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DEFINITION OF POST-TRAUMATIC STRESS DISORDER

Pathfinder ☀ April 2010

“PTSD can develop following exposure to combat, natural disasters, terrorist incidents, serious accidents, or violent personal assaults like rape. People who experience stressful events often relive the experience through nightmares and flashbacks, have difficulty sleeping, and feel detached or estranged. These symptoms may occur within the first 4 days after exposure to the stressful event or be delayed for months or years. Symptoms that appear within the first 4 days after exposure to a stressful event are generally diagnosed as acute stress reaction or combat stress.”

“Symptoms that persist longer than 4 days are diagnosed as acute stress disorder. If the symptoms continue for more than 30 days and significantly disrupt an individual’s daily activities, PTSD is diagnosed. PTSD may occur with other mental health conditions, such as depression and substance abuse.”

U.S. Government Accountability Office. *Post-Traumatic Stress Disorder: DOD Needs to Identify the Factors Its Providers Use to Make Mental Health Evaluation Referrals for Service members*. U.S. Government Accountability Office. Washington, D.C., 2006.
<http://www.gao.gov/new.items/d06397.pdf>

RECOMMENDED RESOURCES & SEARCH TERMS

SUBSCRIPTION DATABASES ARE ONLY ACCESSIBLE THROUGH BLACKBOARD, UNDER IKE SKELTON LIBRARY, “ONLINE RESEARCH”; OR UNDER “LIBRARY RESOURCES” ON THE JFSC INTRANET AND ON LIBRARY COMPUTER DESKTOPS.

Recommended search terms: **Search terms can be combined to focus/narrow a search and remember to look for ways to limit searches by date, or for ‘advanced search’ features. (Some tutorials are available on BlackBoard: Online Research, under the link to that particular database.)*

<u>Search Terms</u>	<u>Internet Resources</u>	<u>Subscription databases</u>
<ul style="list-style-type: none"> • Combat Stress • Mental health and stigma • Post traumatic stress disorder (PTSD) • Combat stressors • Soldier and mental health • Psychological impact of war 	<ul style="list-style-type: none"> • Government Accountability Office www.gao.gov • Government Google http://www.google.com/unclesam • Department of Defense Military Health System http://www.health.mil/default.aspx • RESPECT-Mil http://www.pdhealth.mil/respect-mil/index1.asp 	<ul style="list-style-type: none"> • EBSCO • ProQuest • Ike Skelton Library catalog

Other Associated Terms

Civil war “soldier’s heart”; combat stress control; compassion fatigue; embedded mental health professionals; Mindfulness-based mind fitness training (M-Fit); stress reaction; Vietnam “post Vietnam syndrome” or “Vietnam syndrome”; World War I “shell shock”; World War II “battle fatigue”

IKE SKELTON LIBRARY CATALOG

Books & Documents

Call No. RC 550 .C66 2007

Figley, Charles R. and William P. Nash. *Combat Stress Injury: Theory, Research, and Management*. New York: Routledge, 2007.

Focus: Introduction: for those who bear the battle / The stressors of war / Combat/operational stress adaptations and injuries / Competing and complementary models of combat stress injury / The mortality impact of combat stress 30 years after exposure: implications for prevention, treatment, and research / Combat stress management: the interplay between combat, physical injury, and psychological trauma / Secondary traumatization among wives of war veterans with PTSD / Historical and contemporary perspectives of combat stress and the Army Combat Stress Control Team / Virtual reality applications for the treatment of combat-related PTSD / Experiential methods in the treatment of combat PTSD / Medication management of combat and operational stress injuries in active duty service members / The Royal Marines' approach to psychological trauma / The operational stress injury social support program: a peer support program in collaboration between the Canadian forces and Veterans Affairs Canada / Spirituality and readjustment following war-zone experiences / The returning warrior: advice for families and friends /

Call No. Electronic Serials, Click on Hotlink

National Center for Post-Traumatic Stress Disorder. *PTSD Research Quarterly*. Government Printing Office. White River Junction, Vt. Web Address: <http://purl.access.gpo.gov/GPO/LPS4837> GPO Item #: 0989-K

Focus: Post-traumatic stress disorder -- United States -- Periodicals.

Call No. Q 180.A1 R36 MG720 2008 and Staff College Internet Resource

Tanielian, Terri L. and Lisa Jaycox. *Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery*. Santa Monica, CA: Rand Corporation, 2008.

Focus: The wars in Afghanistan and Iraq: an overview -- Prevalence of PTSD, depression, and TBI among returning servicemembers -- Survey of individuals previously deployed for OEF/OIF -- Predicting the immediate and long-term consequences of post-traumatic stress disorder, depression, and traumatic brain injury -- The cost of post-deployment mental health and cognitive conditions -- Systems of care: challenges and opportunities to improve access to high-quality care -- Treating the invisible wounds of war: conclusions and recommendations.

Call No. RC 552.P67 P38 2007

Paulson, Daryl S. and Stanley Krippner. *Haunted by Combat: Understanding PTSD in War Veterans Including Women, Reservists, and Those Coming Back From Iraq*. Westport, Conn.: Praeger Security International, 2007.

Focus: Preface -- Introduction: Private traumas, personal mythologies: post-traumatic stress disorder among combat veterans / overview of trauma and the mind/body -- History of the diagnosis and treatment of PTSD -- phenomenology of PTSD -- experiences of reserve soldiers -- Coming home from the war -- Preparing for what is to come -- Civilians at risk -- Treatment approaches to traumatic disorders -- Keys to treating trauma -- Alternative approaches to treating PTSD -- Remembrance -- Gold along the path -- References -- Index.

Call No. RC 552.P67 M43 2007

Meagher, Ilona. *Moving a Nation to Care: Post-Traumatic Stress Disorder and America's Returning Troops*. Brooklyn, N.Y.: Ig Pub., 2007.

Focus: pt. 1. A backwards glance. The face of war -- A brief history of PTSD -- March -- pt. 2. A glimpse in the mirror. Media society and the packaging of war -- Leadership politics and the price of war -- The Rumsfeld revolution in military affairs -- 21st Century warfare and PTSD -- Idealism guilt and the degeneration of war -- pt. 3. A Call to Arms. Returning to a foreign world -- Setting it all into motion: resources for concerned citizens.

Call No. U 21.5 .N33 2005

Nadelson, Theodore. *Trained to Kill: Soldiers at War*. Baltimore, Md.: Johns Hopkins University Press, 2005.

Focus: Boys: playing at war -- Brothers and comrades -- Killing, getting the job done -- Killers, bred in the bone -- Counterforce, facing terror -- Damage, war's awful aftermath -- Myths and perceptions -- Wonder -- Sex and the soldier -- Women and war.

AUDIO/VISUAL MATERIALS

Call No. Audio CD W177

Tick, Edward. *War and the Soul* [sound recording Abridged ed.] Quest Books, 2007.

Focus: Veterans -- Mental health -- United States; Post-traumatic stress disorder -- Prevention; Post-traumatic stress disorder -- Treatment.

Description: 6 sound discs (7 hrs., 38 min.)

Call No. DVD S72

The soldier's heart [videorecording (DVD)]. [Boston]: distributed by PBS Video, 2005. Series: Frontline (Television program) Notes: Unedited version.

Focus: As the War in Iraq continues, the first measures of its psychological toll are coming in. A medical study estimates that more than one in seven returning veterans are expected to suffer from major depression, anxiety, or Post Traumatic Stress Disorder. For those who have survived the fighting, the battle is not over. For some, the return home can be as painful as war itself. FRONTLINE tells the stories of soldiers who have come home haunted by their experiences and asks whether the government is doing enough to help.

Call No. DVD A658

Alive day memories [videorecording (DVD)]: home from Iraq / Attaboy Films ; HBO Documentary Films ; produced by Ellen Goosenburg Kent ; directed by Jon Alpert, Ellen Goosenburg Kent ; produced and photographed by Jon Alpert, Matthew O'Neill. Imprint: [United States]: HBO Video, c2007.

Focus: Documentary film. A look at the physical and emotional cost of war through soldiers' memories of their "alive day," the day they narrowly escaped death in Iraq. Actor James Gandolfini interviews ten soldiers about their memories, their feelings on their future, and more.

SEARCHING JFSC LIBRARY RESOURCES

Government Google

<http://www.google.com/unclesam>

U.S. Department of Defense. *An achievable vision: Report of the Department of Defense Task Force on Mental Health*. Falls Church, VA: Department of Defense Task Force on Mental Health, 2007.

<http://www.health.mil/dhb/mhtf/MHTF-Report-Final.pdf>

Abstract: “Section 723 of the National Defense Authorization Act for fiscal year 2006 directed the Secretary of Defense to “establish within the Department of Defense a task force to examine matters relating to mental health and the Armed Forces” and produce “a report containing an assessment of, and recommendations for improving, the efficacy of mental health services provided to members of the Armed Forces by the Department of Defense.” Towards that end, the Department of Defense Task Force on Mental Health (Task Force) was established, comprising seven military and seven civilian professionals with mental health expertise. Task Force members were appointed in May 2006, with one military and one civilian member serving as co-chairs for the group.”

Helmus, Todd C. and Russell W. Glenn. *Steeling the Mind: Combat Stress Reactions and Their Implications for Urban Warfare*. Santa Monica: RAND, 2005.

http://www.rand.org/pubs/monographs/2005/RAND_MG191.pdf

Abstract: “Commanders and NCOs in the U.S. military should develop the necessary skills to treat and prevent stress casualties and understand their implications for urban operations. To impart this knowledge, this monograph reviews the known precipitants of combat stress reaction (CSR), its battlefield treatment, and the preventive steps commanders can take to limit its extent and severity.”

U.S. Department of Defense Task Force on Mental Health. *An Achievable Vision: Report of the Department of Defense Task Force on Mental Health*. Defense Health Board Task Force on Mental Health. Falls Church, VA, 2007. <http://www.ha.osd.mil/dhb/mhtf/MHTF-Report-Final.pdf>

Abstract: “The system of care for psychological health that has evolved over recent decades is insufficient to meet the needs of today’s forces and their beneficiaries, and will not be sufficient to meet their needs in the future. DOD Task Force on Mental Health ES-2 raised questions about the adequacy of this orientation, not only for treating psychological disorders, but also for achieving the goal of a healthy and resilient force.”

Keating, Gavin. *A Tale of Three Battalions: Combat Morale and Battle Fatigue in the 7th Australian Infantry Brigade, Bougainville, 1944-45*. Duntroon, ACT: Land Warfare Studies Centre, 2007. http://www.defence.gov.au/army/LWSC/docs/SP_312.pdf

Abstract: “The Anzac tradition does not talk much about what happens when combat morale falters and battle fatigue undermines military effectiveness. Yet, despite the Australian Army’s proud history, it has not been immune from such problems. Evidence of this is not, however, likely to be found in any official history or unit report. Fortunately, the 7th Australian Infantry Brigade’s campaign on Bougainville, 1944–45, allows these issues to be studied in detail. The existence of candid personal diaries and memoirs written by the brigade commander, two of his unit commanding officers and a private soldier offer a rare glimpse into the realities of life on combat operations.”

Institute of Medicine. *Post-traumatic Stress Disorder: Diagnosis and Assessment*. Washington, D.C.: National Academies Press, 2006. http://www.nap.edu/catalog.php?record_id=11674

Abstract: “In response to growing national concern about the number of veterans who might be at risk for posttraumatic stress disorder (PTSD) as a result of their military service, the Department of Veterans Affairs (VA) asked the Institute of Medicine (IOM) to conduct a study on the diagnosis and assessment of, and treatment and compensation for PTSD. This first report focuses on diagnosis and assessment of PTSD. “

Institute of Medicine. *Gulf War and Health: Physiologic, Psychologic, and Psychosocial Effects of Deployment-Related Stress*. Vol. 6. Washington, D.C.: National Academies Press, 2007.

http://www.nap.edu/catalog.php?record_id=11922#toc

Abstract: “The sixth in a series of congressionally mandated reports on Gulf War veterans' health, this volume evaluates the health effects associated with stress. Since the launch of Operation Desert Storm in 1991, there has been growing concern about the physical and psychological health of Gulf War and other veterans. In the late 1990s, Congress responded by asking the National Academy of Sciences (NAS) to review and evaluate the scientific and medical literature regarding associations between illness and exposure to toxic agents, environmental or wartime hazards, and preventive medicines or vaccines in members of the armed forces who were exposed to such agents.”

Shinseki, Eric. “Military Suicide Prevention.” Keynote address at the 2010 Department of Defense/Veterans Administration Suicide Prevention conference, Jan. 11, 2010. <http://www.c-spanvideo.org/program/ID/217848>

Abstract: “He and other officials spoke about rising suicide rates among young veterans and efforts by the VA and military to better prevent suicide.”

Defense Technical Information Center

<http://www.dtic.mil>

Murray, Mark A. *Post Traumatic Stress Disorder: The Facts!* Strategy Research Project. Carlisle Barracks: U.S. Army War College, 2007. <http://handle.dtic.mil/100.2/ADA467315>

Abstract: “This strategic research project will examine and hopefully dispel the myths about PTSD for strategic leaders by answering the following basic questions. What is PTSD, historical understanding of PTSD, how does PTSD develop, what are the symptoms of PTSD, how common is PTSD, who is most likely to develop PTSD, what are the consequences of PTSD, what are scientists learning from the research, and how is PTSD treated?”

Haycock, Robert D. “Arming Commanders to Combat PTSD: A Time for Change—Attacking the Stressors, Not the Symptoms.” Master’s Thesis, Army Command and General Staff College, Jan 2009.

<http://www.dtic.mil/srch/doc?collection=t3&id=ADA505257>

Abstract: “This monograph examines PTSD from a historical perspective reviewing the manner in which the Army viewed, assessed, and treated those afflicted with PTSD as well its methods for training and educating those honored with the opportunity to lead these warriors in battle. This monograph highlights existing shortfalls in assessment, training, doctrine, and education as it relates to those commanding at the battalion-level. The Army does not properly prepare battalion commanders for the complexities of coping with PTSD in their units nor arm them with the tactics, techniques, and procedures necessary to mitigate the effects of PTSD on the combat effectiveness of their units and the soldiers that fill the ranks. The Army should implement more rigorous assessment programs for units deployed to identify those at risk of PTSD or demonstrating stress-

related symptoms before the mental well-being of the soldier is dramatically affected and treatment becomes more difficult.”

Rizzo, Albert, Thomas Parsons, Jarrell Pair, Robert McLay, Scott Johnston, Karen Perlman, Robert Deal, Greg Reger, Greg Gahm, Mike Roy, Russell Shilling, Barbara Rothbaum, Ken Graap, Josh Spitalnick, Patrick Bordnick and JoAnn Difede. *Clinical Results From the Virtual Iraq Exposure Therapy Application for PTSD*. Marina del Rey, CA: Institute for Creative Technologies, University of Southern California, DEC 2008.

<http://www.dtic.mil/srch/doc?collection=t3&id=ADA505737>

Abstract: “Initial data suggests that at least 1 out of 5 Iraq War veterans are exhibiting symptoms of depression, anxiety and PTSD. Virtual Reality (VR) delivered exposure therapy for PTSD has been previously used with reports of positive outcomes. The current paper will present the rationale and description of a VR PTSD therapy application (Virtual Iraq) and present initial findings from its use with active duty service members. Virtual Iraq consists of a series of customizable virtual scenarios designed to represent relevant Middle Eastern VR contexts for exposure therapy, including a city and desert road convoy environment. Results from an open clinical trial using Virtual Iraq at the Naval Medical Center-San Diego with 20 treatment completers indicate that 16 no longer met PTSD diagnostic criteria at post-treatment, with only one not maintaining treatment gains at 3 month follow-up.”

Dixon, Richard L., Jr. “PTSD Type Symptoms and CGSC Class 08-01, A Study of Field Grade Officers and Implications for the Future.” Master’s Thesis, U.S. Army Command and General Staff College, June 2008.

<http://www.dtic.mil/srch/doc?collection=t3&id=ADA483044>

Abstract: “With the emergence of the Global War on Terror (GWOT), the mental illness of Post Traumatic Stress Disorder (PTSD) is increasingly identified in returning veterans. A 2006 mental health study released by the Pentagon found 11% of returning OEF veterans and 19% of returning OIF veterans have mental health issues. Of the veterans sampled, 5% were Army Officers and 2% were Marine Officers. Thus, the primary research question was: Are the combat veterans of CGSC Class 08-01 representative of the Army's statistics on returning veterans with PTSD type symptoms? Using the Post Traumatic Stress Disorder Checklist-Military Version (PCL-M) and a demographic questionnaire, a survey sample of 297 field grade officers from a population of 584 combat veterans found 35% of single tour OEF veterans and 41% of single tour OIF veterans had PTSD type symptoms. 41% of multiple tour veterans had PTSD type symptoms. 50% of the survey sample believed mental health counseling would damage their careers and the percentage increased to 70% among those with PTSD type symptoms.”

Government Accountability Office

<http://www.gao.gov>

U.S. Government Accountability Office. *Post-Traumatic Stress Disorder: DOD Needs to Identify the Factors Its Providers Use to Make Mental Health Evaluation Referrals for Service members*. Washington, D.C.: U.S. Government Accountability Office, 2006.

<http://www.gao.gov/new.items/d06397.pdf>

Abstract: “Many service members supporting Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) have engaged in intense and prolonged combat, which research has shown to be strongly associated with the risk of developing post-traumatic stress disorder (PTSD). GAO, in response to the Ronald W. Reagan National Defense Authorization Act for Fiscal Year 2005, (1) describes DOD’s extended health care benefit and VA’s health care services for OEF/OIF veterans; (2) analyzes DOD data to determine the number of OEF/OIF service members who may be at risk for PTSD and the number referred for further mental health

evaluations; and (3) examines whether DOD can provide reasonable assurance that OEF/OIF service members who need further mental health evaluations receive referrals.”

U.S. Government Accountability Office. *DOD and VA Health Care: Challenges Encountered by Injured Servicemembers during Their Recovery Process*. Washington, D.C.: U.S.

Government Accountability Office, 2007. <http://www.gao.gov/new.items/d07606t.pdf>

Abstract: “GAO was asked to discuss concerns regarding DOD and VA efforts to provide medical care and rehabilitative services for service members who have been injured during OEF and OIF. This testimony addresses (1) the transition of care for seriously injured service members who are transferred between DOD and VA medical facilities, (2) DOD’s and VA’s efforts to provide early intervention for rehabilitation for seriously injured service members, (3) DOD’s efforts to screen service members at risk for post-traumatic stress disorder (PTSD) and whether VA can meet the demand for PTSD services, and (4) the impact of problems related to military pay on injured service members and their families.”

ProQuest & EbscoHost

(subscription database)

*A wide variety of information on PTSD, including military, psychology and mainstream articles.

Sample results:

- Anonymous, . "DoD: No Purple Hearts For Those With PTSD." *National Guard*, February 1, 2009, 14.
- Chan, D., A. Cheadle, G. Reiber, J. Unützer, and E. Chaney. "Health Care Utilization and Its Costs for Depressed Veterans With and Without Comorbid PTSD Symptoms." *Psychiatric Services* 60, no. 12 (December 1, 2009): 1612-7.
- "Chief Executive Officer Schoeneck Issues Statement on Innovative Technologies and Treatments Helping Veterans." *US Fed News Service, Including US State News*, May 15, 2009.
- Feczner, D., and P. Bjorklund. "Forever Changed: Posttraumatic Stress Disorder in Female Military Veterans, A Case Report." *Perspectives in Psychiatric Care* 45, no. 4 (October 1, 2009): 278-91.
- Feidler, R.. "Fragile State of Mind." *The Officer*, December 1, 2009, 22-23.
- Kline, A., M. FalcaDodson, B. Sussner, D. Ciccone, H. Chandler, L. Callahan, and M. Losonczy. "Effects of Repeated Deployment to Iraq and Afghanistan on the Health of New Jersey Army National Guard Troops: Implications for Military Readiness." *American Journal of Public Health* 100, no. 2 (February 1, 2010): 276-83.
- Lt. Col. Lesa Spivey. "New approach to PTSD offers servicemembers greater privacy, reduced stigma." *U.S. Department of Defense Information / FIND* July 14, 2009.
- McEwen, M.. "Combat Stress: A Call to Awareness and Action." *Army*, April 1, 2008, 9-13.
- Michael M Faenza. "The War at Home: Addressing PTSD among Returning Servicemembers." *The Officer*, November 1, 2005, 37-39.
- Stanley, E., and A. Jha. "Mind Fitness: Improving operational effectiveness and building warrior resilience." *Fires*, January 1, 2010, 17-23.
- Spoot, M., M. Murdoch, J. Hodges, and S. Nugent. "Treatment Receipt by Veterans After a PTSD Diagnosis in PTSD, Mental Health, or General Medical Clinics." *Psychiatric Services* 61, no. 1 (January 1, 2010): 58-63.
- Solomon, Z., R. Dekel, and G. Zerach. "Posttraumatic Stress Disorder and Marital Adjustment: The Mediating Role of Forgiveness." *Family Process* 48, no. 4 (December 1, 2009): 546-58.

U. S. MILITARY & GOVERNMENT LINKS

Internet Links

U.S. Department of Veterans Affairs - National Center for PTSD

<http://www.ptsd.va.gov/>

U.S. Department of Veterans Affairs - Specialized PTSD Treatment Programs

http://ncptsd.va.gov/ncmain/ncdocs/fact_shts

U.S. Department of Defense - Force Health Protection & Readiness Policy and Programs
TBI & PTSD Quick Facts Pamphlet

http://mhs.osd.mil/content/docs/press/quick_white.pdf

U.S. Department of Defense - Deployment Health Clinical Center
Combat/Operational Stress

http://www.pdhealth.mil/op_stress.asp

U.S. Department of Defense - Deployment Health Clinical Center
DoD Mental Health Self-Assessment (MHSA) Program

<http://www.pdhealth.mil/mhsa.asp>

U.S. Department of Defense - Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury

<http://www.dcoe.health.mil/>

U.S. Department of Defense - Military Health System

<http://www.health.mil/default.aspx>

Deployment Health Clinical Center (DHCC)

http://www.pdhealth.mil/about_dhcc.asp

National Resource Directory - An Online Partnership for Wounded, Ill, and Injured Service Members, Veterans, Their Families and Those Who Support Them

<http://www.nationalresourcedirectory.gov/nrd/public/DisplayPage.do?parentFolderId=7535>

RESPECT-Mil (Re-Engineering Systems of Primary Care Treatment in the Military)

<http://www.pdhealth.mil/respect-mil/index1.asp>

U.S. Department of Defense - Military OneSource

<https://www.militaryonesource.com>

U.S. Military Services Internet Links

The military services have established extensive programs to address numerous aspects of psychological health awareness. These programs have many different names, cover both pre, and post deployment requirements in a variety of ways. The terms below appear in multiple places on the Internet, to see what is out there, we suggest going to Government Google <http://www.google.com/unclesam> and entering the program name, surrounded by quotes.

Air Force

Programs:

“Air Force Warrior and Survivor Care”

Air Force Medicine

<http://www.sg.af.mil/>

Air Force Wounded Warrior

<http://www.woundedwarrior.af.mil/>

Air War College Gateway to the Internet—Military Medicine

<http://www.au.af.mil/au/awc/awcgate/awc-medi.htm>

Army

Programs:

“Battlemind”

“Combat Stress Control”

“Comprehensive Soldier Fitness”

“Master Resilience Trainer”

“Post Traumatic Stress Disorder/Mild Traumatic Brain Injury (PTSD/MTBI) Chain Teaching Program”

“Real Warriors Campaign”

“Warrior Resilience and Thriving”

Army Behavioral Health

<http://www.behavioralhealth.army.mil/ptsd/index.html>

Army Medicine

<http://www.armymedicine.army.mil/index.cfm>

Army Wounded Warrior Program (AW2)

<http://www.aw2.army.mil/>

Battlemind

<https://www.battlemind.army.mil/>

Warrior Care and Transition Program

<http://www.army.mil/info/organization/offices/eoh/wtc/>

Marine Corps

Programs:

“Deployment Health Program”

“USMC Combat Operational Stress Continuum and Decision Matrix”

“Wounded Warrior Regiment”

Building and Maintaining Stress Resilience in the Marine Corps

http://www.dcoe.health.mil/DCoEV2/Content/navigation/documents/pdf-2009%2011%2009/2009%2011%2003_1035-1050_rac_gaskin.pdf

Leader’s Guide for Managing Marines in Distress

<http://www.usmc-mccs.org/LEADERSGUIDE/Emotional/MHProblems/generalinfo.cfm>

Navy Marine Corps Public Health Center

http://www.nmcphc.med.navy.mil/Healthy_Living/General/healthriskassessment.aspx

Wounded Warrior Regiment

<http://www.woundedwarriorregiment.org/WWR.aspx>

National Guard/Reserves

Program:

“Hooah 4 Health for Army Reserve and National Guard Deployment”

Deployment Health Clinical Center (see sidebar menu)

http://www.pdhealth.mil/about_dhcc.asp

Navy

Programs:

“Care for the Caregivers”

“Deployment Health Program”

“Navy Individual Augmentee Deployment Health Training”

“Operational Stress Control Program”

GulfLINK

(resources/information about Operations Desert Shield and Desert Storm)

<http://www.gulflink.osd.mil/>

Navy Marine Corps Public Health Center

http://www.nmcphc.med.navy.mil/Healthy_Living/General/healthriskassessment.aspx

Safe Harbor—Severely Injured Support

<http://www.npc.navy.mil/CommandSupport/SafeHarbor>

PTSD & MILITARY MENTAL HEALTH RELATED WEBSITES

MedlinePlus. "Post-Traumatic Stress Disorder." Online resources compiled by the National Library of Medicine. <http://www.nlm.nih.gov/medlineplus/posttraumaticstressdisorder.html>

National Alliance on Mental Illness. "Veterans' Resource Center: Posttraumatic Stress Disorder." <http://www.nami.org/Template.cfm?Section=PTSD&Template=/TaggedPage/TaggedPageDisplay.cfm&TPLID=86&ContentID=52905>

National Institute of Mental Health. "Post-Traumatic Stress Disorder (PTSD)." <http://www.nimh.nih.gov/health/publications/post-traumatic-stress-disorder-ptsd/index.shtml>

PTSD Help Network. "Post-Deployment Mental Health Issues." <http://www.ptsdhelp.net/index.html>

Sidran Institute. "Traumatic Stress Education & Advocacy." <http://www.sidran.org>

U.S. GOVERNMENT & MILITARY DOCUMENTS, CONGRESSIONAL TESTIMONY & LEGISLATION

Government Google

<http://www.google.com/unclesam>

U.S. Department of Defense. *Combat Stress Control (CSC) Programs*. Department of Defense Directive 6490.5. Washington, D.C.: U.S. Department of Defense, 23 February 1999. <http://www.dtic.mil/whs/directives/corres/pdf/649005p.pdf>

U.S. Department of the Air Force. *Air Force Leader's Guide for Managing Personnel in Distress*. http://airforcemedicine.afms.mil/idc/groups/public/documents/webcontent/knowledgejunction.hcst?functionalarea=LeadersGuideDistress&doctype=subpage&docname=CTB_030121&incbanner=0

U.S. Department of the Navy. *Navy Leader's Guide for Managing Personnel in Distress*. <http://www-nmcphe.med.navy.mil/LGuide/index.htm>

U.S. Marine Corps. *Leader's Guide for Managing Marines in Distress*. <http://www.usmcmccs.org/LeadersGuide/>

U.S. Department of the Army. *Combat and Operational Stress Control*. Field Manual 4-02.51. Washington, D.C.: U.S. Department of the Army, 6 July 2006. <http://www.fas.org/irp/doddir/army/fm4-02-51.pdf>

U.S. Department of the Army. *Combat Stress*. Field Manual 6-22.5. Washington, D.C.: U.S. Department of the Army, 23 June 2000. <http://www.globalsecurity.org/military/library/policy/army/fm/6-22-5/fm6-22-5.pdf>

U.S. Department of the Army. *Leaders' Manual for Combat Stress Control*. Field Manual 22-51. Washington, D.C.: U.S. Department of the Army, 29 September 1994. <http://www.globalsecurity.org/military/library/policy/army/fm/22-51/index.html>