1. **Equip All Service Members with Mental Armor** –
   a. *Pre-deployment cognitive training dramatically increases resiliency while reducing suicides, drug & alcohol abuse and attrition.*
   b. *Returning Warrior training will make our soldiers much more resilient from the setbacks in re-adjustment to civilian life*

   Scientific research shows that the primary difference between those who rebound quickly on the heels of a traumatic or stressful experience and those who deteriorate is their “individual explanatory style.” Individual explanatory Style (**pessimism**: it’s going to last forever and its going to undermine everything I do vs **optimism**: it’s temporary, it’s changeable, and it’s just this one darn thing)) is a key predicator of depression not unlike smoking is a key predicator of cancer. Pessimistic explanatory style is accurately measured by simple testing and permanently changed with simple training.

   When an individual’s explanatory style falls on the moderately optimistic to optimistic side of the measurement we know they are more likely to be resilient. When their explanatory style falls on the moderately pessimistic to pessimistic side of the measurement we know they are more vulnerable to deterioration. If in addition to being pessimistic, an individual has a tendency to ruminate over trauma, we know they will more than likely experience deterioration in the face of a traumatic experience.

   Research conclusively and repeatedly demonstrates that an individual’s explanatory style can be changed from pessimistic to optimistic and that the change is permanent.

   The research also tells us that pessimism has value in many circumstances, especially in combat. Knowing this to be important, this training will not “remove” pessimism. Rather, it develops “flexible” optimism that causes pessimism to support increased resiliency instead of leading to deterioration.

   Knowing that we now have the ability to equip our Warriors in advance, we believe it is our responsibility to “immunize” every service member prior to increasing their exposure to trauma so that they will more likely be a rebounder instead of a PTSD patient. This cornerstone for resiliency should be set in the hearts and minds of all service-members as a part of Officer and Basic training.

   Not only does this have significant short term and long term health implications (i.e. *cost of care, suicides, drug & alcohol abuse, emotional impact on families and communities and draining of social services*) it will also increase service member retention by reducing attrition related to stress. In essence we should consider including this resiliency training as “standard issue” in basic training. You get your uniform, your weapon, your MOS and your resiliency.

   The result would be fewer dropouts in basic training and more career minded service members.

2. **Change The Story about Stress and Trauma** - *Language is generative in nature. Let’s present the overwhelming positive evidence about growth as a result of stress and trauma.*

   Even though the data suggest that PTG, not PTSD, is the most common result of trauma, PTG is not a part of our medical or social vocabulary; but worse it is not a part of our warriors’ thinking. And because of the self-fulfilling nature of only having a PTSD vocabulary, our warriors are becoming iatrogenic (adjecive used to describe a symptom or illness brought on unintentionally by something that a doctor does or says.) psychological casualties. They, and our leaders, should know that the most common sequel of combat is likely growth, not deterioration. And that those Soldiers who are in good psychological shape to begin with (e.g., optimistic) are the ones likely to grow, and those in bad shape before combat (e.g., pessimistic) are the ones most likely to emerge "wounded."

3. **Collaborate With Dr Carmona, his Staff and Colleagues.** – 17th Surgeon General of the United States (2002-2006) and current President of the Canyon Ranch Institute, which catalyzes the possibility of optimal health of all people by translating the best practices of Canyon Ranch to our partners to help educate, inspire and empower every person to prevent disease and embrace a life of wellness in America.

   Over 30 years of scientific research and personal experience demonstrate the lasting effectiveness of Dr Carmona’s approach towards health literacy and preparing people to rebound well from Stress and Trauma. He is offering himself, his research and his team in support of this mission for the office of the CJCS in the following ways:

   1. He is available to be filmed for the video’s supporting the Chairman.
2. He is available to support the Chairman with strategic thoughts about Stress and Trauma and Health Literacy.

3. He is willing to connect with Dr Seligman, (Former President of the American Psychological Association, and is the world’s leading expert on the subject of Positive Psychology) to discuss possibilities supporting the Chairman.

4. Canyon Ranch Institute which he directs is available to discuss possibilities:
   - Of becoming strategic partners with the military to promote health literacy around the subject of PTS and TBI at a national level through PSA’s. Connecting him with people like Fred Wilpon, owner of the NY Mets and Founder of Welcome Home Veterans.
   - Of supporting the effort of equipping service members for pre and post deployment resiliency.
   - Of staffing and overseeing the project.