# HOW TO DEAL WITH COMBAT STRESS REACTIONS

## MILD STRESS REACTIONS

<table>
<thead>
<tr>
<th><strong>PHYSICAL SIGNS</strong>*</th>
<th><strong>EMOTIONAL SIGNS</strong>*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Trembling, Tearful</td>
<td>1. Anxiety, Indecisiveness</td>
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<td>2. Jumpiness, Nervousness</td>
<td>2. Irritable, Complaining</td>
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<td>3. Cold Sweat, Dry Mouth</td>
<td>3. Forgetful, Unable to Concentrate</td>
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<td>4. Pounding Heart, Dizziness</td>
<td>4. Easily Startled by Noise, Movement</td>
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<td>5. Insomnia, Nightmares</td>
<td>5. Grief, Tearful</td>
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<tr>
<td>6. Nausea, Vomiting, Diarrhea</td>
<td>6. Anger, Beginning to Lose Confidence in Self and Unit</td>
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<td>7. Fatigue</td>
<td>8. Thousand-Yard Stare</td>
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* Most or all of these signs are present in mild stress reaction. They can be present in any normal service member in combat yet he can still do his job.

## SELF- AND BUDDY AID

1. Continue mission performance, focus on immediate mission.
2. Expect service member to perform assigned duties.
3. Remain calm at all times; be directive and in control.
4. Let service member know his reaction is normal, and that there is nothing seriously wrong with him.
5. Keep service member informed of the situation, objectives, expectations, and support. Control Rumors.
6. Build service member’s confidence, talk about succeeding.
7. Keep service member productive (when not resting) through activities, equipment maintenance.
8. Ensure service member maintains good personal hygiene.
9. Ensure service member eats, drinks, and sleeps as soon as possible.
10. Let service member talk about his feelings. Do not “put down” his feelings of grief or worry. Give practical advice and put emotions into perspective.

## MORE SERIOUS STRESS REACTIONS

<table>
<thead>
<tr>
<th><strong>PHYSICAL SIGNS</strong>*</th>
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<tr>
<td>1. Constantly Moves Around</td>
<td>1. Rapid and/or Inappropriate Talking</td>
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<td>2. Flinching or Ducking at Sudden Sounds</td>
<td>2. Argumentative, Reckless Movements/Actions</td>
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<tr>
<td>3. Shaking, Trembling (whole body or arms)</td>
<td>3. Inattentive to Personal Hygiene</td>
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<tr>
<td>4. Cannot Use Part of Body, No Physical Reason (hand, arm, legs)</td>
<td>4. Indifferent to Danger</td>
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<td>5. Cannot See, Hear, or Feel (partial or complete loss)</td>
<td>5. Memory Loss</td>
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<td>6. Physical Exhaustion, Crying</td>
<td>6. Severe Stuttering, Mumbling, or Cannot Speak At All</td>
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<tr>
<td>7. Freezing Under Fire, or Total Immobility</td>
<td>7. Insomnia, Nightmares</td>
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<tr>
<td>8. Vacant Stares, Staggers, Sways when Stands</td>
<td>8. Seeing or Hearing Things That Do Not Exist</td>
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<td>10.</td>
<td>10. Social Withdrawal</td>
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<td>11.</td>
<td>11. Apathetic</td>
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<td>12.</td>
<td>12. Hysterical Outbursts</td>
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<td>13.</td>
<td>13. Frantic or Strange Behavior</td>
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## TREATMENT PROCEDURES**

1. If a service member’s behavior endangers the mission, self, or others, do whatever is necessary to control him.
2. If the service member is upset, calmly talk him into cooperating.
3. If concerned about the service member’s reliability:
   - Unload his weapon
   - Take weapon is seriously concerned
   - Physically restrain him only when necessary for safety or transportation.
4. Reassure everyone that the signs are probably just stress reaction and will quickly improve.
5. If stress reaction signs continue:
   - Get the service member to a safer place
   - Do not leave the service member alone, keep someone he knows with him.
   - Notify senior noncommissioned officer or officer.
   - Have the service member examined by medical personnel
6. Give the service member easy tasks to do when not sleeping, eating, or resting.
7. Assure the service member he will return to full duty in 24 hours; return him to normal duties as soon as he is ready.

* These signs are present in addition to the signs of mild stress reaction.
** Do these procedures in addition to the self and buddy aid care.