operation?	Paramilitary Forces	1 2	Militants family	0	Local sources	8 8	Police	0
17.	Reasons troops fight for	Units prestige	1 5	Own Izzat	0 5	Religion says so	0 1	The Country	8 0
18.	Do you have confidence in your superior?	Yes	8 9	Seldom	0 7	No	0 1	Not at all	0 3
19.	Do you feel JCOs are not able to do full justice to their job, as they are quite old?	Yes	2 2	No	6 0	Not sure	1 4	-	0 4
20.	Who is maximum responsible for stress in your day-to-day life?	Commanding Officer	2 6	CHM	5 1	Company Commander	1 5	Senior JCO	0 8
21.	Do you think that visit by senior officers be banned?	Yes	2 7	Can be reduced	3 6	No	3 6	-	0

CHALLENGES TO MAN MANAGEMENT AND COMBAT STRESS IN LIC ENVIRONMENT

22.	Do you think that you work for fear of reflection in confidential report?	Yes	1 8	At times, yes	2 1	No	5 3	Not sure	0 8
23.	Only slimy, tricky and well connected people go up the ladder	Yes	5 5	Partially true	2 6	No	1 5	-	0 5
24.	Best way to compensate hardship of army.	Increase pay to minimum 50% more	2 3	Increase in public support	5 5	More freedom of action	1 4	More legal cover	0 8
25.	Best way to deal with a militant is to	Kill him	4 3	Hand over to police	0 1	Interrogate him	5 6	Leave him	0 1
26.	In last 10 years you as an individual have been in peace for ...years	More than 9	0 1	Less than 9	7	Less than 6	3 3	Less than 4	5 9
27.	The ideal age of a Nb Sub is ...years	30-35	1 3	36-38	5 9	39-40	2 4	41-45	0 5
28.	Your superior counsels you regularly	Only once	2 1	Several times	4 6	Never	2 7	Only in interview	0 5

29.	Periodicity of proceeding on leave	Six monthly	0 8	Four monthly	2 8	Three monthly	6 2	Once in two months	0 2
30.	No of days leave granted in one year (days)	More than 90	2 0	61-90	6 3	30-60	1 7	Less than 30	0
31.	Quality of equipment provided for crew or section / platoon	Good	4 8	Satisfactory	4 5	Poor	0 3	Very poor	0 3
32.	Quality of clothing provide	Good	3 2	Satisfactory	4 5	Poor	1 5	Very poor	0 8
33.	Own weapons provided for task vis-vis adversary / militant	Superior	6 9	At par	2 7	Inferior	0 2	Very poor quality	0 1
34.	Quality of equipment 'on person' when go out for operation	Good	5 5	Satisfaction - Tory	3 4	Poor	0 7	Very poor	0 5
35.	Getting hours of sleep every day	10-12	2	8-10	0	6-8	6 4	4-6	3 4

CHALLENGES TO MAN MANAGEMENT AND COMBAT STRESS IN LIC ENVIRONMENT

36.	Average time given for rest and recreation (Hours)	10-12	0	8-10	5	6-8	2 9	4-6	6 7
37.	Do you think that officers are more concerned about their own career rather than the well-being & try of men under their command?	True	3 6	Partially true	1 1	Can not say	0 9	Untrue	4 4
38.	Do you think that the actions being taken by commanders (at all levels) are adequate to reduce tensions / stress?	Adequate	4 2	Partially adequate	0 8	Inadequate	3 9	Not sure	1 1

39.	Do you think that the values, leadership qualities are more important than any other skill/ technique?	Yes	81	Partially yes	07	Can not say	03	No	09
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APPENDIX D

Signs of Suicide

A person contemplating suicide:

- Believes he or she is in a hopeless situation.
- Appears depressed, sad, tearful; may have changes in patterns of sleep and/or appetite.
- May talk about or actually threaten suicide, or may talk about death and dying in a way that strikes the listener as odd.
- May show changes in behavior, appearance or mood.
- May increase or start drug or alcohol use.
- May injure self or engage in risky behavior.
- Abandons planning for the future.
- May start withdrawing from others, including family and close friends.
- May give away possessions.
- May appear apathetic, unmotivated, and indifferent.

Prevention Keys

The small-unit leader may be the first to identify the “signals” of a potential suicide-risk Soldier. The keys to prevention are to provide aid to persons at suspected risk and follow the acronym AID LIFE.

- | | |
|---|--|
| A | Ask: “Are you thinking about hurting yourself?” |
| I | Intervene immediately. |
| D | Do not keep a secret concerning a person at risk. |
| L | Locate help (NCO, religious teacher, corpsman, doctor, nurse, friend, family, crisis line, hospital emergency room). |
| I | Inform your chain of command of the situation. |
| F | Find someone to stay with the person. Do not leave the person alone. |

- E Expedite! Get help immediately. A suicidal person needs the immediate attention of helpers.

TABLE 1

Negative and Positive Determinants of Morale

S. No.	Negative determinants	Subjects in LIC (n=568)(%)	Subjects in Other areas (n=568) (%)	Chi-square value	p
<i>Operational Factors</i>					
1.	Anger at fighting with constraints	79.75	59.68	54.19	<0.01 S
2.	Anger at public admonishment	77.11	68.13	11.52	<0.01 S
3.	Bitterness at inability to deal with 'jamayatis'	59.33	36.62	15.73	<0.01 S
4.	Ambiguity regarding aim	26.94	27.11	0.00	>0.95 NS
5.	Feeling of uncertainty	24.82	17.43	9.32	<0.01 S
6.	Futility of counter-insurgency operations	23.77	15.67	11.70	<0.01 S
7.	Fear of ever present danger/unexpected attack	20.07	13.38	9.13	<0.01 S
<i>Social Factors</i>					
1.	Financial dissatisfaction	54.23	58.45	2.06	>0.10 NS
2.	Lack of cooperation/hostility from local population	53.17	38.56	24.42	<0.01 S
3.	Lack of societal support	50.35	46.66	1.55	>0.20 NS
4.	Disgust at a corrupt polity	47.71	46.12	0.28	>0.50 NS
5.	Adverse publicity in media	43.49	31.87	16.33	<0.01 S
6.	Difficulties in rail travel	36.09	45.95	11.41	<0.01 S
7.	Denial of leave even in emergency	35.39	36.80	0.24	>0.50 NS
8.	Hostile attitude of human rights groups	32.92	19.54	26.28	<0.01 S
9.	Feeling of insecurity regarding families	31.51	40.14	9.19	<0.01 S
<i>Positive determinants</i>					
1.	Receiving mail regularly	81.16	80.63	0.05	>0.70 NS
2.	Regimental spirit	80.28	81.51	0.28	>0.50 NS
3.	Receiving all entitlements of pay and allowances	79.05	78.70	0.03	>0.70 NS
4.	State of living accommodations	76.76	82.21	5.19	<0.05 S
5.	Recreational facilities	70.25	80.28	15.36	<0.01 S
6.	Leave granted in emergency	63.03	61.44	0.30	>0.50 NS
7.	Fear of letting down family prestige	48.24	58.98	13.17	<0.01 S

S=Significant; NS=Not significant

TABLE 2

Results of Psychological Tests

S. No.	Tests	Subjects in LIC		Subjects in other areas		Mann-Whitney U test z value	p
		Mean	(SD)	Mean	(SD)		
1.	<i>Carroll Rating Scale for Depression</i>	8.68	(5.66)	6.54	(3.36)	-6.366	<0.000 S
2.	<i>Michigan Alcoholism Screening Test</i>	4.05	(4.57)	2.52	(3.06)	-5.177	<0.000 S
3.	<i>General Health Questionnaire</i>	2.13	(2.27)	1.41	(1.65)	-5.168	<0.000 S
4.	<i>State-Trait Anxiety Inventory</i>						
	State anxiety	35.69	(7.94)	35.36	(7.73)	-0.772	<0.440 NS
	Trait anxiety	33.99	(7.24)	33.77	(6.79)	-0.591	<0.555 NS
5.	<i>Perceived Stress Questionnaire</i>	73.44	(7.56)	73.27	(8.54)	-1.165	<0.244 NS
6.	<i>Impact of Events Scale</i>						
	Intrusive	3.67	(4.73)	2.72	(4.13)	-4.851	<0.000 S
	Avoidance	10.71	(6.73)	8.77	(7.33)	-4.940	<0.000 S
	Total	14.28	(9.12)	11.47	(9.00)	-4.788	<0.000 S
7.	<i>Multidimensional Fatigue Inventory</i>						
	General fatigue	8.44	(3.29)	7.51	(3.08)	-4.992	<0.000 S
	Physical fatigue	7.90	(4.04)	6.91	(3.34)	-3.501	<0.000 S
	Reduced Activity	9.16	(3.67)	8.79	(2.81)	-0.929	<0.353 NS
	Reduced Motivation	7.46	(2.88)	7.11	(2.42)	-1.303	<0.193 NS
	Mental fatigue	7.05	(2.90)	6.78	(3.13)	-2.418	<0.016 S
8.	<i>Locus of Control scale</i>	18.83	(9.69)	19.38	(8.07)	-1.598	<0.110 NS
9.	<i>Hindi PEN Inventory</i>						
	Psychoticism	2.98	(2.78)	3.13	(2.10)	-1.522	<0.128 NS
	Extraversion	12.50	(2.69)	12.69	(2.55)	-0.783	<0.434 NS
	Neuroticism	4.48	(3.55)	4.84	(3.66)	-1.493	<0.135 NS
	Lie	11.00	(2.67)	11.26	(2.94)	-1.829	<0.067 NS
10.	<i>Satisfaction With Life Scale</i>	22.71	(7.93)	22.47	(7.56)	-0.928	<0.353 NS

S=Significant; NS=Not significant

TABLE 3

Comparison of Impact of Events Scale Scores of Subjects in LIC and Other Areas

Impact of Events Scale scores	Subjects in LIC areas	Subjects in Other areas	Chi-square value	p
0–8 (subclinical)	24.65%	42.78%	41.78	<0.01 S
9–25 (mild)	66.37%	53.35%	20.06	<0.01 S
26–43 (moderate)	8.45%	3.87%	9.65	<0.01 S
44+ (severe)	0.53%	0.0%	–	–

S=Significant; NS=Not significant

TABLE 4

Comparison of Screening Psychological Tests Results of Subjects in LIC and in Other Areas

Psychological tests	Subjects in LIC areas (n=568)	Subjects in Other areas (n=568)	Chi- square value	p
Carroll Rating Scale for Depression Score >10	30.99%	9.16%	84.37	<0.01 S
Michigan Alcoholism Screening Test Score >5	29.93%	10.74%	64.56	<0.01 S
General Health Questionnaire Score >2	33.28%	20.60%	23.19	<0.01 S

S=Significant; NS=Not significant

TABLE 5

Comparison of Screening Psychological Tests Results of Subjects in Very Active LIC and Less Active LIC Areas

Psychological tests	Subjects in very active LIC area	Subjects in less active LIC area	Chi-square value	p
Carroll Rating Scale for Depression Score >10	39.48%	23.23%	17.50	<0.01 S
Michigan Alcoholism Screening Test Score >5	38.01%	24.35%	16.13	<0.01 S
General Health Questionnaire Score >2	39.85%	27.27%	8.32	<0.01 S

S=Significant; NS=Not significant

TABLE 6

Relationship of Screening Psychological Test Results to Length of Service in LIC Operations

Psychological tests	Subjects in with <1 year service in LIC	Subjects in with >1 year service in LIC	Chi-square value	p
Carroll Rating Scale for Depression Score >10	16.77%	36.91%	22.36	<0.01S
Michigan Alcoholism Screening Test Score >5	16.17%	36.41%	22.81	<0.01S
General Health Questionnaire Score >2	21.56%	38.16%	14.63	<0.01S

S= Significant; NS=Not significant

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