Leader Effectiveness in the Implementation of CISM

By Captain Nate Brookshire

This article describes a Military Police Corps study designed to analyze the use and effectiveness of critical-incident stress management (CISM). The question remains: “Can we reduce the occurrences of suicide through effective CISM programs?” On 4 September 2006, I received a call from a close friend who was the executive officer for a military police unit at Fort Campbell, Kentucky. He called to inform me that one of the Soldiers from my former platoon had shot and killed himself. At the time of the call, my friend was on his way to the Soldier’s apartment to learn more details. But the most important detail of all was never uncovered: The Soldier’s command, family, and friends still do not know why this outstanding individual chose to take his own life. What they do know is that he completed two strenuous deployments and that he had a strong bond with his fellow platoon members. As individuals within the organization moved on, the Soldier remained with an ever-decreasing number of those whom he considered to be family.

Current research indicates that the use of a methodical process involving selected, trained peer supporters can have a positive effect on the ability to prevent or appropriately react to critical-incident stress. There are multitudes of emergency service organization programs designed to help emergency professionals handle critical-incident stress. Since the 1980s, civilian emergency service and federal disaster agencies have commonly used critical-incident stress debriefings as a tool for conducting psychological first aid. The U.S. Army Military Police School currently uses the Critical-Incident Peer Support (CIPS) Program to train leaders in the CISM process. However, there are indications that improvements to CISM programs are necessary. Primary research indicates that emergency service organizations need a standardized CISM program that focuses on resiliency, leader effectiveness, and education. A multicomponent management approach and the establishment of long-term studies should enhance leadership capabilities to care for emergency service responders.

Emergency service organizations face numerous critical incidents that directly impact the long-term effectiveness of individuals and organizations. Natural disasters, terrorist attacks, mass shootings, and U.S. involvement in long-term conflicts have heightened the focus on CISM. In the early 1980s, Jeffrey T. Mitchell designed a CISM program consisting of a “‘package’ of crisis intervention tactics that are strategically woven together to (1) mitigate the impact of a traumatic event, (2) facilitate normal recovery processes in normal people who are having normal reactions to traumatic events, (3) restore individuals, groups, and organizations to adaptive function, and . . . (4) identify people within an organization or a community who would benefit from additional support services or a referral for further evaluation and, possibly, psychological treatment.” This program is now under attack due to a lack of longitudinal studies regarding its effectiveness. Bryan E. Bledsoe posits that the “Mitchell Model” may even cause negative results.

A February 2010 study conducted by Webster University, St. Louis, Missouri, focused specifically on Military Police Corps leaders who are responsible for managing stress reduction programs within their organizations. However, the Military Police Corps is unique in that military police serve in a dual capacity—as law enforcement officers and as Soldiers. Commonly referred to as the warrior police, these Soldiers provide police expertise to the combat commander in garrison and deployed environments. Although the military police population is valuable to critical-incident stress studies, the results obtained cannot be used to effectively draw conclusions for emergency service responders as a whole.

The Webster University study included an online survey designed to identify the current application and
effectiveness of CISM programs within the Military Police Corps. Questionnaires were e-mailed to 1,751 military police leaders in the ranks of chief warrant officer two through chief warrant officer five and captain through colonel; 179 of these questionnaires were completed and returned, for a response rate of 9.78 percent.

The findings indicated that 58.1 percent of the respondents had received CISM training during the previous twelve months. In general, those respondents felt that the instructors were passionate about the subject matter and that the CISM training was somewhat effective; however, they also felt that the programs and training methodology were inconsistently applied throughout the organization and that CISM training should be standardized.

Several of the respondents indicated that the U.S. Army lecture or online approach to the implementation of stress reduction programs is ineffective and that access to CISM training and resources is limited and poorly defined. Only 24.4 percent of the respondents agreed that the current method of CISM training is effective.

While most respondents (68.2 percent) indicated that their leaders support CISM, some were not aware of any CISM programs at all, and others felt that their leaders expected them to be “hardened” to events. Overall, survey participants rated the understanding of CISM in their organizations as moderate (43.9 percent). They noted that most of the programs available in their organizations are inspected and validated by their leaders. Respondents indicated that mandated programs (such as Suicide Awareness, Battlemind, and Prevention of Sexual Assault) are well defined, but that specific peer support programs and methods for managing critical-incident stress are not. One respondent commented that his organization requires CISM training without fully defining what CISM is and that leaders, therefore, do not resource the program—or even check to see if it has been implemented. Numerous other respondents indicated that their organizations took CISM issues into consideration only after a critical incident had already occurred, leaving them with limited resources and capabilities to benefit from the program. The following survey excerpts illustrate specific concerns about leadership support for the staffing of CISM programs within emergency service organizations:

- “We fail to show empathy toward those who truly need the time and attention to discuss problems, issues, and concerns.”
- “My employer required several paramedics who had witnessed the violent death of a child to attend a critical-incident stress program, and it resulted in more hostility than it reduced stress.”
- “Not once have I, or any of the agents I know of, had any sort of support program offered to us. It seems to me that our chain of command thinks we are all just ‘hardened’ to such incidents and [that] we have learned to deal with the stress on our own. We are expected to report to duty the next day and drive on like nothing has ever happened.”

Overall, the survey revealed that 64.4 percent of the respondents agreed that CISM is beneficial. The results suggest that leaders who take the time to learn about their subordinates, conduct realistic training, and follow up with counseling are successful in reducing the negative impact of critical-incident stress. Many of the essay responses revealed great concern for the impact of critical-incident stress on emergency service personnel. Respondents agreed (at a rate of 43.3 percent) that CISM programs reduced the effects of a traumatic experience (with another 43.3 percent neither agreeing nor disagreeing with that assessment). The high rate of indifference could be attributed to the inability of respondents to address the effectiveness of the programs due to a lack of tracking and follow-up care for those who have experienced critical-incident stress.

Many of the respondents (55.7 percent) knew someone who had committed suicide, and most (60.8 percent) agreed that enhanced stress-management programs would reduce the suicide rate.

The free-text portion of the survey contained numerous positive comments regarding the CIPS Program, which could serve as a model of CISM standardization in organizations that routinely react to critical incidents.

The respondents also expressed some overall concern about the effective implementation of CISM programs. It appears that organizations—many of which are overwhelmed—are merely “checking the box” when it comes to fulfilling training requirements. However, more than half of the survey respondents (54.4 percent) agreed that the lack of a peer support program would negatively impact the ability of their units to accomplish their missions. Furthermore, 57.7 percent of the respondents believed that, if improperly implemented, CISM programs could have a negative impact on their organizations. Based on the results of the study, the following actions are recommended:

- Mandate a uniform CIPS training program led by experienced peer supporters.
- Increase military police leaders’ participation in the program.
- Increase CIPS funding and contract former military police and special agents to assist units in peer support training.
- Avoid “check the box” training methodology.
- Validate the program through surveys and follow-ups.
- Consider establishing one CIPS administrator for each installation or region.
As a result of his experience in behavioral medicine and his time as a noncommissioned officer in the Special Forces, Major Thomas Jarrett (a mental-health provider who served in Baghdad, Iraq) developed Warrior Resilience Training. He describes the program as a stopgap measure between mandatory training, such as Suicide Awareness and Battlemind, and traditional combat stress programs. Warrior Resilience Training focuses on Soldiers’ values, the Warrior Ethos, and stoic philosophy. Jarrett’s methods are comparable to Mitchell’s peer support methodology, in that they promote caring and compassionate leaders who are trained to identify the adverse effects of critical-incident stress in individuals and organizations. Jarrett, who works closely with existing Army programs, uses the training to prepare medics for the battlefield. According to a brief survey conducted after the completion of a class, Soldiers and their leaders felt that positive results were gained from the voluntary training.

In conclusion, the current CIPS Program meets the basic tenets of CISM methodology and could be used to further the attempts of the Military Police Corps—and the Army in general—to reduce suicide rates within our ranks. However, the Webster University survey of Military Police Corps leadership indicates a need for more effective CISM. Leaders at all levels could surely benefit from additional instruction in developing effective peer support programs related to CISM.

Endnotes:


5Mitchell, “Critical Incident Stress Management.”


References:


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The 558th Military Police Company—which was deployed in Iraq at that time—also conducted a torch run and raised money from their forward operating base at Al Asad. However, due to mission requirements, their run took place a week after the one in Hawaii. Most of the Soldiers of the 558th had participated in the run the previous year, and they remembered the cheers and applause of the crowd and the appreciation of the Special Olympics athletes. Therefore, they were quick to donate and participate this year. At 0530 one morning, with temperatures already hovering above 90°F, more than 150 Soldiers from the 558th Military Police Company took to the streets of Al Asad in the name of Special Olympics Hawaii. Though missing the torch, island breezes, and cheering crowds, the Soldiers felt as if they still made a significant contribution to the organization. And they were right—for the second year in a row, the 558th was the top 728th Military Police Battalion and 8th Military Police Brigade contributor, raising more than $3,750 from downrange.

At the time these articles were written, Sergeant Cox, who is a signal systems support specialist, was the team chief; command, control, communications, and computer operations (S-6); 728th Military Police Battalion. She is currently the alternate telecommunications officer, 82d Airborne Division, Fort Bragg, North Carolina. Sergeant Cox is working toward an associate's degree in general studies from North Central Institute, Clarksville, Tennessee.


Captain Brookshire is the adjutant for the 4th Battlefield Coordination Detachment, Shaw Air Force Base, South Carolina. He holds a bachelor's degree in psychology from the University of Maryland and a master's degree in business and organizational security from Webster University.

First Sergeant Derasmo has served as a military policeman for most of his 20 years of service, which has spanned across all three components of the Army—Regular, Reserve, and National Guard. He has also participated in numerous overseas and domestic missions (including Operation Desert Shield/Desert Storm, Operation Iraqi Freedom, and Hurricane Katrina relief operations) and has served in virtually every military police company enlisted position.

At the conclusion of the ceremony, Lawler and Derasmo joined Sergeant Major Carragher as the only three active Connecticut Army National Guard recipients of the Order of the Marechaussee.

Endnote:


First Sergeant Derasmo is the mobilization operations noncommissioned officer, Connecticut Premobilization Training and Assistance Element, Joint Forces Headquarters–Connecticut, Hartford, Connecticut.

Sergeant Kemp is assigned to the 1st Infantry Division, U.S. Division–South Public Affairs Office.