

## Evidence for E-OSC Constructs

### Overview



Combat and operational stress control (COSC) is used by military units to prevent, identify, and treat combat and operational stress injuries. COSC practices and interventions help operational units proactively manage combat and operational stress before they lead to declines in individual and unit readiness (Jones, 1995).






Expanded Operational Stress Control (E-OSC) integrates COSC with resilience and mindfulness training to improve the psychological readiness of Sailors and units. Research shows that resilience can be taught to improve wellbeing and performance (Robertson et al., 2015), and researchers have identified evidence-informed factors that enhance resilience such as positive coping, positive affect, positive thinking, realism, behavioral control, physical fitness, and altruism (Meredith et al., 2011). Additionally, mindfulness training has been used by operational units to help Service members recover quicker from stress (Johnson et al., 2015).

E-OSC was developed by the Naval Center for Combat & Operational Stress Control (NCCOSC) and is based on best practices for managing combat and operational stress and for building resilience and mental toughness. More specifically, E-OSC uses a lens of Cognitive Behavior Therapy (CBT; Beck, 1995), one of the most researched psychological interventions, to teach Sailors about the relationship between thoughts, feelings, and behaviors. *For example, a Sailor who thinks of himself as a failure is less likely to volunteer for a new assignment.* E-OSC also incorporates innovative, novel interventions that emphasize mindfulness and effective coping, such as Acceptance and Commitment Therapy (ACT; Hayes et al., 1999) and Dialectical Behavior Therapy (DBT; Linehan, 1987), both considered evidence-based therapies by Department of Defense (DoD)/Veterans Affairs (VA). Through mindfulness training and practice, Sailors learn about the mind-body connection and how it can be used to build resilience and toughness. *For example, by staying focused in the present moment, a Sailor can recover more quickly in stressful situations and better perform the tasks at hand.*

The modules in E-OSC are based on curricula from Caregiver Occupational Stress Control (CgOSC), Mind-Body Mental Fitness (MBMF), and Mind-Body Medicine (MBM). CgOSC and MBMF are rooted in evidence-informed principles, and MBM was developed in line with well-researched interventions at the Benson-Henry Institute at Massachusetts General Hospital (Park et al., 2013). Further, E-OSC concepts align with resilience and mental toughness training at Recruit Training Command (RTC), so that Sailors can continuously learn and practice these skills throughout their training and military careers.

E-OSC will be implemented at the unit-level through E-OSC trainers. Past efforts demonstrate that individuals trained in resilience can teach these skills effectively to others, providing evidence for the “Train the Trainer model” (Reivich et al., 2011). A pilot conducted by NCCOSC on the USS Essex found that crew members who attended a two-day Train the Trainer of Mind Body Resilience Training (MBRT) were able to sufficiently train their fellow Sailors.

E-OSC Topic/Construct	Evidence Based Concepts Addressed in E-OSC Curriculum
<p><b>Resilience</b></p>  <p><u>Training Modules</u></p> <ul style="list-style-type: none"> <li>-Stress &amp; Resilience</li> <li>-Valued Living</li> <li>-Emotional Intelligence</li> <li>-Flexible Thinking</li> <li>-Problem Solving &amp; Positive Coping</li> <li>-Healthy Behaviors</li> </ul>	<p><b>Stress &amp; Resilience.</b></p> <ul style="list-style-type: none"> <li>-Learning to approach stress as a challenge, as opposed to a threat, leads to better psychological and physical outcomes (McGonigal, 2005).</li> <li>-Promoting hardiness and using the 3 C's (Challenge, Control, Commitment) improves one's resistance to high levels of stress and provides opportunities for growth in stressful situations (Kobasa et al., 1982; Maddie, 2006).</li> </ul> <p><b>Valued Living.</b></p> <ul style="list-style-type: none"> <li>-Connecting with personal values protects against the negative effects of stress and contributes to behavior change (Cresswell et al., 2005; Lundgren et al., 2008).</li> </ul> <p><b>Emotional Intelligence.</b></p> <ul style="list-style-type: none"> <li>-Leaders higher in emotional intelligence are more effective in accomplishing goals and managing staff (Rosete &amp; Ciarrochi, 2005).</li> </ul> <p><b>Flexible Thinking.</b></p> <ul style="list-style-type: none"> <li>-Flexible thinking and learning to challenge ones' thoughts can lead to helpful behavior change (Beck, 1995).</li> </ul> <p><b>Problem Solving &amp; Positive Coping.</b></p> <ul style="list-style-type: none"> <li>-Acquiring individual skills, such as problem-solving, positive coping, and mastery, enhances resilience (Meredith et al., 2011).</li> </ul> <p><b>Healthy Behaviors.</b></p> <ul style="list-style-type: none"> <li>-Maintaining adequate sleep, nutrition, and physical activity protects against high stress and can improve decision-making in difficult times (<a href="https://p3.amedd.army.mil/">https://p3.amedd.army.mil/</a>).</li> </ul>
<p><b>Mindfulness</b></p> 	<ul style="list-style-type: none"> <li>-Eliciting the Relaxation Response combats maladaptive responses to stress (Park et al., 2013).</li> <li>-Mindfulness training improves attention, memory, concentration, and focus (Jha et al., 2010; Jha et al., 2015).</li> <li>-Mindfulness training helps military personnel cope better with stress (Johnson et al., 2014).</li> </ul>

<p><b>Stress Continuum Model</b></p>  <p><b>Stress-o-Meter (SoM)</b></p> 	<p>-The Stress Continuum Model (SCM) is one of the core components of the Navy and Marine Corps COSC doctrine (CRP 6-11 C/NTTP 1-15M. <i>Combat and Operational Stress Control</i>).</p> <p>-The SCM/SoM is a tool for early intervention (Muzoz et al., 1996). For those in the “reacting (yellow)” or “injured (orange)” zones, intervention can occur at the unit-level as opposed to requiring medical intervention.</p> <p>-The SCM shows evidence for having the capability to identify those experiencing high perceived stress and burnout (CgOSC Analysis, NCCOSC).</p>
<p><b>Core Leader Functions</b></p> 	<p>-Core Leader Functions is one of the core components of the Navy and Marine Corps COSC doctrine (CRP 6-11 C/NTTP 1-15M. <i>Combat and Operational Stress Control</i>).</p> <p>-Leadership improves unit performance by establishing clear expectations of performance and promoting a sense of values, mission, and vision (Bass et al., 2003; Fors Brandebo et al., 2019).</p>
<p><b>Combat &amp; Operational Stress First Aid (COSFA)</b></p> 	<p>-COSFA is one of the core components of the Navy and Marine Corps COSC doctrine (CRP 6-11 C/NTTP 1-15M. <i>Combat and Operational Stress Control</i>).</p> <p>-7 Cs (Check, Coordinate, Cover, Calm, Connect, Competence, Confidence) is a restorative framework that fosters short-term and long-term recovery from stress. It is based on Psychological First Aid (PFA) and is similar to other restorative frameworks such as 4Rs (Rest, Restore, Reassure, Recover), PIES (Proximity, Immediacy, Expectancy, Simplicity), and BICEPS (Brevity, Immediacy, Centrality, Expectancy, Proximity, Simplicity) (DoD Directive 6490.5, 1999; Jones &amp; Wessely, 2003; Millegan et al., 2016)</p>
<p><b>Buddy Care &amp; Unit Assessment</b></p> 	<p>-Addressing stress at the level of the unit as quickly as possible, with an expectation of recovery results in fewer losses to combat and operational stress injuries (Jones et al., 2013).</p> <p>-Peer support is effective for teaching new skills and promoting health-related behaviors (Solomon, 2004; Webel, 2010).</p> <p>-Service members informally turn to their peers for support, so peers may be an effective way of removing stigma in asking for help and counseling/supporting those who need help (Hosek, 2006).</p> <p>-Cohesion improves group performance (Oliver et al., 1999).</p> <p>-Cohesion buffers against maladaptive reactions to trauma and facilitates resilience coping (Armistead-Jehle et al., 2011; McAndrew et al., 2017).</p>

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