

# MINDLINES

## *The Power of Support*

### *A Lesson from the Boston Tragedy*

By Eileen Delaney  
 NCCOSC Staff Member

The first explosion stopped me in my tracks. The mix of exhilaration and physical exhaustion from completing the Boston Marathon quickly turned into confusion. *What was that sound? Was it part of the ceremonies? An accident?*

My confusion transformed into fright with the second explosion a moment later, accompanied by a deafening boom and an envelope of smoke that engulfed the street one block from where my friends and I were standing. There was no mistaking that someone was trying to hurt us.

As a research psychologist who specializes in trauma, I am well aware of the typical reactions people have in these kinds of situations. So in a way I became my own individual case example — watching and examining my own reactions.

My immediate response was fear once I realized that bombs were going off on the marathon course. But to my surprise, I had feelings of security and comfort as I turned some of my attention to those around me. I felt my friend's hand holding on to my



sweatshirt, making sure we didn't lose each other. I noticed that other people around us were also keeping track of their loved ones as they looked for safety. I watched the first responders rush by us on foot and in their vehicles toward the center of the destruction.

My observations of support and connection only grew after my friends and I were out of the direct vicinity of the explosions. I cannot express how much it warmed my heart to receive all the messages, texts, phone calls, Facebook posts and thoughts

of concern from family, friends and co-workers. It didn't have to be much — just someone happy to hear I was okay. Throughout this tragedy, I have shed more tears of gratitude than of fear. Although two people intended to hurt us, thousands or even millions wanted to help us. I will take those odds any day.

The stories that have touched me the most are those of the support and compassion expressed among strangers. Spectators provided food, water

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# Properly Stressed and Effectively Challenged

**Y**ou are underway on a submarine or maybe a DDG, and you hear over the 1MC, “Medical emergency! Medical emergency!”

Your heart rate goes up, and there’s uncertainty and a bit of fear of what the crisis is. When you look over your shoulder for support, the only thing you see is a junior corpsman with a scared expression — or a bulkhead.

Such are the challenges of being an independent duty corpsman, commonly known as an IDC. This is the crew member who is trained to operate independently of a medical officer, is directly responsible to a commanding officer and has full decision-making authority for all health-related issues of a command. There is no higher level of medical training a hospital corpsman can receive and still be an enlisted Sailor. Vice Adm. Matthew Nathan, the Navy surgeon general, has

called the specialty “the thoroughbred of Navy medicine.”

Because IDCs operate in demanding and stressful environments, it’s important that IDC students are properly stressed and effectively challenged. The current

out for themselves how to be successful and achieve expectations.”

IDC training is a one-year course of 2,000 hours curriculum, nine months of didactic work and three months of clinical rotations. Students must successfully com-

“We know the students are capable, and we help them figure out for themselves how to be successful and achieve expectations.”

program director for the IDC school in San Diego, HMCM (EXW/FMF) Edgar Santiago, says instructors use positive intrusive leadership to challenge and test the students.

“We employ the Pygmalion theory here,” says Santiago. “We know the students are capable, and we help them figure

plete 47 tests and practical application exams, two technical visits that involve three days of real-world, real-Navy scenarios, and a final evaluation period that includes a stressful week-long simulation of managing a shipboard medical department that is inundated with patients, emergencies and difficult decision-making scenarios.

HMCS (SW/FMF) Joe Espinosa, senior instructor at the San Diego IDC school, says the technical visits and the final evaluation week are classic examples of the building resilience model — repeated, controlled exposure to stress, coupled with positive guidance and leadership that encourages motivation.

“We see the students grow and mature as they progress through the school,” says Espinosa. “They have to because the responsibilities they will inherit in the fleet are incredible.”



Senior Chief Hospital Corpsman John Caole, center, senior lab instructor for the Independent Duty Corpsman (IDC) course at the Surface Warfare Medical Institute (SWMI), in San Diego, demonstrates proper Rapid Plasma Reagen test techniques. Photo by Bruce Cummins.

## Now You Know

NCCOSC is working with the IDC school in San Diego to compare the effectiveness of certain programs to reduce occupational stress-related symptoms.

# A Corpsman Comes to Terms with PTSD

For Navy corpsman Aaron Ramirez and his wife, the lake outing was supposed to be a relaxing getaway. But an experience on the drive there thrust Ramirez back to one of the worst days of his deployment to Iraq.

“There was a lot of construction on the road, and it was hot and dusty and noisy,” he says. “Big rigs were everywhere and when I had to pull up next to one, I just snapped, no kidding, it was a real anxiety attack. I had a feeling of not being in control.”

In the three years Ramirez had been back from deployment, he had recognized signs that he was experiencing stress injuries; but like so many, he tried to ignore the uneasiness and an overall disconnect with his emotions.

Ramirez had joined the Navy Reserves in 2004 at age 30. After completing the non-prior service accession program two years ahead of schedule, he struck for the hospital corpsman rating and 8404 NEC, subsequently joining 1st Battalion 14th Marine Regiment that was deploying to Iraq.

Once in country, the police transition training team he was assigned to began recruiting 700 Iraqi police officers and setting up five police stations in the volatile Al Anbar Province. Ramirez trained and operated as a warfighter with his Marines, participating in more than 150 missions.

The incident on the road to the lake took the corpsman back to July 6, 2006, when his convoy struck an improvised anti-tank mine in the town of Hit. Ramirez and Army medics were treating two critically injured Marines from his unit when a Bradley Fighting Vehicle also struck an improvised mine just yards away. They quickly assessed the Bradley crew, while darting back and forth across a sewage-flooded street to monitor the Marine patients. The injured were successfully evacuated, and Ramirez’s actions earned him a Combat Meritorious Advancement to petty officer second class. The 1/14th named him Regimental Bluejacket Sailor of the Year and Navy Region Southwest named him Bluejacket Sailor of the Year.

When he returned from Iraq, Ramirez started a job with an ambulance company. Most everything seemed to annoy him. “All the little things people complain about, so much whining, it really made me mad the way things are taken for granted.”

Ramirez was reactivated in 2007 to the full-time support program, and he was selected as a student in 2012 to the Surface Warfare Medical Institute (SWMI) at Naval Medical Center San Diego (NMCS D).

Other, outside stressors had piled up — four back-to-back family deaths, a drawn-out legal matter and stressors on family life as a result of the changes. “It finally was so overwhelming that I knew I had to get help,” Ramirez says.

He went to the deployment health center at NMCS D, where he eventually was diagnosed with post-traumatic stress disorder. He quickly chose to go into treatment. “It wasn’t the easiest choice but I knew it was the best choice. I had been taught to lead by example by the chiefs ahead of me and that’s what I wanted to do — be a good example for the juniors I would be charged with



*Navy corpsman Aaron Ramirez speaks with Margie Farnsworth, editor of the MINDLINES newsletter.*

leading, shaping and molding. How good am I going to be as a provider, mentor and leader if I can’t take care of myself?”

NMCS D put Ramirez, now a chief, on limited duty and he immersed himself in proven therapies to relieve PTSD — treatments such as cognitive behavioral therapy, cognitive processing therapy and trauma processing group therapy.

“I’m very open about my treatment,” Ramirez says. “I tell every class that comes into SWMI that we sometimes have to lean on one another in order to succeed. If we need help and don’t get it, we can’t get our job done.

“And I tell them that getting treatment for stress doesn’t ruin your career — being mad at the world and getting into a drunk fight ruins your career. There is no shame in seeking help with PTSD.” 📧

*In July 2013, HMC (FMF) Ramirez was assigned to the Navy Operational Support Center at Naval Air Station Lemoore. He plans to eventually reapply to the Independent Duty Corpsman program at SWMI.*

# Leaning Forward

“World-Class Care...Anytime, Anyplace” — the motto of Navy Medicine — encompasses much more than treating the wounded and sick. Navy Medicine “enables readiness, wellness, and healthcare to Sailors, Marines, their families and all others entrusted to us worldwide, be it on land or at sea.”

Extended deployments, less manpower and dwindling funds have thrust “readiness” to the forefront of leaders’ concerns. Readiness is the result of multiple factors — not the least of which is psychological health, said Vice Adm. Matthew Nathan, Navy Surgeon General.

On a recent visit to NCCOSC, the admiral explained how Navy Medicine is “leaning forward” in the area of psychological and emotional health to ensure readiness.

“We know that people bend, and we want to get to them before they break,” said Nathan, adding that unlike physical injuries, the cases of bending can be difficult to identify. “Raise your hand when you need help — it will be there,” he said. “We tell our Sailors ‘ship, shipmate and self’ — take care of others and take care of yourself.”

The surgeon general noted that identifi-

cation of psychological health issues is still hindered by a lingering stigma associated with mental health. “People often falsely assume that any emotional disturbance or mental-health issue is a sign of weakness within themselves. In reality, it’s the opposite — it’s a sign of being human.

“It’s a sign of the body’s and mind’s response to everyday stresses, and these issues can happen to anyone, regardless of rank, training or experience.”

Nathan does see positive signs that stigma is slowly, but surely, receding.



Vice Admiral Matthew L. Nathan, Surgeon General of the Navy, Chief of the Navy Bureau of Medicine and Surgery

## The Power of Support

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and warm clothes to runners who were stopped on the course. One runner gave his medal to another runner who was not able to reach the renowned finish line.

These stories have taught me an important lesson: The support that can help people through tragedy does not only have to come from first responders, family and friends. Simple acts of compassion and support can do a world of good, even if it is for someone you have never before met.

I believe all of compassion shown by and

to the people of Boston allowed the city to come out of this ordeal even stronger. As President Obama said, “this time next year...the world will return to this great American city to run harder than ever, and to cheer even louder, for the 118th Boston Marathon.” And, I plan to be there with the other runners and spectators to help make the next Boston Marathon the most memorable one yet. 🇺🇸

*Eileen Delaney, Ph.D, is with the NCCOSC Research Facilitation Department. She was one of only 125 San Diegans who participated in this year’s Boston Marathon.*

“There are a lot of people raising their hand for help these days,” he said. “I’m so proud of some of our most successful Sailors, who have come out and asked for help. It sends a great message to everyone around them.”

Psychological health initiatives like Operational Stress Control awareness training and NCCOSC’s Psychological Health Pathways (PHP) signal the Navy’s determination to improve the psychological health and, thus, the readiness of the force.

“Every Sailor and Marine should know: You’re a part of an organization that wants to help,” said Nathan. “All you have to do is ask.” 🇺🇸

**On the Cover:** Chief Warrant Officer 2 James Law walks across a bridge in Nawa, Helmand province, Afghanistan. Official Marine Corps photo by Sgt. Mark Fayloga.

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