



# Program Guide

## THE CRITICAL ROLE OF JUNIOR LEADERS



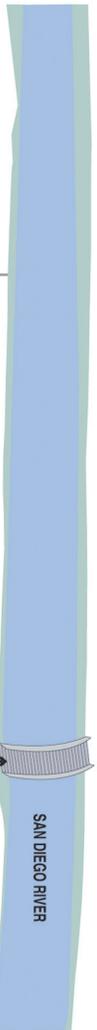
**COSC CONFERENCE  
2011**

NAVAL CENTER  
**COSC**  
COMBAT & OPERATIONAL STRESS CONTROL  
[www.nccosc.navy.mil](http://www.nccosc.navy.mil)

**APRIL 26-29, 2011**

Navy and Marine Corps Combat & Operational Stress Control Conference 2011  
Town and Country Resort & Convention Center  
San Diego, California

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## THE CRITICAL ROLE OF JUNIOR LEADERS

Navy and Marine Corps Combat & Operational Stress Control Conference 2011

April 26 – 29, 2011

Town and Country Resort & Convention Center

San Diego, CA



# WELCOME LETTER

It's my pleasure to welcome you to the Navy and Marine Corps Combat & Operational Stress Control Conference 2011. Our conference is truly exceptional because it brings together military leaders, researchers, health professionals and family members to discuss our common interest: how we can best serve our nation's warriors in these very challenging times.

I think you will agree that we have prepared an especially informative and engaging agenda for you.

The theme for this year's conference was easy to select because it's hard to overstate the important role that junior leaders play in effective combat and operational stress control. These are the young men and women who are on the front lines of identifying the often subtle changes that indicate a shipmate or fellow Marine is unable to effectively manage difficult professional or personal situations.

Not only are junior leaders usually the first to see when someone in their work center is having trouble, they are in a unique position to intervene and use their leadership skills to help. Quite often, a Sailor or Marine can find resolution for a stress problem at this level, and there is no need to involve additional personnel. When intervention is made at the lowest level possible, a rapid return to duty is facilitated and unit cohesion is maintained.

Because junior leaders are often role models, they need to be aware of how important their actions are in encouraging stress management as a tool to build resilience. Their adoption of a solid psychological health program is a stellar endorsement for the Sailors and Marines they lead.

Throughout this week, we'll hear examples of how senior leaders can empower junior leaders to help their shipmates and Marines through creation of a culture that embraces psychological health. The five core leader functions—strengthen, mitigate, identify, treat and reintegrate—will be discussed in detail, as will many other principles of the newly adopted Department of the Navy's Combat and Operational Stress Control Doctrine.

Whether you are a military leader, researcher, health professional or family member, I am confident that you will gain valuable insights from our conference and learn from each other. You will leave with new ideas and be more prepared to assist our brave Marines and Sailors in building and preserving psychological wellness.

Thank you for attending and, most of all, thank you for your steadfast dedication.



Capt. Scott L. Johnston, MSC, USN



# CONFERENCE PURPOSE & OBJECTIVES



## Conference Purpose & Objectives

### Purpose

The purpose of this conference is to bring together subject-matter experts and stakeholders in the combat and operational stress control (COSC) process and to present, examine and become informed on COSC policies, programs and practices specifically tailored for Sailors, Marines and their families.

The conference is the result of a unique partnership between HQMC M&RA COSC Branch, Navy OSC and BUMED to bring together stakeholders and subject-matter experts in the Navy and Marine Corps COSC process. This year's theme, "The Critical Role of Junior Leaders," was chosen to emphasize the important role our junior leaders play in promoting wellness and improving efforts at prevention, early identification and intervention to address combat and operational stress injuries. The program's agenda will examine COSC practices, programs and policies specifically tailored for leaders of Marines, Sailors and their families. The 2011 USN-USMC COSC conference will improve collaboration in pursuit of these goals.

### Target Audience

- Navy and Marine Corps Leaders
- Researchers
- Chaplains
- Treatment Providers
- Family Members

## General Conference Information

### Registration Hours of Operation

Monday, April 25.....	1500 – 1830
Tuesday, April 26.....	0700 – 1700
Wednesday, April 27.....	0730 – 1700
Thursday, April 28.....	0730 – 1700

### Exhibits & Posters

#### *Golden Ballroom*

Tuesday, April 26.....	0930 – 1600
Wednesday, April 27.....	0930 – 1800
Thursday, April 28.....	0930 – 1530

Closed: 1300 – 1400 daily

### Conference Attire

For Marine Corps:	Summer Service Charlies
For the Navy:	Chiefs and Officers, Summer Whites E1-E6, Year-round Service Uniforms
Civilians:	Business Casual

*Note: All evening events are approved for casual attire.*

### Speaker Ready Room

All speakers must visit the Speaker Ready Room, located in Terrace Salon Three, 24 hours prior to presenting to review and approve their presentations. The speaker ready room is available:

Monday, April 25.....	1500 – 1800
Tuesday, April 26.....	0700 – 1700
Wednesday, April 27.....	0730 – 1700
Thursday, April 28.....	0730 – 1700

For speakers presenting on Friday morning, please be sure to visit the Speaker Ready Room no later than Thursday as it will not be available Friday morning. For last minute issues on Friday morning, please proceed to the AV Desk in the Golden Ballroom.

### Speaker Presentations

To access all conference proceedings, including handouts, PowerPoints and video recordings, please log in to [cosc.sclivelearningcenter.com](http://cosc.sclivelearningcenter.com). You can create a login and begin downloading handouts and PowerPoint files today! Video and audio recordings will be available post-conference.



## CONFERENCE EVENTS

### Evening Events

Tuesday, April 26

*Grand Hall*

1800 – 2000

**“Brothers at War” – An Evening with Jake Rademacher**

All attendees and guests welcome. See page 22 for details.

Wednesday, April 27

*Tiki Pavilion*

1800 – 2000

**“Meet the Heroes” Social & Awards Ceremony**

All attendees and guests welcome. See page 23 for details.

Thursday, April 28

*Grand Hall*

1800 – 2000

**U.S. Paralympics Sitting Volleyball Demonstration**

All attendees and guests welcome. See page 24 for details.

### Awards & Recipients

*This year we are offering two types of awards: Epictetus Leadership Awards and Peabody Caregiver Awards.*

#### Epictetus Leadership Award

Epictetus was a Greek philosopher and Roman slave who lived in the first century. He was an astute observer of human behavior and often used nautical metaphors to dispense his philosophy. The impetus for this leadership award comes from the metaphor of the ship's captain at the helm of the vessel in turbulent seas: “Anyone can hold the rudder when the sea is calm.” The clear inference here is that it takes a strong, confident and undeterred leader to keep the ship afloat, on course and the crew safe.

This award acknowledges leadership characteristics in an individual who models behavior for other aspiring leaders to emulate, who maintains mission focus at all times and who demonstrates concern and a caring attitude for “shipmates.”

#### 2011 Junior Navy Epictetus Leadership Award

Presented to HM2 Sheryl May Roxas, USN, for exemplary leadership in the United States Navy in guiding and caring for Sailors and Marines.

#### 2011 Senior Navy Epictetus Leadership Award

Presented to Capt. John Cordle, USN, for exemplary leadership in the United States Navy in guiding and caring for Sailors under his command.

#### 2011 Junior Marine Corps Epictetus Leadership Award

Presented to Sgt. Justin Maloney, USMC, for exemplary leadership in the United States Marine Corps in guiding and caring for Marines.

#### 2011 Senior Marine Corps Epictetus Leadership Award

Presented to GySgt Enrique Morenoruiz, USMC, for exemplary leadership in the United States Marine Corps in guiding and caring for Marines.

#### NCCOSC Peabody Award

“The Care of the Patient.” The award was derived from a 1925 lecture to medical students at Harvard in which Dr. Peabody ended the lecture with the essential healing component in all treatment: “For the secret of the care of the patient is in caring for the patient.”

The honoree exemplifies the spirit of Dr. Peabody's teaching. In addition to demonstrating competent mental health skills, the honoree's values, attitudes and behavior embody compassionate concern and caring for patients.

#### 2011 NCCOSC Junior Peabody Caregiver Award

Presented to Sgt. Justin Clark, USMC, for the consistent and compassionate care of Marines and Sailors.

#### 2011 NCCOSC Senior Peabody Caregiver Award

Presented to Capt. Keith Stuessi, MC, USN, for the consistent and compassionate care of Marines, Sailors and Soldiers suffering from combat and operational stress conditions.



# BIOGRAPHIES



## Admiral Jonathan W. Greenert, Vice Chief of Naval Operations

Adm. Jonathan W. Greenert is a native of Butler, Pa. He graduated from the U.S. Naval Academy in 1975 and completed studies in nuclear power for service as a submarine officer.

His career as a submariner includes assignments aboard *USS Flying Fish* (SSN 673), *USS Tautog* (SSN 639), Submarine NR-1 and *USS Michigan* (SSBN 727 - Gold Crew), culminating in command of *USS Honolulu* (SSN 718) from March 1991 to July 1993.

Subsequent fleet command assignments include commander, Submarine Squadron 11; commander, U.S. Naval Forces Marianas; commander, U.S. 7th Fleet (August 2004 to September 2006); and commander, U.S. Fleet Forces Command (September 2007 to July 2009).

Greenert has served in various fleet support and financial management positions, including deputy chief of naval operations for integration of capabilities and resources (N8); deputy commander, U.S. Pacific Fleet; chief of staff, U.S. 7th Fleet; head, Navy Programming Branch; and director, Operations Division Navy Comptroller.

He is a recipient of various personal and campaign awards, including the Distinguished Service Medal (5 awards), Defense Superior Service Medal and Legion of Merit (4 awards). In 1992, he was awarded the Vice Admiral Stockdale Award for inspirational leadership. He considers those awards earned throughout his career associated with unit performance to be most satisfying and representative of naval service.



## Major General Michael R. Regner, Com- manding General, 1st Marine Division

Major General Regner was raised in Charleston, SC; graduated from The Citadel with a Bachelor of Science degree and received his commission through the Naval Reserve Officer Training Corps in 1976.

As a company grade officer, Major General Regner assumed duties as a Rifle and Weapons Platoon Commander, Company Executive Officer, Recruiting Station Operations and Executive Officer, Company Commanding Officer, Battalion Logistics Officer and also served at Headquarters Marine

Corps Manpower and Reserve Affairs.

As a field grade officer, Major General Regner commanded "B" Company, Headquarters Battalion, Headquarters Marine Corps. He served as a Battalion Landing Team Executive Officer and deployed to Landing Force 6th Fleet and 7th Fleet areas, participating in OPERATION DESERT STORM, UN OPERATIONS in Somalia and NATO OPERATIONS in and around the Former Republic Yugoslavia. He also commanded the 2nd Battalion, 8th Marines and deployed to the Landing Force 6th Fleet area in support of operations in and around Bosnia. He was then assigned to Supreme Headquarters Allied Powers Europe, Mons, Belgium as the Joint Amphibious Operations Planner.

As a Colonel, Major General Regner reported for duty to Headquarters Marine Corps, Office of Legislative Affairs as the Director, House of Representatives, U.S. Marine Corps Liaison Office. In July 2002, he assumed command of the 13th Marine Expeditionary Unit and from August 2003 to March 2004 deployed in support of OPERATIONS ENDURING and IRAQI FREEDOM. Upon returning from deployment, he was reassigned as the 1st Marine Expeditionary Force Operations Officer, participating in the liberation of Fallujah and the first free elections in Al Anbar Province, Iraq.

In 2005 he was promoted to Brigadier General and served in the Office of the Chief of Naval Operations staff as the N80 Deputy Director for Programming. In July 2007 he was reassigned to Headquarters Marine Corps Legislative Affairs as the Legislative Assistant to the Commandant.

In August of 2009, Major General Regner deployed in support of OPERATION ENDURING FREEDOM to Kabul, Afghanistan, as the Deputy Chief of Staff for Joint Operations at International Security Assistance Force Joint Command.



## BIOGRAPHIES



### **Rear Admiral Mark L. Tidd, Chaplain Corps, Chief of Navy Chaplains**

Rear Adm. Tidd is a graduate of Williams College in Williamstown and received his Master's of Divinity from Fuller Theological Seminary and a Master's of Theology from Princeton Theological Seminary. He also is a graduate of the National War College, the Marine Corps Command and Staff College and the Armed Forces Staff College.

Tidd's tours have included deployment with the Marines in support of Operation Desert Storm, and he served as fleet chaplain for U.S. 5th Fleet and as command chaplain for the U.S. European Command. He later was deputy chief of Navy Chaplains and Chaplain of the Marine Corps. He became the 25th chief of Navy Chaplains in August 2010.



### **Rear Admiral Margaret Grun Kibben, Chaplain of the Marine Corps and Deputy Chief of Navy Chaplains**

Chaplain Kibben is a graduate of Goucher College and received both her Master's of Divinity and Doctorate of Ministry from Princeton Theological Seminary. She also has a master's degree from the Naval War College.

Kibben's USMC tours include Marine Corps Base Quantico and the Second Force Service Support Group, Camp Lejeune. Her Navy assignments include the U.S. Naval Academy, USS San Diego (AFS-6) and chaplain of the U.S. 3rd Fleet. Kibben also completed a deployment as the command chaplain, Combined Forces Command Afghanistan, as an individual augmentee. She was detailed to the Office of the Chief of Navy Chaplains and assumed her current position in August 2010.



### **Rear Admiral C. Forrest Faison, III, MC, USN Commander, Navy Medicine West and Naval Medical Center San Diego**

A native of Norfolk, Va., Rear Adm. Faison received his Bachelor's Degree in chemistry from Wake Forest University and his medical degree from the Uniformed Services University of the Health Sciences. He completed post-graduate training in General Pediatrics at Naval Hospital San Diego and fellowship training in Neurodevelopmental Pediatrics at the University of Washington. He is board

certified in pediatrics and is a senior member of the American College of Physician Executives. Faison assumed the duties of commander, Naval Medical Center San Diego and Navy Medicine West on August 20th, 2010.



### **Rear Admiral Colin G. Chinn, MC, USN Director, TRICARE Regional Office West**

Rear Adm. Chinn is currently assigned as director of TRICARE Region West and Pacific, overseeing managed care support contracts and an integrated health care delivery system in 21 states and the Pacific covering 3 million TRICARE eligible beneficiaries.

He attended the Medical College of Virginia and earned a Doctor of Medicine degree in 1985. Chinn completed an internal medicine residency at Naval Hospital Oakland and a gastroenterology fellowship at Naval Medical Center San Diego.

Chinn has several tours with the Marine Corps and is a Fleet Marine Force Qualified Officer. He served as the 15th commanding officer of Naval Hospital Oak Harbor.

Chinn is a Fellow of the American College of Physicians and is board certified in Internal Medicine and Gastroenterology.

# BIOGRAPHIES



## **Rear Admiral John "Chris" Sadler, USN Commander, Naval Air Forces Reserve Deputy Commander, Naval Air Forces Deputy Commander, Naval Air Forces U.S. Pacific Fleet**

Rear Adm. John "Chris" Sadler assumed duties as commander, Naval Air Forces Reserve, deputy commander, Naval Air Forces and deputy commander, Naval Air Forces U.S. Pacific Fleet in August 2010. Sadler graduated from the University of South Carolina in 1982 with a Bachelor of Science degree in electrical engineering (cum

laude). He earned honors in all phases of flight training and throughout his career has flown almost 3,000 hours in tactical aircraft and accumulated 388 carrier landings. Sadler assumed command of Strike Fighter Squadron 201 in July 1999; other command tours include commander Fleet Air Western Pacific 0170, chief of Naval Air Training Reserve Component Command; 6th Fleet Detachment 802 and deputy Reserve Component commander, Navy Region Southeast. He is a graduate of Air Command and Staff College and the Joint Forces Staff College.



## **Brigadier General Rhonda Cornum, M.D., Ph.D., USA Director, Comprehensive Soldier Fitness HQDA, DCS G-3/5/7**

Brig. Gen. Rhonda Cornum is currently Director of Comprehensive Soldier Fitness within Headquarters, Department of the Army. Previous assignments include Army Assistant Surgeon General for Force Projection, Army Forces Command (FORSCOM) Surgeon, Landstuhl Regional Medical Center Commander, and 28th Combat Support

Hospital Commander, among others. Cornum earned a Ph.D. in biochemistry from Cornell in 1978, and a M.D. from the Uniformed Services University in 1986. She completed a general surgery internship at Walter Reed Army Medical Center, and specializes in urology. Cornum is a veteran of the First Gulf War and a former prisoner of war from that conflict.



## **Captain Sara Kass, MC, USN Deputy Chief of Wounded, Ill and Injured (WII) at the Bureau of Medicine and Surgery (BUMED)**

Born and raised in Ephrata, Wash., Capt. Kass received her Bachelor's Degree in biology from Pacific Lutheran University and her medical degree from George Washington University. She returned to Washington State to complete her internship and residency in family medicine at the Puget Sound Family Medicine Residency at Naval Hospital Bremerton. Kass is board certified in family medicine and is an assistant professor of family medicine at

the Uniformed Services University of the Health Sciences. Kass has served as the Assistant Deputy Chief of Wounded, Ill and Injured (WII) at the Bureau of Medicine and Surgery (BUMED) since August 2008. She assumed the duties of Deputy Chief for WII in December 2010.



## **Captain Scott Johnston, MSC, USN Director, Naval Center Combat & Operational Stress Control**

Capt. Scott L. Johnston, a native Californian, received his Bachelor's Degree from the University of California at Davis and his Ph.D. in clinical psychology from the Pacific Graduate School in Palo Alto. He also completed a post-doctoral fellowship in pediatric psychology at Harvard Medical School. He is board certified in both forensic and clinical psychology.

Johnston has deployed five times in support of Operation Iraqi Freedom and once with the Joint Task Force, Guantanamo Bay, Cuba. He also has served at Naval Hospital Yokosuka, Japan; Marine Barracks Washington; Presidential Helicopter Squadron One; and Naval Health Clinic Hawaii. He currently serves as director of the Naval Center for Combat & Operational Stress Control.



# BIOGRAPHIES



## Master Chief (SS/SW) Rick D. West, Master Chief Petty Officer of the Navy

Master Chief Petty Officer of the Navy Rick D. West was born in Rising Fawn, Ga. He graduated from Northwest Georgia High School in 1981 and entered the U.S. Navy.

West received recruit training and quartermaster training at Orlando, Fla., followed by Enlisted Submarine School at Groton, Conn. His first duty assignment was on board *USS Ethan Allen* (SSN 608), where he completed submarine qualifications. Other assignments include *USS Thomas Edison* (SSN 610), *USS Sea Devil* (SSN 664), Commander

Naval Activities United Kingdom (COMNAVACTUK), *USS Tecumseh* (SSBN 628)(Blue) and Commander, Submarine Force, U.S. Pacific Fleet (COMSUBPAC) Staff (TRE Team).

West was then assigned as chief of the boat on board the San Diego-based fast attack submarine, *USS Portsmouth* (SSN 707), completing two Western Pacific deployments. The crew earned two Battle Efficiency “E” awards.

Upon completion of a command master chief (CMC) tour at COMSUBRON 11, he was selected as force master chief, COMSUBPAC from January 2001 to 2004. West was then assigned to *USS Preble* (DDG-88) homeported in San Diego, where he deployed to the Persian Gulf and qualified as an enlisted surface warfare specialist.

West was selected during his tour on the *Preble* to serve as Pacific Fleet (PACFLT), fleet master chief from February 2005 to June 2007. Following PACFLT, he served as the 14th fleet master chief for the Commander, U.S. Fleet Forces Command.

West’s personal awards include the Legion of Merit (two awards), Meritorious Service Medal (three awards), Navy Commendation Medal (four awards), Navy Achievement Medal (two awards), Enlisted Surface Warfare Insignia, Enlisted Submarine Insignia and SSBN Deterrent Patrol Pin.



## Sergeant Major D.K. Burs, Sergeant Major of Manpower and Reserve Affairs

Sgt. Maj. Burs entered the Marine Corps on July 29, 1979, at Parris Island, S.C. “A” Company, 1st Recruit Training Battalion. After Combat Engineer School, Private First Class Burs was assigned to 8th Engineer Support Battalion (ESB), Charlie Company, serving as team/squad leader, deploying to South America and the Caribbean. Meritoriously promoted twice, Burs was again promoted meritoriously while with 9th ESB in 1983, serving as Platoon Sergeant and Platoon Commander at that unit and with 7th ESB.

Burs completed Drill Instructor School in 1984 and transferred to Echo Company, 2nd Recruit Training Battalion and was meritoriously promoted. Burs received orders to 3rd Combat Engineer Battalion (CEB), serving as Platoon Sergeant/Company Gunnery Sergeant.

While assigned 1st CEB, Burs deploying to the Western Pacific and Middle East attached to Battalion Landing Team (BLT) 1/1 and BLT 1/3. From 1990 to 1993, he was promoted to gunnery sergeant and served with at Marine Barracks, Annapolis and again with 1st CEB where he deployed with BLT 1/4 and was promoted to first sergeant. In 1996, First Sergeant Burs served with Truck Company, Headquarters Battalion, 1st Marine Division and Battalion landing team 2/4, 31st Marine Expeditionary Unit. He followed this with assignments as Company First Sergeant for Communication Company and for Headquarters and Service Company, Headquarters Battalion, 2nd Marine Division.

Burs was selected as Sergeant Major in 1999 and assigned to 1st Battalion, 8th Marines. From 2001 to 2007 he was the Sergeant Major for 9th ESB, MCB Headquarters and Service Battalion, Camp Pendleton, III MEF Headquarters Group, III MEB, NCFT – JTF 510 Enduring Freedom, Mobilization Command, deploying in support of Operation Iraqi Freedom as the Multi-National-Security-Transition-Command SgtMaj. 2007, Burs was assigned SgtMaj, M&RA.

His personal awards include the Bronze Star, Meritorious Service medal with gold star, Joint Commendation, Navy Marine Corps Commendation with three gold stars, the Navy Marine Corps Achievement with gold star and Combat Action Ribbon.

# ACCREDITATION STATEMENTS



## Physicians

The Navy Medicine Manpower, Personnel, Training & Education Command, (NM MPT&E), Continuing Medical Education (CME) Department, Bethesda, Maryland, is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. NM MPT&E designates this live learning educational activity for a maximum of 30.25 *AMA PRA Category 1 Credit(s)*<sup>™</sup>. Physicians should only claim credits commensurate with the extent of their participation in the activity.

Disclosure Statement: As a sponsor accredited by the Accreditation Council for Continuing Medical Education (ACCME), it is the policy of Navy Medicine Manpower Personnel, Training, and Education (NM MPT&E) Command to require the disclosure of the existence of any significant financial interest or any other relationships a faculty member or a sponsor has with the manufacturer(s) or any commercial product(s) discussed in an educational presentation, and also to disclose discussions of unlabeled/unapproved uses of drugs or devices during their presentation(s). NM MPT&E Command has established policies in place that will identify and resolve all conflicts of interest prior to this educational activity. Detailed disclosure will be made on the date(s) of the activity.

## Nurses

This continuing nursing education activity was approved by Navy Medicine Manpower, Personnel, Training and Education Command, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

30.25 CNE contact hours are provided for participation in this educational activity.

In order to receive full contact-hour credit for this CNE activity, you must attend the activity, participate in individual or group activities, such as exercises or pre/post tests, and complete and submit the evaluation and verification of attendance forms at the conclusion of the activity.

## Psychologists

The Mental Health Service, NMCS D, is approved by the American Psychological Association to sponsor continuing education for psychologists. The Mental Health Service, NMCS D, maintains responsibility for this program and its content. Up to 30.25 CE credit hours for psychologists are available for completion of this course, dependent on specific sessions attended.

## Social Workers

CEUs will be granted through the state of California, Department of Consumer Affairs Board of Sciences Continuing Education Units (CEUs).

One CME hour is equivalent to one SW CEU.

### A Note from NCCOSC:

NCCOSC welcomes a variety of ideas to help improve the psychological health of service members. However, the opportunity to present at our conference is not necessarily indicative of an endorsement of the program or viewpoints shared. Presentations at the conference may be based on personal experience, theory, opinion, preliminary data or established evidence-based practices. NCCOSC supports the use of best practices. Evidence-based practice means that health care providers are using evaluation and treatment that has been shown to be effective through research. NCCOSC fosters an environment where clinicians, leadership, scientists and service members work together to integrate measurement into programs to mitigate and treat operational stress injuries. We strive to build a consensus between science and practical applications that take into account the expertise of providers, the need to demonstrate effectiveness and the characteristics of the individual(s) and their unique needs. Over the course of the conference, we encourage you to consider these issues as you listen to the presentations and hear new ideas.

# CORE ELEMENTS OF COSC

## THE STRESS CONTINUUM MODEL

READY (Green)	REACTING (Yellow)	INJURED (Orange)	ILL (Red)
<ul style="list-style-type: none"> <li>• Good to go</li> <li>• Well trained</li> <li>• Prepared</li> <li>• Fit and focused</li> <li>• Cohesive units and ready families</li> </ul>	<ul style="list-style-type: none"> <li>• Distress or impairment</li> <li>• Mild and transient</li> <li>• Anxious, irritable, or sad</li> <li>• Behavior change</li> </ul>	<ul style="list-style-type: none"> <li>• More severe or persistent distress or impairment</li> <li>• Leaves lasting memories, reactions and expectations</li> </ul>	<ul style="list-style-type: none"> <li>• Stress injuries that don't heal without help</li> <li>• Symptoms and impairment persist over many weeks or get worse over time</li> </ul>
Unit Leader Responsibility	Individual, Shipmate, Family Responsibility		Caregiver Responsibility



## FIVE CORE LEADER FUNCTIONS



# CONFERENCE SCHEDULE



## Tuesday Morning, April 26, 2011

### “Combat and Operational Stress Control: Critical Role of the Junior Leader”

The Marine Corps and Navy have developed a new conceptualization of “war wounds” to include psychological wounds that adversely affect mind, body and spirit. This concept was extended to include not only individual service members but family members as well.

The conceptualization views psychological stress on a continuum of severity, duration and functional impairment. This conceptual paradigm ranges from “ready” (mission ready) to “reacting” (mild/transient/functional) to “injured” (moderate/persistent/distressed) to “ill” (severe/prolonged/disabled).

The stress injury concept provides leaders with a framework for assessing psychological health in their people, enabling improved risk detection and intervention to restore health and wellness. It is consistent with the current scientific literature and research evidence on the effects of stress on the brain, body and mind; this model reframes stress reactions and responses to reduce the stigma associated with seeking mental health care.

Combat and Operational Stress Control (COSC) and Operational Stress Control (OSC) were created to preserve a ready force and promote long-term health and well-being of individual Marines, Sailors and family members. These two objectives are interrelated and recognized as of paramount strategic importance. The mission of the Navy and Marine Corps is to not only win wars but return healthy citizens to civilian life after those wars are fought.

Grand Hall

#### 0800 – 0820 Opening Ceremony

**0820 – 1000** *Capt. Scott Johnston, MSC, USN - Director, NCCOSC*  
*Rear Adm. C. Forrest Faison, III - Commander, Navy Medicine West and Naval Medical Center San Diego*  
*Admiral Jonathan Greenert - Vice Chief of Naval Operations*  
*Master Chief Rick D. West - Master Chief Petty Officer of the Navy*  
*Capt. Lori Laraway, NC, USN - Director, Navy OSC*

#### 1000 – 1030 Break

**1030 – 1200** *Greg Goldstein - Program Manager, MC COSC*  
*Staff Sgt. Josh Hopper - Intel Chief, 3rd Marine Special Operations Battalion, Camp Lejeune*  
*Kirsten Woodward, LCSW - Director, BUMED FOCUS and Family Programs Division*  
*Robert Mclay, Ph.D., M.D. - Research Director, Naval Medical Center San Diego*  
*David Mather, Ph.D. - Psychology Training Director, Naval Medical Center San Diego*

*Lt. Cmdr. Tawanna Hopson - Navy Recruiting Command Operational Stress Control and Suicide Prevention Coordinator*

*Lt. Col. James “Hall” Bain - Commanding Officer, 3d Combat Engineer Battalion*

**1200 – 1300 Lunch on your own**

## Tuesday Afternoon, April 26, 2011

### Breakout Sessions

#### LEADERSHIP - A

Grand Hall

**1300 – 1350**

#### Navy Leader Panel: Stories of Navigating Stress

*Capt. Lori Laraway, NC, USN, Rear Adm. Michael Tillotson, Master Chief of the Navy Rick West*

Stories remain powerful tools for teaching some of the most important lessons of Operational Stress Control. Hear four senior Navy leaders discuss challenges they faced personally and as leaders and lessons they learned in navigating operational stress.

**1350 – 1400**

#### Speaker Transition

**1400 – 1450**

#### Mitigating Stress: How an Alternative Watch Schedule Worked Aboard Ship

*Nita Shattuck Ph.D., Capt. John Cordle, Capt. Nicolas Davenport, M.D.*

In 2010, a cruiser commanding officer decided to implement an alternative watch schedule aboard his ship to mitigate stress among his crew. In this panel discussion, the commanding officer will discuss what led to his decision and his impression of the effects of this change; a Naval Safety Center physician will discuss safety implications of such changes in schedules; and a researcher will discuss what the crew revealed in a post-deployment survey.

**1450 – 1520**

#### Break

**1520 – 1710**

#### “Brothers at War” Screening

*Lt. Cmdr. Bonnie Chavez, MSC, USN, Jake Rademacher*

“Brothers at War” is a rare look at the bonds and service of our soldiers on the frontlines and the profound effects their service has on the loved ones they leave behind. The film follows Jake Rademacher’s exploits as he risks everything to tell his two brothers’ story.

#### LEADERSHIP - B



# CONFERENCE SCHEDULE

## Town and Country Room

### 1400 – 1450 **It's Okay – Overcoming the Stigma of Getting Help in the Prevention of Suicide**

*LT Kermit Jones*

This presentation looks at how people set the example in order to take care of those around them for whom they are responsible (those who look up to them) instead of finding shame in wearing their uniform to mental health.

### 1450 – 1520 **Break**

### 1520 – 1610 **Give Me My Weapon – Let Me Go Back**

*Laurie S. Giertz*

Discussions will focus on the mind-set of returning combat Marines and Sailors and post-deployment symptoms and challenges of PTSD, TBI and moral injury, as well as learning to have better communication between Navy Medicine and Marine Commands regarding medical challenges following a deployment.

### 1610 – 1620 **Speaker Transition**

### 1620 – 1710 **The Real Warrior Campaign**

*Julie Hughes*

The presentation will address the critical role of junior and senior leadership in supporting service members and the range of tools and resources available to assist them. Participants will hear a Marine sergeant share his personal story about seeking treatment for psychological health concerns and receive a debrief of the campaign, including lessons learned, insights into the next phases of the campaign, and best practices on health communication within the military culture.

## CLINICAL

### San Diego Room

### 1300 – 1350 **Avatar – Facilitated Therapy and Virtual Worlds: Next Generation Tools for Behavioral Medicine**

*Walter Greenleaf, Ph.D.*

This presentation will provide an overview of current Virtual Reality systems and explore their utility in clinical behavioral medicine, training and supervision. Examples will be provided showing virtual environments that are being used to treat PTSD, provide social skills training, provoke cue reactivity in substance abuse treatment, treat conduct and anxiety disorders, and other examples from clinical psychology and training.

### 1350 – 1400 **Speaker Transition**

### 1400 – 1450 **Psychological Health Pathways**

*Bart Jarvis, Ph.D., Shannon Lelakes, MFT, Jennifer Webb-Murphy, Ph.D.*

This discussion will focus on how military health programs have expanded to meet the urgent psychological health needs resulting from the wars in Afghanistan and Iraq, and how the demand for increased services—resulting in new clinical programs and improved access to care—has created a more fragmented system of care.

### 1450 – 1520 **Break**

### 1520 – 1610 **POWER: A Wellness Model for Rehabilitation of Mild TBI in an Active Duty Military Population**

*Carole R. Roth, Steve Pluth, Kim Gottshall*

The Program Of Wellness Education and Recovery (POWER) is a multidisciplinary response to the need for services for individuals who have ongoing symptoms of secondary to mild traumatic brain injury. This presentation provides an overview of the program as well as preliminary outcome data.

### 1610 – 1620 **Speaker Transition**

### 1620 – 1710 **PTSD: A Comprehensive Neurophysiological Remedy**

*Siegried Othmer, Ph.D.*

In this report, we present results of EEG neurofeedback conditioning of brain function for cases of PTSD ranging from long-standing to recent onset. Symptom recovery data are shown for veterans from the World War II, Vietnam and current eras, and two stages of recovery identified.

# CONFERENCE SCHEDULE



## RESEARCH

### California Room

#### 1300 – 1350 Potential of Neurofeedback as an Adjunct Treatment for Service Members with Combat Stress or PTSD

*Maj. Michael Villanueva, MSC, USA (Ret.), Ph.D., Anna Benson, Tamsen LaDou*

Clinical observations and self-reports have been almost universally positive about the value of neurofeedback as an adjunct to standard treatments for PTSD. However, critical questions remain as to whether our observations can be reproduced using more detailed outcome measures, if clinical improvements are sustained over time, and how outcomes compare to patients who did not pursue or complete treatment.

#### 1450 – 1520 Break

#### 1520 – 1610 Training Resilience: A Mastery Model

*Siegried Othmer, Ph.D.*

A principal hurdle faced in providing care for PTSD and TBI-related dysfunction to servicemen is denial of their dysfunction. We propose an alternative recovery model, which is constructed entirely on the concept of training to mastery. With neurofeedback we are now in a position to train brain function in all of its aspects. Substantial clinical data will be shown in support of the mastery model.

#### 1610 – 1620 Speaker Transition

#### 1620 – 1710 Correlates of Resilience in Repatriated Prisoners of War

*Lt. Francine Segovia, Ph.D.*

The Navy's Robert E. Mitchell Center for Prisoner of War Studies conducted a detailed review of variables predicting positive mental health outcomes in Vietnam repatriated prisoners of war (RPWs). Optimism appears to buffer individuals from emotional distress, ultimately protecting them from psychiatric illness. Our study suggests that even in the face of heinous external conditions, degree and severity of the situation is determined by an individual's disposition.

## FAMILY

### Golden West

#### 1300 – 1350 Navy Family Resilience

*Admiral and Mrs. Jonathan Greenert*

#### 1350 – 1400 Speaker Transition

#### 1400 – 1450 Project FOCUS: A Best-Practice Program Application

*Kirsten R. Woodward, LCSW*

FOCUS (Families OverComing Under Stress) is an evidence-based family resiliency training program that promotes strengths and mitigates combat operational stress. Implemented at scale through a BUMED initiative, FOCUS has demonstrated positive psychological health for spouses, children and service members. We will demonstrate program skills, present effectiveness findings, and discuss key adaptations including couples, combat injured and Web-based programs.

#### 1450 – 1520 Break

#### 1520 – 1610 Navigating Stress: Stories from Military Spouses

*Cmdr. Leanne Braddock, USN (Ret.)*

Stories remain powerful tools for teaching some of the most important lessons of Operational Stress Control. Hear four military spouses discuss the challenges they faced and lessons they learned in navigating stress on the homefront.

#### 1610 – 1620 Speaker Transition

#### 1620 – 1710 FOCUS for Couples: Skill-Based Training for Military Couples

*Tom Babayan, M.S., Melinda L. Morgan, Ph.D., LCSW*

This presentation will describe the adaptation and core components of the BUMED implementation of the FOCUS Program for military couples (FOCUS-C). The content of the six-session model will be described with case examples of how the intervention has strengthened relationship resilience and increased family readiness. Descriptive and demographic data for the couples served to date will be presented. Outcome data will also be reviewed.



# CONFERENCE SCHEDULE

## COMBINED

*Pacific Salon 1&2*

**1300 – 1450** **Combat Operational Stress First Aid (COSFA) 1: Foundations and Assessment**

*Patricia Watson, Ph.D., Capt. Richard J. Westphal, Ph.D., USN (Ret.), Capt. William Nash, MC, USN (Ret.), Brett Litz, M.D.*

This presentation will describe the conceptual and theoretical frameworks used to develop COSFA and strategies for recognizing stress injuries.

**1450 – 1520** **Break**

**1520 – 1610** **Peer Consultation in the Dissemination of Evidence-Based Psychotherapies**

*Carrie S. Rodgers, Ph.D.*

This presentation will review the current dissemination efforts of both the Department of Defense and Department of Veteran's Affairs on evidence-based psychotherapies for the treatment of PTSD. A model for peer consultation will be presented and a discussion of the role of consultation in the professional development of mental health providers will be discussed.

**1610 – 1620** **Speaker Transition**

**1620 – 1710** **Increasing Total Force Fitness: Unit Fitness in the 21st Century**

*Maj. Todd Yosick, USA*

Full spectrum operations challenge even the most fit and resilient warriors. The Chairman of Joint Chiefs of Staff (CJCS) highlighted in his 2011 Strategic Guidance that “we will improve the Health-of-the-Force by caring for our people and their families and by restoring our readiness.” Unit fitness is paramount in supporting the CJCS’s strategic intent and serves as the center of gravity for enhancing and sustaining combat readiness. Unit fitness is a critical component of the social fitness domain of Total Force Fitness and the CJCS’s strategy for restoring readiness. This presentation will consist of an emerging Military Demands Resources Model of Unit Fitness, which highlights key unit fitness actions for increasing resilience and performance in the Joint Operational Environment.

*Grand Hall*

**1800 – 2000** **“Brothers at War” – An Evening with Jake Rademacher**

All attendees and guests welcome. See page 11 for details.

## Wednesday Morning, April 27, 2011

### “Building Resilience”

Ensuring the well-being of Marines and Sailors includes not only strengthening them, but also keeping them strong, monitoring their condition, applying first aid when they are injured, and returning them to full fitness as soon as possible. However, there is much more to caring for our Marines and Sailors than their physical health. Caring and preserving their psychological health is as much a war-fighting issue as it is a sacred duty and it is of paramount concern to mission readiness.

To promote psychological health in their Marines and Sailors, leaders must actively foster resilience, prevent stress problems as much as possible, recognize when stress problems have occurred and eliminate the stigma associated with accessing appropriate care.

Psychological health is a broad concept that goes far beyond the more limited concepts of mental health and readiness. Among its many components are a healthy lifestyle, strength of body and mind, moral and spiritual fitness, positive relationships with oneself and others and confidence based on real competence. Those leadership responsibilities and tasks that directly contribute to psychological health comprise the mission of combat and operational stress control (COSC) in the Marine Corps and operational stress control (OSC) in the Navy.

*Grand Hall*

**0800 – 0930**

*Maj. Gen. Michael Regner - Commanding General, 1st Marine Division  
Sgt. Mjr. D.K. Burs, Sergeant Major of Manpower and Reserve Affairs  
Joel Goodman, Ph.D. - Founder and Director, The HUMOR Project*

**0930 – 1000**

**Break**

**1000 – 1210**

*Lt. Col. Todd Simmons - 1/7 Commanding Officer  
Capt. John Cordle, USN - CNSL Cruiser Destroyer Current Readiness (N47)  
Maj. Gen. Tom Jones, USMC (Ret.) - President/Founder, Outdoor Odyssey  
Steven Holton, USN (Ret.) - Program Analyst, Navy Operational Stress Control  
Staff Sgt. Dominic R. Tino, Operational Stress Control and Readiness (OSCAR) Master Trainer  
Dave McIntyre - President and CEO, TriWest Healthcare Alliance*

**1210 – 1300**

**Lunch on your own**

# CONFERENCE SCHEDULE



## Wednesday Afternoon, April 27, 2011

### Breakout Sessions

#### LEADERSHIP - A

##### Grand Hall

- 1300 – 1350** **Why Use Humor? Why Tickling the Funny Bone Can Help You Tackle Stress**  
*Joel Goodman, Ph.D., Capt. Laurie Laraway, NC, USN*  
The Navy Operational Stress Control Program has recently launched a humor campaign to help Sailors and their families better navigate stress. But what are the benefits of humor? Humor educator Dr. Joel Goodman answers those questions and presents the positive aspects of humor in navigating stress.
- 1350 – 1400** **Speaker Transition**
- 1400 – 1450** **Laughter. Good Medicine: A Conversation with the National Cartoonists Society**  
*Capt. Lori Laraway, NC, USN, Jeff Bacon, Joel Goodman, Ph.D.*  
In this panel conversation moderated by Dr. Joel Goodman, Jeff Bacon—creator of *Broadside* and *Greenside*—and 10 nationally known military and civilian cartoonists will share some of their work and talk about the stories from the thousands of military members they have touched.
- 1450 – 1520** **Break**
- 1520 – 1610** **Sleep: Stress Moderator and Force Multiplier**  
*Nita Shattuck, Ph.D.*  
This talk will address the latest findings on sleep in humans and discuss the important role of sleep for individuals in stressful conditions, such as those faced by members of the U.S. military. The presentation will discuss the challenges of providing adequate sleep in combat and other operational venues and the risks posed by chronic and acute sleep debt.
- 1610 – 1620** **Speaker Transition**
- 1620 – 1710** **Navy OSC Resources 101**  
*Cmdr. Leanne Braddock, USN (Ret.), Lorna Geggis, Wendy Poling*  
Over the past two years, Navy OSC has developed a variety of training aids and outreach materials to help commands raise awareness of OSC. In this session, the OSC communication specialists will provide an overview of resources and attendees will have the opportunity to provide suggestions for items they would like to see developed to assist them in building OSC awareness.

#### LEADERSHIP - B

##### Town and Country Room

- 1300 – 1350** **Implementation of an Integrated Mental Readiness, Resiliency & Recovery Program in a Forward-Based Marine Corps Division**  
*Lt. Cmdr. Duane Matthew Lawrence*  
Division Psychiatry/Operational Stress Control and Readiness (OSCAR) Mental Health for 3d Marine Division has implemented a proactive program of training, outreach and intervention to promote and sustain mental readiness, build resiliency and assist in recovery for active-duty service members and their families. This presentation will provide attendees with a comprehensive review of the implementation of this program in anticipation of potential application of its core pillars to other regions.
- 1350 – 1400** **Speaker Transition**
- 1400 – 1450** **Substance Abuse and Post-Traumatic Stress: The Prevalence of Co-Existing Disorders**  
*George H. Mangual, LPC, ACSW, CCS*  
This presentation discusses the association between PTSD and substance use disorders among combat veterans and civilians.
- 1450 – 1520** **Break**
- 1520 – 1610** **The Generation of Moral Injury and the Basis of Stigma in the U.S. Marine Corps: A Cultural Values Viewpoint**  
*Frank Tortorello Jr., Ph.D.*  
A critical examination of moral injury based on Tortorello's participation in and observation of active-duty Marine Corp martial arts training (MCMAP) as a civilian cultural anthropologist.
- 1610 – 1620** **Speaker Transition**
- 1620 – 1710** **Medical and Mental Health Preparations: 3rd Battalion, 5th Marines (3/5) Return**  
*Rear Adm. Forrest Faison, MC, USN, Rear Adm. Colin Chinn, MC, USN, MajGen Michael Regner, USMC, David McIntyre, Col. Willard Buhl, USMC*  
Panel presentation to discuss what medical and mental health preparations are being made for MARDIV 3/5's return. The steps being taken with 3/5 will become a template on how we should support returning units in the future, as desired by that unit CO. This presentation will show what can happen when people come together and think of "how it might be" vice "how it is" and stimulate thinking on how we can support units better.



# CONFERENCE SCHEDULE

## CLINICAL

### San Diego Room

1300 – 1350

#### Panel Discussion: A Review of Three Military Multi-modal/Multi-disciplinary Treatment Programs for Combat-related PTSD and Co-morbid Conditions

*Jerry Wesch, Ph.D., Joseph Maio, Ira Grossman*

This panel is comprised of two novel Army intramural treatment programs and the Navy's first residential treatment program for combat related PTSD and co-occurring stress conditions. All three programs share similar features of integrating evidenced-based treatments with complementary alternative medicine approaches to provide comprehensive and integrated care.

1350 – 1400

#### Speaker Transition

1400 – 1450

#### Post Deployment Stuttering Resulting from Brain Injury or Stress

*Carole R. Roth, Ph.D., Capt. Robert Bibeau, USMC*

The stuttering-like speech behaviors of returning service members having been exposed to combinations of physiological and emotional trauma present a challenging differential diagnosis. Understanding the nature and etiology of the speech difficulties is important in designing effective intervention and evaluating for return to duty. This seminar will examine the characteristics of stuttering presented by service members returning from combat.

1450 – 1520

#### Break

1520 – 1610

#### The Resiliency Training for About-to-be-Deployed Submariners

*Robert Astur, Ph.D.*

One successful model toward building resiliency to anxiety disorders and burn-out is Acceptance and Commitment Therapy (ACT: Hayes et al., 1999). ACT focuses on increasing optimism, cognitive flexibility and active coping, as well as promoting positive action toward life values. Data from the qualifying process and attrition are still being obtained, but initial results indicate more than 95% recommend the training. Application to other Navy populations will be discussed.

1610 – 1620

#### Speaker Transition

1620 – 1710

#### Treating Nightmare-Induced Sleep Avoidance/Deprivation

*Terence Barrett, Ph.D.*

Nightmares and sleep avoidance/deprivation go hand in hand. The impact of this potentially lethal combination is briefly outlined; the interaction of a past combat event, the nervous system reaction to later stimuli (triggers), and nightmare-related sleep disturbance explained; a therapeutic method for managing combat-related nightmares is introduced; and areas of client resistance to this method are described.

## RESEARCH

### California Room

1300 – 1350

#### National Intrepid Center of Excellence (NICoE): An Update

*Capt. Robert Koffman, MC, USN*

Opened June 2010 at a cost of \$62 million, the National Intrepid Center of Excellence (NICoE), located on the National Naval Medical Center campus, strives to be an instrument of hope, healing, discovery and learning for combat-related traumatic brain injury and psychological health conditions. With a mission to be the leader in advancing world-class psychological health and traumatic brain injury treatment, research and education, NICoE offers Wounded Warriors a richly collaborative, truly interdisciplinary model of care while providing patients suffering mild to moderate TBI complicated by chronic pain, poly-pharmacy and co-morbid mental health conditions a two- to three-week outpatient evaluation, state-of-the-art work-up and treatment plan/initiation. Designed, equipped and staffed to handle even the most challenging or refractory patients, many observations have already been made pertaining to common presentations, recurring diagnoses and critically important barriers to patient engagement.

1350 – 1400

#### Speaker Transition

1400 – 1450

#### The Force Health Surveillance Report

*Jennifer A. Phillips, MPH, Michaelle Barnes, MPH, Christine Glasheen, MPH, CTR*

This presentation will describe the methods, outcomes, limitations and future areas of interest being prepared using the Force Health Surveillance Report.

1450 – 1520

#### Break

1520 – 1610

#### A New Perspective on Self-Regulation and Resilience: Lessons Learned from Detainee Operations Sailors

*Rollin McCraty, Ph.D., Capt. Lori Laraway, NC, USN*

Research has identified Detainee Operations personnel at extremely high risk for PTSD and related disorders. In this session, we will take a look at the Navy OSC, in conjunction with the Institute of HeartMath, self-regulation and resilience program, as well as a peer mentor program.

1610 – 1620

#### Speaker Transition

1620 – 1710

#### The Life Value – Why Honor, Courage and Commitment Aren't Enough

*Lt. Kermit Jones, CHC, USN*

Dehumanization and disrespect of the enemy are often linked as a prime cause of PTSD. This presentation will take a look at how we can avoid dehumanization and mitigate the danger of PTSD through our Core Values system.

# CONFERENCE SCHEDULE



## FAMILY

Golden West

**1300 – 1350** Marine Corps Family Resilience  
*Maj. Gen. and Mrs. Michael Regner*

**1350 – 1400** Speaker Transition

**1400 – 1450** Spiritual Fitness  
*Rear Adm. Margaret J. Kibben, Lt. Cmdr. Paul Scott Tremblay*  
This presentation addresses the concept of spiritual fitness and its contribution and relationship to resilience. The presenter defends the position that spiritual fitness is a subclinical dimension of mental health and the primary role of the chaplain in COSC, and concludes by offering a “Spiritual Fitness Continuum” as a tool designed to assist service members in assessing their own spiritual fitness.

**1450 – 1520** Break

**1520 – 1610** FOCUS for Students: Skill-Building for Military Children in the School Setting  
*Taisha Kaaialii, M.S., Tami Patton, M.A. Ed*  
BUMED implementation of FOCUS (Families OverComing Under Stress) provides families with strategies to increase communication, cohesion and support. We will discuss the methods used to address challenges military children experience during the deployment cycle and military life, and highlight the strategies for helping school-age children create meaning of their deployment experience, identify and manage their emotions and practice skills for communicating effectively with family members.

## COMBINED

Pacific Salon 1&2

**1300 – 1450** Combat Operational Stress First Aid (COSEA) 2: Primary and Secondary Interventions  
*Patricia Watson, Ph.D., Capt. Richard J. Westphal, NC, USN (Ret.), Capt. William Nash, MC, USN, Brett Litz, M.D.*

This presentation will describe how to provide Primary and Secondary Aid for individuals with identified orange zone stress injury.

**1450 – 1520** Break

**1520 – 1610** Sleep Quality: Key to Stress Tolerance  
*Siegried Othmer, Ph.D.*

In this session, we will discuss how it has become practical to offer EEG training to improve sleep to our servicemen who suffer from stress-induced sleep problems either during their initial training or during deployment.

**1610 – 1620** Speaker Transition

**1620 – 1710** Caregiver Occupational Stress Assessment  
*Cmdr. Barry D. Adams, MC, USN, Capt. Richard Westphal, NC, USN (Ret.)*  
This presentation will describe the methods and results of an exploratory descriptive study developed by Navy Medicine to assess caregiver occupational stress using the Navy and Marine Corps COSC doctrine stress continuum, four sources of stress injury and stress first aid principles.

Royal Palm 2&3

**1630 – 1730** Joint Service Resilience Chiefs’ Meeting (by invitation only)

Tiki Pavilion

**1800 – 2000** “Meet the Heroes” Social and Awards Ceremony  
All attendees and guests welcome. See page 23 for details.



# CONFERENCE SCHEDULE

## Thursday Morning, April 28, 2011

### “Moral Injury/Inner Conflict”

This plenary session focuses primarily on the concept of moral injury/inner conflict and combat and operational stress control programs currently in use.

Service members recovering from serious wartime injury may face a long and difficult process that is challenging to the individual, the family and to caregivers. Physical and emotional wounds are often present in some form and expressed in diagnosable conditions and disorders. Less obvious, especially for combat veterans, are spiritual wounds (moral injury/inner conflict), which are equally necessary to treat.

**0800 – 0930** *Rear Adm. Mark Tidd - Chaplain Corps, Chief of Navy Chaplains  
Brig. Gen. Rhonda Cornum, Ph.D., M.D. - Director, Comprehensive  
Soldier Fitness HQDA, DCS G-3/5/7*

*Rear Adm. John Sadler - Commander, Naval Air Forces Reserve; Deputy Com-  
mander, Naval Air Forces Deputy; Commander, Naval Air Forces  
U.S. Pacific Fleet*

**0930 – 1000** **Break**

**1000 – 1210** *Brett Litz, Ph.D. - Associate Director, National Center for PTSD  
Cmdr. William Cantrell, Chaplain Corps, USN, Marine Forces Pacific, Deputy  
Force Chaplain, Reserve Matters  
Capt. William Nash, M.D. - MC, USN (Ret.)  
Lt. James M. Keener, Psy.D., ABPP - Division Officer MCRD MHU,  
Naval Medical Center San Diego  
HMCM (FMF/SW) Thomas Twigg - Senior Enlisted Leader for NMCS D, DMS  
Wendy Poling - Communications/Social Media Specialist,  
Navy OSC Program*

**1210 – 1300** **Lunch on Your Own**

## Thursday Afternoon, April 28, 2011

### Breakout Sessions for: The Critical Role of Junior Leaders

#### LEADERSHIP - A

#### Grand Hall

**1300 – 1350** **Command Stress Assessment: A New Tool for Navy Leaders**  
*Cmdr. Leanne Braddock, USN (Ret.), Dr. Geoffrey Patrissi, MA,  
Paul Rosenfeld, Ph.D.*

This presentation will describe the efforts and results of the development of a Navy command-level assessment of OSC and how commanding officers can use the results at the local level.

**1350 – 1400** **Speaker Transition**

**1400 – 1450** **Results of the 2010 Behavioral Health Quick Poll**

*Capt. Lori Laraway, Carole E. Newell*

In June 2010, Navy Personnel Research, Studies and Technology Department (NPRST) administered the 2010 Behavioral Health Quick Poll to assess Navy-wide perceptions of stress in the Navy. The results, including a comparison to the 2009 study, will be presented, as well as a discussion of how the findings were used by the program sponsor.

**1450 – 1520** **Break**

**1520 – 1610** **Applied Resilience: Tools for Leaders**

*Lt. Cmdr. Bonnie Chavez, Ph.D.*

This session will provide leaders with information and tools to build command resilience by using the elements of predictability, controllability, relationships, trust and meaning. Attendees will make practical application of these principles in a variety of scenarios from operational to family-centered, and discuss how specific considerations can foster resilience and improved mission and family readiness.

**1610 – 1620** **Speaker Transition**

**1620 – 1710** **Navy OSC Resources 101**

*Cmdr. Leanne Braddock, USN (Ret.), Lorna Geggis, Wendy Poling*

In this session, OSC communication specialists will provide an overview of resources, and attendees will have the opportunity to provide suggestions for items they would like to see developed to assist them in building OSC awareness.

# CONFERENCE SCHEDULE



## LEADERSHIP - B

### Town and Country Room

**1300 – 1350** **Souls Under Siege: The Effects of Multiple Troop Deployments and How to Weather the Storm**

*Bridget C. Cantrell, Ph.D.*

Warriors on their third and fourth tours of duty have much greater rates of mental health challenges than those on their first or second deployments. This presentation will show us ways to support those living with the pressures of multiple deployments.

**1350 – 1400** **Speaker Transition**

**1400 – 1450** **Spiritual Fitness**

*Rear Adm. Margaret J. Kibben, Lt. Cmdr. Paul Scott Tremblay*

This presentation addresses the concept of spiritual fitness and its contribution and relationship to resilience. The presenter defends the position that spiritual fitness is a subclinical dimension of mental health and the primary role of the chaplain in COSC, and concludes by offering a “spiritual fitness continuum” as a tool designed to assist service members in assessing their own spiritual fitness.

**1450 – 1520** **Break**

**1520 – 1610** **Human Performance Resource Center**

*Capt. Stephen S. Frost, MC, USN, USNR (Ret.)*

A look at Human Performance Optimization (HPO) and how it enables our warriors to enhance and sustain their performance under any environmental condition, instills resilience to resist injury and illness, and optimizes our warriors’ ability to carry out their mission as safely and effectively as possible.

**1610 – 1620** **Speaker Transition**

**1620 – 1710** **Project FOCUS: A Best-Practice Program Application**

*Kirsten R Woodward, LCSW*

FOCUS (Families OverComing Under Stress) is an evidence-based family resiliency training program that promotes strengths and mitigates combat operational stress. Implemented at scale through a BUMED initiative, FOCUS has demonstrated positive psychological health for spouses, children and service members. We will demonstrate program skills, present effectiveness findings and discuss key adaptations, including couples, combat injured and Web-based programs.

## CLINICAL

### San Diego Room

**1300 – 1350** **Cognitive Strategy Training for OIF/OEF Combat Veterans with Mild Cognitive Disorder**

*Marilyn Huckans, Ph.D.*

This presentation will discuss the Portland VA Medical Center’s semi-manualized, group-based Cognitive Strategy Training (CST) intervention for OIF/OEF combat veterans with persistent mild cognitive disorder and a history of TBI, and related pilot data is summarized.

**1350 – 1400** **Speaker Transition**

**1400 – 1450** **Project CARE (Comprehensive Aesthetic Restorative Effort)**

*Capt. Craig Salt, MC, USN*

A look at Project CARE (Comprehensive Aesthetic Restorative Effort)—a multidisciplinary comprehensive command-wide initiative created out of a desire to optimize the appearance and self-esteem of those who have been traumatically injured.

**1450 – 1520** **Break**

**1520 – 1610** **The Critical Role of the Mental Health Technician in Combat and Operational Stress Control**

*Lt. Cmdr. Wayne C. Boucher, MSC, USN*

This panel discussion will consist of one active-duty HM1, a former active-duty HM2 and an active-duty HM2. Topics to be discussed include unique roles and responsibilities of behavioral health technicians in garrison, with combat stress teams and with Operational Stress Control and Readiness (OSCAR) teams, and the processes involved in becoming a competent 8485, as well as the history of the NEC/MOS.

**1610 – 1620** **Speaker Transition**

**1620 – 1710** **The Corpsmen of Tomorrow are Here Today**

*HM3 Michael Pilati, USN*

Pilati, an FMF Psychiatric Technician recently deployed to Afghanistan, will discuss the assistance of the Wounded Warriors center and establishment of the first TBI recovery center in Afghanistan.



# CONFERENCE SCHEDULE

## RESEARCH

### California Room

1300 – 1350

#### Effects of Stress on Urinary Symptoms

*Lt. Cmdr. Jay Choe, MC, USN*

Discussion of the impact of perceived stress and social support on lower urinary tract symptoms (LUTS) among male Marine recruits enrolled in boot camp at Marine Corps Recruit Depot, San Diego; when stress during boot camp is experienced most; and further research into LUTS, its relationship to stress and its occupational implications.

1350 – 1400

#### Speaker Transition

1400 – 1450

#### Military Deployment and Self-Destructive Behavior

*Cynthia J. Thomsen, Ph.D.*

Discussions include deployment effects on risky behavior, implications for combat veterans and future research directions.

1450 – 1520

#### Break

1520 – 1610

#### Panel Discussion: Sleep and Deployment Health

*Gregory Matwiyoff, Cmdr. Robert McLay, MC, USN,*

*Cmdr. Sean Drummond, David Slier, Ph.D., FAAETS, DAAETS*

The panelists will present the findings of post-deployment screenings conducted at Naval Medical Center San Diego, the methods that can be used to assess sleep problems, and the impact of sleep deprivation on function and psychological well-being, as well as pharmacological and non-pharmacological treatments for insomnia and nightmares.

## FAMILY

### Golden West

1300 – 1450

#### Navigating Stress in Difficult Times – “When You Have no Time...”

#### Lessons from the Experts – Other Military Spouses

*Lt. Col. Kathie Hightower (Ret.), USA*

Lessons from stress experts and the real stress experts — other military spouses. From simple and quick to more challenging and long term, you'll walk away with lots of tools to reduce your stress and pump up your energy every day. We'll test run a lot of these during the session today. Join us to learn tools to carry with you throughout your military life.

1450 – 1520

#### Break

1520 – 1610

#### FOCUS World: Staying Connected with Online Resiliency Education

*Devin Price, M.A., LMFT, Lori Serratto, M.S.*

BUMED implementation of FOCUS (Families OverComing Under Stress) discusses the benefits of FOCUS World, a free, online interactive tool for promoting resilience within military families.

1610 – 1620

#### Speaker Transition

1620 – 1710

#### Thriving Not Just Surviving in the Military Lifestyle

*Mollie Gross*

Whether through her comedy, motivational speaking or writings, Mollie Gross hopes to inspire military wives and women of all ages to have a positive outlook on their lives. Her goal is for them to get inspired, to be proud of their service alongside their spouses, to change perspective to the positive, make wise choices, learn to laugh through anything, and find opportunities to thrive. She encourages spouses to make goals for themselves and remember to always have an attitude of gratitude.

# CONFERENCE SCHEDULE



## COMBINED

*Pacific Salon 1&2*

**1300 – 1450** **Combat Operational Stress First Aid (COSFA) 3:  
Post Event and Disaster Assessment**

*Patricia Watson, Capt. Richard J. Westphal, USN (Ret.),  
William Nash, M.D., Brett Litz, M.D.*

This presentation will describe how to conduct a COSFA-based assessment of units following exposure to traumatic events or disasters and implications for cross-service and cross-cultural use.

**1450 – 1520** **Break**

**1520 – 1610** **CogSMART Compensatory Cognitive Training for Veterans with TBI**

*Elizabeth W. Twamley*

The CogSMART strategies will be described and general treatment considerations for providing other treatments to this population will be discussed.

**1610 – 1620** **Speaker Transition**

**1620 – 1710** **Choking Under Pressure: Sensorimotor Strategies for Countering Acute Anxiety During Combat or Operations**

*Cmdr. Barry D. Adams*

This session explores traditional and innovative emerging multi-disciplinary advances impacting cognitive and performance anxiety in the crisis setting using evidence-based sensory-motor techniques to offset such conditions as “choking under pressure” during trauma. Participants will learn and apply evidence-based techniques to sustain both immediate and long-term occupational performance and to bolster intervention team cohesiveness and effectiveness.

*Grand Hall*

**1800 – 2000** **U.S. Paralympics Demonstration and Reception**

All attendees and guests welcome. See page 24 for details.

## Friday Morning, April 29, 2011

### “Meeting the Needs of Wounded Ill and Injured”

This session brings together a national network of military and civilian agencies, clinician experts and academic institutions to discuss “first line” metrics measuring care management and program outcomes. Development of uniform methodologies enhances more effective comparisons and ultimately translates into cost-effective care resulting in recovery and reintegration. This partnership and network of a multi-agency and multidisciplinary consortium supports and facilitates the psychological and physical health needs of military service members and veteran families.

There are a myriad of practical issues associated with the military disability system, continued military service or transitioning back to civilian life. The Department of Defense, the Department of Veteran Affairs (VA) and numerous governmental and private organizations are taking action to address these multiple and often complex problems.

*Golden Ballroom*

**0800 – 0930** *Capt. Sara Kass - Director, Wounded, Ill and Injured, Navy Bureau of Medicine and Surgery (BUMED)*

*Capt. Paul Hammer - Director, Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE)*

**0930 – 1000** **Break**

**1000 – 1200** *Laurie Lindamer, Ph.D. - Assistant Professor of Psychiatry, University of California, San Diego*

*Rear Adm. Colin Chinn - U.S. Navy Director, TRICARE Regional Office - West*

*Capt. Scott Johnston, MSC, USN - Director, NCCOSC*

*Kristen Woodward, LCSW - Director, BUMED FOCUS*

*Robert Mclay, Ph. D., M.D. - Research Director, Naval Medical Center San Diego*

*David Mather, Ph.D. - Psychology Training Director, Naval Medical Center San Diego*

*Lt. Cmdr. Tawanna Hopson - Navy Recruiting Command Operational Stress Control and Suicide Prevention Coordinator*

*Lt. Col. James “Hall” Bain - Commanding Officer, 3d Combat Engineer Battalion*

*Cmdr. William Cantrell, Chaplain Corps, USN, Marine Forces Pacific, Deputy Force Chaplain, Reserve Matters*

*Capt. Scott Johnston, MSC, USN - Director, NCCOSC*



## EVENING EVENTS

**Tuesday, April 26**

*Grand Hall*

**1800 – 2000**

“Brothers at War” – An Evening with Jake Rademacher

All attendees and guests welcome.

**Wednesday, April 27**

*Tiki Pavilion*

**1800 – 2000**

“Meet the Heroes” Social & Awards Ceremony

All attendees and guests welcome.

See page 23 for details.

**Thursday, April 28**

*Grand Hall*

**1800 – 2000**

U.S. Paralympics Sitting Volleyball Demonstration

All attendees and guests welcome.

See page 24 for details.





Please join us for  
**“Meet the Heroes  
Reception and Awards Ceremony”**

featuring Medal of Honor recipients

Time: 1800-2000

Date: April 27

Where: Tiki Pavilion

Please join us on Thursday, April 28  
*for a*  
**U.S. Paralympics  
Sitting Volleyball Demonstration  
and Reception**  
*in the Grand Hall at 1800.*



# EXHIBITOR MAP AND LISTING



Table # Organization

Exhibits	
0	Electromedical Products International
1	Yellow Ribbon Program
2	Wounded Warrior Project
3	Warrior Mind Training (WMT)
4	USAA
5	US Olympic Committee, Paralympic Division
6	TriWest Healthcare Alliance
7	Defense & Veterans Brain Injury Center
8	EEG Institute
9	Fleet & Family Support Center / United Through Reading
10	FOCUS Program
11-14	OPERATION ART - Honoring Our Veterans
15	Freedom Care
16	Healing, Education, & Support: Expression Therapies at SARP
17	The Defense Centers of Excellence for Psychological Health & Traumatic Brain Injury
18	Heroes to Hometowns
19	Human Performance Resource Center
20	National Intrepid Center of Excellence
21	Navy & Coast Guard Wounded Warrior Support
22	Navy Behavioral Health / Suicide Prevention
23	Navy Operational Stress Control
24	Peer Support & Music Therapy: Healing in Harmony
25	Alvarado Parkway Institute Behavioral Health System
26	Provo Canyon School
27	Real Warriors
28	Mental Health Systems - Family Forces
29	HeartMath Exhibit
30	VA San Diego Healthcare System
31	Boundless Images: Photography by Shelly Guberek
32	Center for Military Relationships & Families
33	Chill Drills & Other Guided Imagery Programs to Reduce Operational Stress
34	Chula Vista Vet Center
35	US Marine Corps Combat and Operational Stress Control Program
36	Ergo-D Trauma & Combat Operational Stress
50-59	National Cartoonists Society Posters
37	Anti-inflammatory Approach to Control & Suppression of Post-Traumatic Stress Disorder (PTSD), Combat Operational Stress (COS), Traumatic Brain Injury (TBI) & Depression
38	Operational: Substance Abuse Rehabilitation Program Counselor Analysis
39	Quality of Care: Post-Traumatic Stress Disorder Metrics
40	Assessment & Management of PTSD in Primary Care & Disasters
41	Childhood Adversity & Combat-Related PTSD in OEF/OIF Active-Duty Service
Members & Veterans	
42	Does our VA language matter to our Warriors & families?
43	Empowering Warriors in a Vet Center Mantram Repetition 10-week Group with COSC Laungauge
44	Implementation of CgOSC at Naval Hospital, Camp Lejeune
45	Incidence & Risk Factors of Mental Health Visits in Marine Corps Family



Table # Organization

Members	
46	In-Theater Mental Health Diagnoses Among Combat-Deployed Service Members
47	inTransition: Maintaining Continuity of Care Across Transitions
48	Navy Medicine Wounded, Ill, & Injured Quality of Care Metrics: Traumatic Brain Injury
49	Navy Operational Stress Control Awareness
60	Pilates for Servicemembers with Polytrauma
61	Post-Traumatic Stress Disorder & Suicide Ideation in the USMC & USN, 2008-2010
62	Project CARE (Comprehensive Aesthetic Restorative Effort)
63	PTSD First Encounters in AD USMC by Military Occupational Specialty (MOS)
64	Rapid Detection of Needs: Best Practices for Assessment of Transitioning Veterans
65	Statistical Analysis: Abreaction, Desensitization & Emotional Reframing
66	The Challenges of Evaluated Major Depressive Disorder Care
67	The Role of Gender on Stress Disorders Among Deployed Service Members
68	Work in Progress: Protective Sources of Support Among Active-Duty Marines
69	Challenges in Conducting TBI Surveillance Using Electronic Medical Data

