

STARS AND STRIPES

Health and Fitness Guide

SPECIAL SYMPOSIUM EDITION



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LIVE WHOLE HEALTH: TIPS FOR A HEALTHIER WORKDAY

By Dennis B. Cohen Jr.,
Veterans Health Administration

FIND YOUR FOCUS, FUEL YOUR DAY:

Ways to feel better at work

Civilian work life can feel worlds away from military structure, but the same skills that got you through long days in uniform can help you thrive at your job now. Whether you're a veteran, spouse, or caregiver, your resilience and sense of purpose are already powerful wellness tools. These five simple habits will help you stay energized, reduce stress and bring more calm to your workday.

Start strong:

Create a morning mission

Why it matters

In the military, mornings set the tone for the rest of the day. That doesn't change in civilian life. A purposeful start helps you shift from "just surviving the week" to actively leading it. A well-planned morning routine grounds you before emails, meetings and deadlines start flying.

Why it works

When you plan specific actions in advance ("At 7:00 a.m., I'll stretch for five minutes"), your brain is more likely to follow through. It reduces decision fatigue, builds momentum and improves focus throughout the workday.

Pro Tip

Before logging in or heading out, write a quick mission brief of three things you want to accomplish. Keep it where you'll see it, like on your desk or in your phone

notes. Treat it like a mini op order: clear, direct and motivational.

Move often:

Micro-breaks for mind and body

Why it matters

Sitting for hours can crush your energy and tighten muscles you didn't even know you had. Short bursts of movement can keep your body flexible and your mind clear.

Why it works

Just two minutes of movement every half hour improves circulation and boosts your mood. Physical activity signals your body to lower stress hormones, helping combat fatigue and improve concentration.

Try this

Each time you finish a task, do a mini reset drill. If able, stand up and roll your shoulders, walk in place, or take a lap around the office. If you're remote, do a few squats or wall push-ups next to your desk.

Refuel right:

Eat and hydrate with intention

Why it matters

Old habits like skipping lunch or running on caffeine might get you through the short term, but they'll drain your long-term endurance. Consistent, balanced nutrition keeps both mission readiness and mental sharpness high, especially during long or high-stress workdays.

Why it works

Foods rich in complex carbs, lean proteins and omega-3s (like tuna, quinoa and leafy greens) stabilize blood sugar and improve cognitive function. Hydration also supports focus and reduces headaches that can slow you down mid-afternoon.

Pro tip

Set a water reminder on your phone or use a marked water bottle to track intake. For meals, use the field-plate rule: one-third lean protein, one-third whole grains, one-third colorful veggies. It's simple, sustainable and doesn't require counting calories.



Connect and decompress: Build micro-moments of camaraderie

Why it matters

One of the toughest adjustments after service is losing that sense of team connection. In civilian workplaces, loneliness and burnout rise when people don't take time to connect. Creating small, genuine interactions during the day supports wellness and a sense of belonging.

Why it works

Healthy social connection helps lower stress and blood pressure. Even a quick chat or shared laugh can boost morale.

Picture this

Next time you grab coffee or hop on a video call, take a second to check in with someone. Not just about work, but life. These small moments recreate the camaraderie you remember from your unit, reminding you that you're part of a new kind of team now.

Reset your mind:

Take a 5-minute mindfulness break

Why it matters

When stress piles up, your brain can slip into "high alert" without you realizing

it. Mindfulness helps you shift gears, slowing racing thoughts, lowering your heart rate and giving your nervous system room to breathe.

Why it works

Practicing mindfulness activates your body's natural "rest and recover" mode. Veterans often find it especially effective because it mirrors controlled breathing and awareness exercises from training, but in a calmer, therapeutic form.

YOUR NEXT MISSION:

Try one now

Real change starts with small, steady actions. Choose one habit: Move more, plan your mornings, drink some water or take a quick mental break and build from there. You've done harder things; this is about taking care of yourself while you get the job done.

You don't have to figure out wellness on your own. VA's Whole Health Experience is designed to help veterans like you take charge of your physical, mental and emotional wellbeing, on your terms. It's not just about treatment; it's about discovering what matters most to you and building a plan around it. Learn how other veterans are finding focus, balance and community through Whole Health at VA.gov/wholehealth.



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NOT FIGHTING ALONE: A VETERAN'S JOURNEY WITH VA'S TELEPAIN PROGRAM

By Kimberly A. Kalista, VISN 4 Public Affairs/
Outreach Program Manager

“TelePain led me from silently struggling to shared healing.”

For years after leaving the service, Marine Corps Veteran William Anthony Zullo's body had become a ledger of old battles — more than 20 surgeries, chronic pain in almost every joint and migraines so fierce they could drop him where he stood. On damp, gray mornings in his Philadelphia neighborhood, even the simplest tasks became obstacles that required the same grit he once used while on deployment.

Most nights when the pain peaked and the migraines pulsed behind his eyes, Zullo slipped quietly from the bedroom and into the dim light of the living room, where he waited for dawn and tried to outlast the darkness. Those hours were the loneliest, when his Marine mentality — push through it, get it done, no complaining — felt less like strength and more like constraints.

Finally, Zullo turned to VA and his Veterans Integrated Service Network (VISN) 4 TelePain Program to help manage his pain.

The power of a first impression

The TelePain program changed the way

he felt on the very first day. A room full of professionals spoke to him online as if his pain mattered. The doctors and nurses talked about what it meant to hurt at two in the morning, to pace the house while everyone else slept and to navigate the day on a few hours of rest. He began to realize he was no longer fighting this war alone, and week by week, the distance between those long nights and the daylight shrank.

Nick Vlasic, a physical therapist and fellow Marine, gave him a simple exercise plan and a challenge: Don't ignore the pain, but work with your body instead of against it. Each week Vlasic added another small tool to his plan — breathing techniques, pacing strategies, and ways to recognize when a bad day was coming and how to soften the impact. The staff showed him equipment, devices and support that made movement possible again. As he put their advice into practice, his old “balls to the wall” mindset evolved into a new kind of toughness: patience, consistency and self-respect.

From sleepless nights to second chances

On the final day of the program, Zullo listened to the stories of injury, fear and survival from his fellow veterans. What struck



him most was how hard the TelePain team worked to reach each person, whether they had seen combat or not, regardless of rank or background. He realized that the greatest gift he had received was not just less pain, but that others like him could find the same hope. He now wishes the TelePain program grows and that more veterans will find their way into this virtual program.

A road to renewal

As Zullo's 70th birthday approached, the man who once measured his life in sleepless nights began to count walks completed, exercises finished and mornings that started with something other than dread. Mentioning VA's TelePain program at the hospital seemed to open doors that had once been closed or endlessly delayed; appointments came faster, procedures were scheduled and he felt, for the first time in years, like an honored veteran rather than a forgotten file. He told the TelePain leaders, “Thank you for having changed my life!” Zullo especially credited Dr. Elizabeth Eckardt, and physical therapist Vlasic for speaking in a language veterans

understood and breaking down complex ideas into something real and usable.

Collaborative care for chronic pain management

The Transdisciplinary TelePain Program (TDTP) in VISN 4 is an 8-week, virtual pain-management course that meets for two hours each week. Co-facilitated by Behavioral Health and Physical Therapy — with support from Pharmacy, Dietary and Whole Health — the program offers a holistic, team-based approach to chronic pain. It teaches veterans how to move responsibly and take an active role in their lives despite persistent pain, emphasizing self-management, functional improvement and overall well-being. After graduation, veterans receive long-term follow-up to help sustain progress, maximize function and enhance quality of life.

To learn more, call 855-679-0952 and select option 2 to let the nurse know you would like more information

about the VISN 4 Clinical Resource Hub (CRH) TelePain Program. The CRH is a national VA initiative that delivers high-quality virtual care to veterans in rural and underserved areas.



Building Warfighter Resilience Through Music

By Dr. Judy Staveley

Research shows that music is neurochemistry in action. Listening to music can trigger the release of “feel-good” neurotransmitters such as dopamine while simultaneously reducing levels of the stress hormone cortisol. This dual effect positions music as a powerful, accessible tool for regulating mood, enhancing resilience, and supporting mental well-being in high-stress environments.

For service members operating under sustained physical and psychological demands, the ability to regulate stress and maintain cognitive clarity is essential. Music offers a biologically grounded pathway to support both. It engages multiple regions of the brain simultaneously, including the neocortex, which is responsible for higher-order thinking and emotional regulation. This engagement helps calm the mind, reduce impulsivity, and improve focus. At the same time, music activates the brain's reward system, reinforcing positive emotional states and supporting adaptive processing of stress.

From a neurobiological perspective, this is particularly significant. The same neural pathways activated during stress and threat response can be modulated through structured auditory input. In operational environments where stress is constant and recovery time may be limited, tools that support regulation without requiring additional resources are especially valuable. Music provides a way to influence both physiological and cognitive performance, supporting endurance, clarity, and decision-making under pressure.

Music also plays a meaningful role in brain connectivity. Active engagement, whether through listening, playing an instrument, or participating in structured music therapy, has been shown to support the rebuilding and strengthening of neural pathways. This has been observed in rehabilitation settings, including recovery from traumatic brain injury and post-traumatic stress.



For the warfighter, this translates into a practical approach to maintaining mental resilience and supporting recovery between operational demands.

Stress is not solely a psychological experience. It is a physiological response that affects the nervous system, endocrine function, and immune balance. Chronic activation of this stress response can lead to fatigue, impaired judgment, and decreased performance. Music offers a mechanism to interrupt this cycle. By influencing neurochemical release and neural activity, it helps shift the body from a heightened stress state toward a more regulated condition. Over time, intentional use of music can strengthen these regulatory pathways, improving resilience to future stressors.

Beyond individual regulation, music plays a critical role in connection. Shared musical experiences can strengthen social bonds, improve morale, and reinforce a sense of belonging. Participation in ensembles or informal group settings has been associated with increased self-esteem and empathy. Even attending live events can produce measurable effects, including synchronization of brain activity among individuals in the same

environment, deepening the sense of shared experience. In a profession where cohesion and trust are essential, these connections are not simply cultural, they are operationally relevant.

Music is also one of the most accessible tools available to support mental well-being. It can be integrated into daily routines without disrupting mission requirements. During physical training, music can enhance endurance and focus by supporting rhythm and pacing. During recovery periods, slower tempos can promote relaxation, reduce heart rate, and support restoration. Before high-demand tasks, music can be used strategically to regulate arousal, either increasing alertness or reducing anxiety depending on the need.

Active engagement with music can further enhance these benefits. Learning an instrument or participating in group settings provides cognitive stimulation and a structured outlet for stress. Importantly, the effectiveness of music is individualized. Service members should identify what supports their focus, recovery, and emotional regulation. The goal is not complexity, but consistency.

Mental readiness is as critical to mission success as physical capability. In high-stress environments, the ability to regulate emotions, maintain focus, and recover effectively can determine outcomes. Music provides a scientifically grounded, practical tool to support these capabilities. By influencing neurochemistry, enhancing brain function, and strengthening neural connectivity, it offers a pathway to improved resilience and long-term well-being.

For the warfighter, music is more than entertainment. It is a resource. When used intentionally, it can support performance, strengthen connections, and contribute to sustained readiness in even the most demanding environments.

REDUCING TOBACCO AND NICOTINE USE KEY TO 'HAVING A HEALTHY FORCE'

By Janet A. Aker, Military Health System

Tobacco use remains the number one preventable cause of death in the U.S., according to the Centers for Disease Control and Prevention, and poses a readiness issue for the military.

The Military Health System (MHS) is concerned that about one-third of service members still use tobacco and nicotine products — a rate higher than the general population (19%), said Department of War Principal Deputy Assistant Secretary of War for Health Affairs Dr. Stephen Ferrara, citing statistics from department-wide health behavior surveys.

Ferrara spoke on this topic at the National Press Club on the dangers of tobacco use in the military and how the MHS is addressing the issue at an event in March 2026 titled, "Serving Those Who Serve, Embracing Tobacco Harm Reduction."

Acutely aware of the impacts on readiness, the MHS has long focused on reducing tobacco and nicotine use through a comprehensive approach involving medical, behavioral, and cultural interventions, said Ferrara.

In 2026, that commitment is deeper than ever with the DOW's emphasis on a healthy force.

"Prevention is in our DNA," he said. "The way we succeed on the battlefield, of which we're in active operations as we speak, is by having a healthy, fit force."

As a vascular and interventional radiologist with multiple tours of duty in the U.S. Navy for 25 years, Ferrara is keenly aware that tobacco and nicotine dependence have long been embedded "in the culture" of the military, which offered behavioral off-ramps to smoking.

Ferrara said, "old myths" that tobacco "increases your alertness" have been debunked. "We know now it actually leads to slower wound healing, slower injury healing ... especially the cardiovascular system," he said.

Stressors associated with military service and cultural dependencies mean "people use different things, whether it's food, whether it's cigarettes, whether it's other habits ... as a crutch or as an aid to help them deal with that stress that we asked them to endure."

The MHS emphasizes a comprehensive approach to help people quit, which includes prevention methods, stop-smoking aids, and behavioral therapies.

Stepping down from tobacco

The MHS provides intermediate, less harmful steps to help service members and veterans put cigarettes down. "We're looking at nicotine replacement or other things that will satisfy or try to give people a bridge so they cannot get the most toxic tobacco experience as a way to eventually get to full cessation," said Ferrara.

Mitigating "the most harmful behaviors and with a path" away from nicotine and tobacco dependence requires team support, he said. "That's where partnerships come in with the medical community ... your friends or your family or your command structure to continue to work that journey from the most harmful behavior to ideally, to not harmful behavior, with all the intermediate way points."

Ferrara said the first line of defense against tobacco can be providers, who raise the issue during the annual Periodic Health Assessment (PHA) or other medical visits. The PHA specifically asks about tobacco or nicotine product use.

"If the answer is yes, we start to talk about how we can do cessation," Ferrara explained. The MHS has abundant



"pharmacologic, mental health therapies, all those things to help people, including other adjunctive therapies, to try to get people to get away from cigarettes."

MHS works 'hand in glove' with the Department of Veterans Affairs

One important effort was the publication in January 2026 of the DOW and the Department of Veterans Affairs joint clinical practice guideline (CPG) called "Tobacco Use Treatment."

The CPG describes the critical decision points in tobacco use treatment and presents comprehensive evidence-based recommendations for providers and patients to reduce and then stop the use of tobacco and nicotine. Ferrara emphasized the CPG demonstrates both departments' commitment to tobacco cessation and continuity in care in transition and afterward.

"Because every veteran was once in uniform, the continuity of care must be instantaneous," he emphasized. "We'll get you taken care of, and then we need to pass the baton to the VA, and that's why we have that joint clinical practice guideline," Ferrara explained. "You can see that we are hand in glove with that, and that's as it should be for the folks who serve their country."

Behavior changes and telehealth

Ferrara highlighted how the military has "really leaned into technology," including telehealth or virtual appointments for tobacco and nicotine cessation. These tools "support meeting service members where they are in their tobacco-reduction journey, and wherever they are stationed or deployed worldwide," he said. "It's an exciting time to be in medicine with what's going on in AI (artificial intelligence) and we're being able to leverage those things, not only for diagnostics but also for therapeutics."

Because most service members are young, "there's a huge appetite for" AI and telehealth, he said. "Most of our service members ... grew up very comfortable with technology, and some of them actually prefer a virtual encounter to face-to-face" meetings with a provider."

He reinforced, "You have to meet people where they are, and I think that's ... really a person-centered approach."

Goal is a healthier, more ready fighting force

"Reducing tobacco and nicotine use improves health, fitness, recovery, and long-term resilience — all of which directly affect the warfighter's ability to fight and win," Ferrara said. "Through continued research, strong partnerships, and sustained leadership commitment, the department is taking concrete steps to drive down tobacco use and protect the health of the men and women who serve," he stated. "This is about readiness today, and it is also about ensuring that those who serve our nation can enjoy healthier lives long after they retire their uniforms."

Ferrara noted that he's already seen a shift in tobacco use. He said over the 35 years that he has been associated with the military, usage and culture have changed, resulting in fewer people smoking.

"If I had the magic wand, I think we would have a culture where we model the behavior that we never get folks started. But until then, we are going to do everything from all the things we talked about and more to mitigate that risk and continue our tobacco harm-reduction techniques."

Ready to quit? Accessing resources

- *TRICARE* offers a multitude of *TRICARE* tobacco cessation services. *TRICARE* covers tobacco cessation counseling if you're aged 18 or older and you live in one of the 50 states or the District of Columbia, as long as you use a *TRICARE*-authorized provider.
- *TRICARE* covers prescription and over-the-counter tobacco cessation products at no cost to you if you use *TRICARE* Pharmacy Home Delivery or a military pharmacy. *TRICARE* doesn't cover these products if you get them at a retail network or non-network pharmacy. A *TRICARE*-authorized provider must write the prescription.
- *You Can Quit2* is a DOW-supported education program that offers coaching, online tools, and in-person support locators to help you quit tobacco. The program helps you you create a timeline that fits your needs so quitting tobacco is within reach.
- You can also call your *local military hospital or clinic* to see if they offer tobacco cessation programs.
- The VA offers a wealth of advice on quitting smoking and smokeless products.
- If you still use chewing tobacco, *do monthly self-checks* of your mouth, tongue, throat, face, and neck to help you find possible early signs of damage or cancer.
- *Smokefree.gov* from the *National Cancer Institute* has many resources and information, including coping with stress without tobacco, what to do if you have a setback quitting tobacco and managing cravings.
- *The Food and Drug Administration* warns that even smokeless products have their own dangers.
- Smoking and tobacco use from the *CDC* includes information on nicotine pouches, menthol tobacco products, vaping, secondhand smoke, and much more.

OPERATION SUPPLEMENT SAFETY: PROTECTING SERVICE MEMBERS WITH EDUCATION FOR THE INFORMED USE OF DIETARY SUPPLEMENTS

By Andrea T. Lindsey

Navigating an evolving dietary supplement landscape

The current dietary supplement landscape is increasingly complex. There are thousands of products available to service members on the market, with new ingredients and products constantly being introduced. Products claiming to support weight loss, muscle building, sexual and energy enhancement, and brain health may be adulterated or contaminated with drugs, prohibited performance-enhancing substances (PES), or other harmful ingredients. Further, a dangerous new category of products listing novel or experimental substances (NES) has recently entered the market. NES are often unapproved drugs, investigational drugs, or other research chemicals with unknown safety profiles. These products may be packaged to look similar to legitimate dietary supplements (DSs) and marketed with bold claims. Manufacturers of NES-containing products appear to be exploiting a legal loophole to evade oversight by using statements such as “for research use only” or “not for human consumption.” In addition, a “Research Facts” or “Material Facts” label may be used in place of a “Supplement Facts” label, which is required for a product to be marketed as a DSs.

With 75% of service members using DSs for reasons such as health promotion, performance enhancement, muscle building, and weight management, the complexities of the current DSs landscape present a significant challenge to force readiness. Service members find themselves in a dilemma: the pursuit of human performance optimization comes with risks. Use of some DSs, health, wellness, and performance products can inadvertently lead to life-threatening emergencies or positive drug tests, and is potentially a career-ending liability.

Operation Supplement Safety (OPSS): Your Line of Defense

In March 2022, the Department of War Instruction (DOWI) 6130.06: Use of dietary supplements in the DOW formalized OPSS as the program of record for anything related to the use of DSs. This instruction also established the following:

- All service members, health care providers, and those who provide health-related services to service members must receive DSs education from OPSS.
- OPSS hosts and maintains the searchable online database for the DOW Prohibited Dietary Supplement Ingredients List. We inform our audience of periodic updates to the list via the OPSS newsletter and on our social media channels.
- Service members are prohibited from using products containing ingredients on the DOW Prohibited Dietary Supplement Ingredients List. Further, DOW, contract, appropriated, non-appropriated, and retail facilities cannot sell products containing ingredients on the list.

In 2024, in partnership with the Office of Drug Demand Reduction (ODDR), OPSS expanded its mission to highlight the topic of PES in educational materials and outreach programs. As part of this effort, the OPSS website was redesigned to include a dedicated PES landing page, allowing service members to easily find evidence-based articles and digital resources on this topic.

OPSS also maintains an ongoing partnership with Major League

Baseball (MLB) on education initiatives, which led to the inaugural PES Summit at MLB Headquarters in New York City in 2024. Building on that momentum, OPSS, MLB, and the United States Anti-Doping Agency (USADA) launched the PES Consortium (PESC) in Spring 2025. These collaborations are essential as we work together to find solutions for the evolving challenges facing the anti-doping and military communities.



Mitigating risks associated with problematic products

Performance and readiness can be compromised by problematic products. For instance, OPSS frequently receives inquiries about DSs which combine multiple stimulants such as caffeine, yohimbine, rauwolscine, and synephrine. Even though these substances are not prohibited, such “cocktails” can disrupt sleep, impair health and performance, and jeopardize deployability. Conversely, other products may list prohibited ingredients alongside unapproved drugs or dangerous research chemicals, leaving a service member to wonder: “How would I even know?”

The mission of OPSS is to provide the best, up-to-date, evidence-based information about DSs, health, wellness, and performance products to service members, their families, leaders, health care providers, allied health professionals, veterans, and the community at large to achieve human performance optimization. OPSS actively educates on these topics and provides evidence-based tools and resources to help service members and all consumers optimize their health and performance. OPSS engages with the community through presentations, trainings, social media posts, attendance at professional conferences, and assists with product- or ingredient-specific questions through the Ask the Expert portal on the OPSS website. By leveraging data analytics and through community engagement, OPSS remains agile in our educational content and approaches. We would like to express our thanks to all the health care professionals on the ground, who work with us regularly to ensure service members have the consistent information and resources needed on their installations.

OPSS developed and hosts an interactive, seven-question scorecard on our website (OPSS.org) to assist service members and consumers in evaluating DSs. When combined with



effective DSs education, this is yet another tool in the toolbox to mitigate risks associated with potentially problematic products. The OPSS scorecard encourages service members and consumers to thoroughly review the information presented on a DSs product label, including claims, statements, words such as “proprietary blends” or “complexes,” caffeine content, the number of ingredients on the Supplement Facts label, and whether the product contains a third-party certification seal.

Prohibited or not prohibited: Safe products are key

Ultimately, service members are responsible for what they consume. They should recognize that staying mission-ready involves more than just cross-referencing a product label against ingredients listed in the searchable version of the DOW Prohibited Dietary Supplement Ingredients List. Even the most diligent service members remains at risk of consuming a product with hidden PES, NES, and other unapproved substances that could lead to an adverse health event or a career-ending positive drug test.

To truly protect service members from contaminated, adulterated, or otherwise harmful DSs, and ensure that they have access to safe products, we should look to successful models used by MLB, USADA, other major professional sports leagues, as well as the recently passed NDAA language for USSOCOM. By adopting robust policies that mandate both education and the use of third-party certified products by organizations vetted and noted by OPSS, we prioritize optimal performance and mission readiness. These steps ensure service members are fully armed with the tools and resources they need to make informed decisions about performance products.

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SHE WAS THERE BEFORE THE WAR CAME HOME

By Megan Hernandez, Courtesy of Wounded Paw Project

How Daisy helped spark the healing behind Wounded Paw Project® — and what rescued dogs teach us about mental health.

Long before the Purple Heart. Long before the prescriptions. Long before the pain followed him home. There was Daisy.

Daisy, a pit bull/Labrador shelter rescue, was adopted to help Ernesto P. Hernandez III's children cope with his military deployments. Like many military families, goodbyes were part of life. Daisy became stability for the kids — something warm and constant in uncertainty.

She was meant to comfort them. No one knew she would one day help comfort him.

When Ernesto returned home from Iraq with injuries that earned him a Purple Heart, the visible wounds were only part of the story. Chronic pain became a daily reality. Invisible injuries — the kind that alter sleep, mood, and nervous system regulation — quietly reshaped life at home.

Doctors worked to treat the physical damage. Medications attempted to manage the pain. But trauma does not always respond neatly to prescriptions.

And somewhere in that difficult season, Daisy did something small — but powerful. She connected first.

The First to Reach Him

Trauma can create distance. Even in loving homes. Even in strong families. There is often a quiet period of disconnection while the nervous system recalibrates — or struggles to.

Daisy noticed.

Rescue dogs are often highly attuned to emotional shifts. Having experienced instability themselves, many develop a sensitivity to tone, posture, and energy.

Daisy began staying closer. Sitting longer. Resting her head against him without invitation.

She did not ask questions. She did not require explanations. She did not need him to be “better.”

She simply stayed.

And in that steady presence, something began to soften.

She wasn't a trained service dog. She wasn't performing tasks on command. But she was regulating the space around him in ways science is only now beginning to explain.

What Was Really Happening

Today, research gives language to what families like Ernesto's experienced intuitively.

Dogs reduce cortisol, the body's primary stress hormone.

Dogs increase oxytocin, which fosters bonding and trust.

Dogs lower heart rate and blood pressure.

Dogs create grounding through physical touch and proximity.

When someone lives in a heightened stress state — common after combat exposure — the nervous system remains on alert. Hypervigilance, irritability, withdrawal, and disrupted sleep often follow.

Daisy's presence became a daily intervention.

She required walks, which created movement and sunlight.

She required feeding, which created routine and structure.

She offered physical contact, which provided calming neurological input.

She anchored the present moment when the past felt loud.

Without clinical terminology, she was helping regulate a body and mind that had been living in survival mode.

Why Rescue Dogs Can Be Especially Transformative

Daisy's role as a rescue dog matters.

Rescued animals often understand uncertainty. They have navigated instability. Many develop a heightened awareness of their environment and the emotional states of those around them.

This does not mean every rescue dog arrives healed. It means that when stability and safety are provided, many become deeply responsive companions.

Rescue dogs frequently:

- Mirror calm behavior.
- Seek closeness during emotional distress.
- Respond quickly to subtle shifts in tone or posture.

- Form strong attachment bonds once trust is established.

For someone navigating invisible wounds, that responsiveness can feel profoundly stabilizing.

There is something uniquely powerful about healing happening in both directions.

In caring for Daisy, Ernesto was not just receiving support. He was providing it. Responsibility became purpose. Purpose became momentum. And healing began.

What This Means for Mental Health

Daisy's story is deeply personal. But the lessons extend far beyond one household.

Rescued dogs can support mental health in ways that are both emotional and physiological. Here's how:

Routine Rebuilds Stability

Mental health challenges often disrupt daily structure. Dogs require consistency. That consistency restores rhythm.

Touch Calms the Nervous System

Ten minutes of petting a dog can measurably lower stress markers. Regular contact reinforces regulation.

Responsibility Reduces Rumination

Depression and anxiety often thrive in isolation and overthinking. Caring for a dog shifts attention outward.

Movement Supports Mood

Daily walks increase endorphins and improve sleep quality.

Physical activity is one of the most evidence-supported tools for emotional resilience.

Rescue Creates Meaning

Adopting a shelter dog introduces purpose. Offering safety to an animal who once lacked it reinforces self-efficacy — the belief that you are capable of making a difference.

It is important to say clearly: dogs are not replacements for therapy, medication, or professional support. But they can be powerful complements to both.

From One Connection to a Mission

In 2016, what began as a personal journey became something larger. Ernesto and Daisy formally founded Wounded Paw Project® to give other shelter dogs a second tail in life®.

The organization was not born from strategy alone.

It was born from experience.

Daisy had been adopted to help children through deployment. Years later, she became the first to reach the very person who once left to serve.

Her impact was not dramatic or theatrical. It was steady. Quiet. Consistent.

And that consistency sparked a broader realization: If one rescued dog could help reconnect a wounded veteran to his own life, how many others might do the same for someone else?

Ten Years Later

Ten years after its founding, Wounded Paw Project® stands as a reflection of Daisy's original gift: connection.

She did not erase pain. She did not eliminate trauma. She sparked healing.

She proved that presence matters. That routine matters. That attachment matters.

And she demonstrated something many families now understand firsthand — rescued dogs do not just need homes.

Sometimes, they help rebuild them.

For readers navigating stress, transition, loss, or emotional strain, Daisy's story offers a simple but profound reminder:

Healing is relational. And sometimes, the first step forward is already waiting at your feet.



10K for Dad: *Running With the Marines* AND TEAM TAPS

By Janet Kramer, Surviving Daughter of
Retired U.S. Marine Corps
Master Gunnery Sgt. Jerry Gooch



Sitting at Dad's graveside, I took a breath and looked around as the announcer's voice from the Marine Corps Marathon finish line filled the silence in Arlington National Cemetery. I carefully undid the safety pins from my Team TAPS racing shirt and removed my race bib and laminated photo of Dad. I propped both up against the tombstone. Then I took off my 10K finisher's medal and draped it on top as my husband sat quietly next to me.

"I finished with the Marines, Dad. I ran this for you. I wish we could've run it together."

Running Start

The Marine Corps Marathon had humble beginnings in 1976, when my dad, Jerry, ran it. It was called the Marine Corps Reserve Marathon that year. Dad was on recruiting duty in Willingboro, New Jersey, at the time and made the trip to D.C. for the race. Mom claims he understood that the race would help the image of the Marine Corps after the Vietnam War. He ran 26.2 miles without a finisher's medal, race shirt, or crowds of supporters, finishing 296th out of 1,500 runners, with a time of three hours and 15 minutes.

Dad took to running in 1970, two years after he enlisted in the Marine Corps and graduated from boot camp at Parris Island. Running suited him. It was something he could do anywhere, in any kind of weather. He just needed the road and a pair of running shoes. When Mom and Dad married in 1973, he was sent to Iwakuni, Japan, for a year. There, he ran twice a day to help pass the time. In August 1977, he ran for his reenlistment, making the 20-odd-mile trip from Willingboro to the Navy Yard in Philadelphia in three hours. Once there, he made it official and signed up for six additional years. After 30 years on active duty, Dad retired at the Pentagon in 1998 as a master gunnery sergeant.

I was 16 in 1999 when I began running cross-country. Dad unofficially became my coach. He woke me up at 6 a.m. on Saturdays to run at the nearby Naval Air Station Patuxent River or on the trails of St. Mary's College of Maryland. He showed up along the race course during my meets, and I'd find him at the top of a hill, cheering me on and yelling at me not to quit.

Soon, we entered local 5K and 10K races together. This was the true reward of all of the work I was putting into running — the memorable running adventures with Dad. We'd leave the house together in his red Toyota pickup truck before the sun. He provided me with cold Gatorade, an old, gray Marine Corps sweatshirt, a red Marine Corps duffel bag, and a good pair of running shoes. He was full of running tips, and decent shoes were part of the deal.

I grew up in a Marine Corps house. I vividly remember watching Dad unlace his boots at night and unhook his green boot blousers. Just as vivid are my memories of seeing his running shoes on the porch and watching him walk in the back door breathless, but happy, after a run.

Over time, Dad slowed down. The man who used to run in any kind of weather began using a walking stick on his daily four- to five-mile walks around the neighborhood to support his tired joints and steady his increasingly unreliable balance. He kept that pace until the week he passed away at 71, in March 2021.

Running Through Grief

Meanwhile, I took a break from running while my husband and I raised three young kids, but on a whim, I registered for the Monument Avenue 10K in Richmond, Virginia, in April 2022. I quickly remembered how to run and fell back in love with running. It made me feel closer to Dad while I worked through my grief.

During the race, a runner zipped past me wearing a Team TAPS shirt. I wondered how it worked. I wanted to honor Dad's memory, but — having been involved with the Tragedy Assistance Program for Survivors, or TAPS, for less than a year at that point, I was still learning about all the opportunities.

Fatefully, some time later, someone in my local TAPS Care Group suggested I run with Team TAPS — it was a way to honor Dad while raising awareness for TAPS and doing something I already loved. My husband and I signed up to run the Marine Corps Marathon 10K with Team TAPS.

The actual event was much more than a race. Near the end of the race, with an uphill climb between me and the finish line, I spotted a line of Marines to my



left. Marching up the hill in camouflage and boots and carrying rucksacks, their encouraging words gave me the boost I needed to finish the climb. I could almost picture Dad there on the hilltop, clapping and cheering me on, like always.

Carry the Legacy

I run with Team TAPS to honor my dad. He inspired me to start and motivates me to keep going. My teammates all have their own "why." Some are also surviving family members. Some have lost friends or battle buddies. Others run to support the survivors of America's fallen and the TAPS mission, which provides peer support and resources to all those grieving a death in the military or veteran community.

No matter what inspires you to honor America's fallen, there's a place for you on the team. Email TeamTAPS@TAPS.org to get started. Purchase Team TAPS gear at [TAPS.org/TeamTAPS](https://www.taps.org/TeamTAPS), or support the mission at [TAPS.org/Donate](https://www.taps.org/Donate).





Operational Readiness Starts with Physical Fitness and Health

By Dr. Judy Staveley

Research across military populations consistently demonstrates that higher levels of physical fitness are directly associated with improved operational performance, reduced injury rates, and enhanced cognitive function under stress. In operational environments, where service members are required to carry heavy loads, move quickly under unpredictable conditions, and sustain effort over extended periods, physical capacity becomes a determining factor in both individual and unit effectiveness.

The ability to maintain endurance, strength, and mobility under stress is not optional. It is essential for the warfighter. Load carriage, a routine requirement in military operations, significantly increases physiological strain, energy expenditure, and the risk of fatigue-related performance decline. At the same time, physical fitness supports cognitive resilience, including faster decision-making and improved situational awareness during high-pressure scenarios.

Physical fitness is not simply a requirement to pass a test. It is a core element of mission success and survival. Service members with higher baseline fitness levels are less likely to experience musculoskeletal injuries, which remain one of the leading causes of limited duty and non-deplorability across the force. In this context, fitness is not just a personal responsibility but a strategic asset that directly supports force readiness and mission capability.

These capabilities extend beyond individual performance and function as a true combat multiplier. In operational environments, physical fitness directly impacts how effectively a service member

can carry gear, assist teammates, and execute physically demanding tasks. Strength supports load-bearing requirements, endurance enables sustained movement over long distances, and agility and mobility reduce the risk of injury while improving reaction time in unpredictable situations.

A physically fit force is more resilient, more adaptable, and better equipped to sustain operational tempo. Conversely, decreased fitness levels can compromise mission effectiveness, increase injury rates, and place additional strain on units. Physical readiness also contributes to mental performance. Regular physical activity supports both physiological and cognitive performance, improving endurance, enhancing metabolic efficiency, focus, and decision-making under stress. In high-stakes environments, where seconds matter, this connection between physical and mental readiness is critical.

Today's military operates in increasingly complex environments, where service members are expected to perform across diverse mission sets with limited recovery time. Long hours, irregular sleep schedules, and high operational tempo can challenge

even the most physically prepared individuals. In this context, fitness must go beyond traditional training models. It is no longer sufficient to focus solely on passing a physical fitness test. Training must reflect the realities of modern operations, emphasizing functional strength, endurance, mobility, and recovery.

Load-bearing exercises, tactical conditioning, and injury prevention strategies are essential components of a comprehensive fitness approach. Equally important is the ability to sustain performance over time without degrading physical health. Musculoskeletal injuries remain one of the leading causes of limited duty status across the military, many of which are preventable and often linked to overtraining, poor movement patterns, or inadequate recovery.

A readiness-focused fitness strategy must prioritize injury prevention. Strength training that targets core stability, joint integrity, and proper biomechanics can significantly reduce injury risk, while mobility and flexibility training improve range of motion and decrease strain during repetitive or high-impact activities. Recovery is equally critical. Sleep, often

sacrificed during operations, plays a central role in muscle repair, cognitive function, and hormonal regulation. Without adequate recovery, performance declines and injury risk increases.

Nutrition is another foundational element of readiness that is often underestimated. The body requires adequate fuel to perform at a high level. Macronutrients provide energy and support muscle function, while micronutrients contribute to immune health and overall physiological balance. Hydration and electrolyte balance are especially important in operational settings, particularly in extreme environments, where dehydration can impair both physical performance and cognitive function.

Service members must view nutrition not as an afterthought, but as a strategic component of mission preparation. Proper fueling enhances endurance, supports recovery, and sustains performance under demanding conditions.

Operational readiness is not achieved through short-term effort. It requires consistency, discipline, and a sustainable approach to health and fitness. Training programs should support long-term performance, integrate strength training, endurance, and mobility while allowing for adequate recovery. Overtraining without proper rest can be as detrimental as undertraining, making balance essential.

Fitness culture is built within units through daily habits, shared standards, and accountability, with leadership reinforcing the importance of smart training and recovery. These practices improve readiness and reduce injury rates. When fitness is treated as a shared responsibility, it strengthens both individual performance and unit cohesion.

While physical fitness is a cornerstone of readiness, it does not exist in isolation. Mental resilience, stress management, and emotional stability are equally important. The demands of military service require individuals to perform under pressure while maintaining clarity and composure. Physical activity can support stress regulation, but additional strategies such as structured recovery and peer support contribute to a more comprehensive readiness model.

Operational readiness begins with the individual service member. Equipment, training, and strategy are critical, but they cannot replace the importance of a physically and mentally prepared force. Fitness is not a box to check. It is a continuous commitment that directly impacts mission success. A force that prioritizes health, strength, endurance, and recovery is better equipped to meet the demands of modern military operations and sustain readiness across every mission.



5 YOGA BENEFITS BEYOND FLEXIBILITY

By Alan Torres, Iraq and Afghanistan Veterans of America (IAVA) Cavalry Member

YOGA ISN'T JUST STRETCHING. IT BUILDS READINESS, RECOVERY, AND RESILIENCE

Around the globe, health care providers, mental health professionals, and even correctional programs are incorporating yoga and meditation into their treatment approaches. While these practices are often seen as ways to relax or improve flexibility, their benefits go far beyond that. From boosting heart health to improving sleep, the physical advantages are clear, but the real impact reaches even further. Yoga also sharpens awareness, strengthens emotional regulation, and builds mental resilience.

For veterans, these benefits are especially important. The U.S. Department of Veterans Affairs highlights accessible preventive tools and supports programs such as the Veterans Yoga Project, which provides free yoga and mindfulness classes. In one program, 75% of participating veterans reported reduced distress, and 72% reported less pain. These results highlight how yoga and mindfulness can enhance overall well-being, making these five benefits particularly impactful.

Boosts Heart Health ▲

Yoga and meditation can lower resting heart rate over time, a simple but powerful marker of heart health. Research consistently shows yoga can help reduce resting heart rate and blood pressure, two major indicators of cardiovascular health. Lowering a high resting heart rate, which is linked to a greater risk of cardiovascular disease and all-cause mortality, signals stronger fitness and better long-term health outcomes.

Another way yoga supports heart health is its ability to reduce stress, a major contributor to heart disease. Controlled breathing helps you manage your heart rate in real time, while physical postures strengthen muscles, improve mobility, and enhance overall movement efficiency. Together, these elements help keep the heart and circulatory system strong. So even though yoga may not look like traditional cardio, its combination of mindful movement, breath-

work, and stress reduction yields meaningful benefits for the heart and lungs. You don't always need intensity to improve health; often times, precision and control make the biggest difference.

Improves Sleep and Recovery ▲

Yoga helps set the stage for better sleep by calming both mind and body. Controlled breathing and intentional movement stimulate the parasympathetic nervous system, which is the body's "rest and recover" mode. This lowers cortisol and blood pressure while relaxing the body, supporting deep, restorative sleep.

Mentally, yoga quiets racing thoughts, which is especially helpful for veterans and service members who deal with hypervigilance or anxiety-related sleep issues. Studies have even found that yoga can reduce insomnia, especially in high-stress populations. Quality sleep is more important than quantity, as deep and REM sleep are where true recovery occurs. Yoga helps create the internal conditions needed for both. Over time, you don't just sleep longer; you recover better, which supports physical performance, cognitive function, and readiness throughout the day.

Sharpens Awareness ▲

Yoga develops a level of body awareness that is hard to replicate with other forms of training. Each deep stretch or balance pose draws your attention to physical sensa-

tions, engaging muscles, connective tissue, and stabilizing structures that traditional strength training often overlooks. This focus develops proprioception, your ability to sense how your body moves and where it is in space. Over time, this awareness helps you notice how your body responds to stress, compensates for limitations, and stabilizes imbalances.

Facing discomfort is part of the process. Holding challenging poses requires concentration and controlled breathing, which strengthens mental focus and the ability to remain calm under pressure. Research

on mindfulness-based practices shows they can improve focus and present-moment awareness, skills that carry directly into performance and stress management. With continued practice, this heightened awareness supports both physical coordination and mental clarity beyond the mat.

Strengthens Emotional Regulation ▲

The awareness developed through yoga can help you manage emotions more effectively. By observing thoughts and reactions in real time, you create a pause between stimulus and response, giving you the chance to act intentionally rather than react automatically.

This habit mirrors principles used in behavioral strategies, such as cognitive behavioral therapy, which helps identify and adjust unhelpful thought patterns. Each time you face discomfort on the mat, you practice noticing mental tendencies and choosing a different response. That lines up with research showing mindfulness practices can reduce emotional reactivity and improve how we respond to stress. Over time, these small mental adjustments carry over into routine situations, making stressful interactions, frustration, and high-pressure moments easier to navigate with greater emotional balance.

Builds Mental Resilience ▲

Yoga and meditation help protect against depression, anxiety, and prolonged stress by strengthening your mind's ability to cope with psychological challenges. Some studies have even shown yoga can increase GABA levels in the brain, which play a key role in managing anxiety and mood.

Over time, these chemical changes create a mental environment that is more stable, balanced, and adaptable. The brain becomes better at regulating and recovering from stress while resisting the downward spiral of negative thought patterns. In essence, yoga and meditation train the mind to stay steady and resilient even during difficult periods.

People who practice regularly often report



fewer mood swings, improved ability to manage anxious thoughts, and stronger defense against the mental impacts of prolonged distress. With ongoing concerns about veteran mental health and suicide highlighted by the U.S. Department of Veterans Affairs, tools like yoga offer a practical way to support resilience alongside professional care. Through VA-supported programs like the Veterans Yoga Project, veterans can access free, trauma-informed yoga and mindfulness classes both in-person and online, making these tools more accessible than ever.

Ready, Resilient, Recovered

Yoga and meditation are not just wellness trends. They are practical tools for performance, recovery, and long-term health. For service members and veterans, where readiness and resilience are constant demands, these practices enhance both without adding extra strain. Improved awareness, better emotional regulation, and strengthened mental resilience carry over into every aspect of well-being and performance. In a culture that values intensity, yoga offers something just as crucial: the ability to recover, reset, and stay mission-ready.

Veterans can access free virtual and in-person classes through VA-supported programs such as the Veterans Yoga Project, which is designed for the military community.

About the Author

Alan Torres is a veteran and wellness practitioner who founded and leads a mobile yoga and meditation instruction business in the Tampa Bay metro area, bringing accessible, community-based health and mindfulness practices to diverse populations. He previously served as an Artillery Noncommissioned Officer, during which he developed strong leadership, discipline, and a commitment to supporting others in high-stress environments.

Currently pursuing a Master of Social Work, Alan is building clinical practice expertise with a focus on supporting veterans and at-risk young adults, bridging physical wellness with mental health care. Alan was also selected to participate in Syracuse University's nationally recognized Entrepreneurship Bootcamp for Veterans (EBV), further strengthening his ability to build mission-driven initiatives.

As a member of Iraq and Afghanistan Veterans of America (IAVA) Cavalry, Alan is actively engaged in veteran advocacy, leadership development, and policy efforts that amplify the voices and needs of the post-9/11 veteran community.

You can learn more about Alan and his work with mindfulness at OmYogaandTraining.com

NOTE TO DOCTOR: I AM A VETERAN

Courtesy of Vietnam Veterans of America

Recently a 76-year-old Vietnam veteran received the worst kind of diagnosis from his doctor; he has **Stage 4 metastatic prostate cancer** spread widely throughout his body. The only treatments available to him now are palliative care and possibly some targeted therapies, which focus on improving quality of life by relieving symptoms, pain, and stress, and can sometimes slow growth of new cancer cells, keeping cancer “at bay” for a period. There is no longer any possibility of curative treatments.

The most frustrating aspect for this veteran and his family is the feeling that this diagnosis could have been avoided. Although the initial pain that took him into the doctor's office was in his shoulders and the first biopsy revealed bone spurs and cancer in his back, the origin of the cancer was traced to his prostate. It all began there. So, why wasn't it discovered earlier?

The veteran thought he had been getting routine prostate specific antigen screening (PSA) blood tests at annual check-ups at his local VA medical center. He was unaware that the official VA policy of not testing men over 70 years-old had kicked in and the tests were discontinued without any mention of the change made to the veteran. The blood draws continued and he thought the same tests were being run.

The problem with current medical policy regarding PSA tests for prostate cancer, a policy followed by VA medical centers, is that it is formulated for average-risk men. Most veterans and almost all Vietnam veterans are not average-risk. They are high-risk.

A study conducted by the UC-Davis Cancer Center (2008) revealed that Agent Orange-exposed men were:

- 1) Twice as likely to be identified with prostate cancer than non-exposed;
- 2) Were diagnosed two and a half years younger than non-exposed;
- 3) And were nearly four times more likely to present with metastatic disease than non-exposed.

Another study conducted by the Portland VA Medical Center and Oregon Health and Science University (2013) found that “veterans exposed to Agent Orange are not only at higher risk for prostate cancer, but they are more likely to have aggressive forms of the disease.” Other military chemical exposures have also been shown to increase prostate cancer risk.



It's crucial that all male veterans and especially Vietnam veterans remember they have the right to request a PSA test. An elevated PSA result will lead to a biopsy. If cancer is detected, a Gleason test follows, which indicates how aggressively the cancer will grow in the individual. Multiple studies show that on average, non-veterans will score two or lower on this scale, while a Vietnam veteran will likely score seven or above. At this point, the doctor will present choices for treatment, and, as the patient, the veteran helps select their chosen treatment. In all cases, the sooner the diagnosis is made, the better the outcome.

As we see in this story of one Vietnam veteran, whether your health care provider knows your veteran status and military history can have life-or-death consequences. Not knowing and understanding the possible health implications of the patient's veteran status and history of service creates an overriding problem. It could be critical to the identification of underlying illnesses, exposures, and injuries related to military service.

Vietnam Veterans of America recently developed a tool that they believe can significantly improve the collection by health care providers of information vital to a veteran patient's health record. They are calling it “Note to Doctor: I Am a Veteran,” and it includes printed materials and a website (veteranhealthconcerns.org/). It is a simple, living resource to assist both health care providers and veterans. Portable, easy to access and use, specific to service eras and locations, it can be updated over time. The tool can be found at the top of the VVA website homepage (vva.org). The printed cards designed for the program are credit-card-size and easily stored in a wallet. One is meant to be carried by the veteran, the other given to the health care provider.

“Veterans deserve to know their doctors know them. They deserve the best care available to them also. Without this, we deny them the basics we should all expect. And if historical information isn't available to the health care community, veterans and their families will pay the price,” said VVA's Marsha Four, Vietnam veteran and a lifelong nurse, who took the lead role in the creation of this new resource.

It is crucial that community providers ask all patients (men and women), both new and existing ones, if they are a veteran, and that VA providers are aware of their veteran patient's individual military history. As we have seen in the case of our Vietnam veteran, health care providers, even those at a VA facility, might easily be reaching less than complete diagnoses and treatment plans for far too many deserving veterans because they lack more specific information. Prostate cancer is far from the only condition that can slip by undetected. Veterans need to advocate for themselves and be sure to let their health care providers know —

I am a Veteran!



WHY VETERANS STRUGGLE WITH TRADITIONAL ADDICTION TREATMENT

By Tom Spooner, Warriors Heart Co-Founder and Army Special Forces Veteran

From the moment we put on the uniform until it's hung up for the final time, service members are ingrained in a community culture where the group always comes before the individual. This culture doesn't overlap with the individualistic nature of the civilian sector.

Moreover, the same mentality that defines the warrior ethos is also the largest barrier for veterans in need of addiction support. Even when we're struggling, veterans have a hard time raising their hands and admitting they, as individuals, need help.

Unfortunately, the traditional addiction treatment model is built around civilian culture and the individual's treatment process. This empowers people to be the drivers of their own healing journey. It doesn't work for everyone, however, particularly those who have worn the uniform.

For veterans, traditional treatment creates a cultural barrier. They aren't built to climb this mountain alone, but alongside their brothers and sisters. This model removes veterans' greatest strength – community – and isolates them as bystanders.

The need is staggering.

- On average, 17.6 veterans die by suicide every day.
- Veterans are more than twice as likely to commit suicide as their civilian counterparts.
- About 14% of veterans reported having a substance use disorder (SUD).
- Veterans with a diagnosed SUD have more than twice the risk of suicide than veterans without a diagnosed SUD.
- More than 1 in 4 veterans who die by

suicide have a documented substance use disorder.

- More than 25% of veterans who seek treatment for PTSD end treatment early.
- Between 2019 and 2024, diagnoses for PTSD and alcohol-related disorders rose by nearly 40%.

We have found that purpose-built treatment specifically designed for warriors removes this friction and bridges the cultural gap by reintegrating the warrior into a tribe. This model combines communal healing with subject matter experts and treats SUDs and trauma together.

Shared Accountability

Traditionally, accountability is structured through a vertical, clinical hierarchy between the patient and staff. With this, their success or failure is viewed through an individual lens, where the person is the sole driver of their progress. This vertical nature doesn't translate well to the warrior class that thrives on peer-led accountability and collective success metrics.

Alternatively, programming tailored for veterans and first responders sees the group move forward together with a "no man left behind" mentality. With a community to rely on, veterans remain locked in and lean on one another to stay on track. In this environment, when one member of the tribe stumbles, the others are there for them.

This communal accountability turns healing into a shared mission, keeping veterans focused through treatment.

Communal Healing

Camaraderie is also vital to the well-being of our patients in uniform, in the civilian world, and in treatment. It is the heartbeat of military culture and a major disconnect with traditional treatment facilities. Healing is a 24/7 process, so veterans at Warriors

Heart eat, process, heal, and enjoy recreational time together.

This process is cemented through the Battle Buddy system, where new warriors are immediately paired with a peer who is further in their recovery process to ensure no one starts their journey alone. With warrior-specific programming, camaraderie is placed front and center.

This veteran-tailored approach to treat-



ment also offers community electives, including metal/wood shop, art classes, jiu-jitsu training, yoga sessions, and K9 handler/obedience courses. These electives provide community experiences to open up and share through actions and projects. Some finally find an outlet for their pain, trauma, and anxieties.

Driven by Data

This peer-led model is backed by 2025 clinical outcomes from an independent third-party platform, which show that Warriors Heart clients consistently begin treatment with more severe symptoms and complex disorders than the national average but leave significantly healthier. Other key outcomes include:

- Trauma Recovery: Warriors saw a 55% reduction in trauma scores.
- Pathology Reduction: Overall pathology (a composite of depression, anxiety, cravings, and stress) was reduced by 62%, outperforming national averages 21%.
- Depression & Anxiety: Reduced depression by 65% and anxiety by 43%, both 20% better than national averages.
- Completion: 88% of the warriors who walked through the door completed the full 42-day treatment program.

A Facility that Understands

We can't ask veterans and service members to fit into the traditional treatment mold. The "one-size-fits-all" approach lacks the strongest tool we have: warrior culture.

By moving toward a peer-driven model designed for veterans and first responders, we provide our warriors with a community that heals with and because of one another.

If you, or a warrior you know, is struggling with substance abuse, PTSD, TBI, or other mental health battles, call Warriors Heart's 24/7 support line (866-335-9023) to get help or learn more at warriorsheart.com.



About the author, Tom Spooner

Tom Spooner is a retired U.S. Army Delta Force operator and Co-Founder/President of Warriors Heart, the nation's leading private and accredited treatment program exclusively serving military, veterans, and first responders. His distinguished 21-year military career included service in the 82nd Airborne, as a Green Beret with the 7th Special Forces Group, and with the Army's elite 1st Special Forces Operational Detachment-Delta, with 12 deployments and more than 40 months in direct combat.

After retiring in 2011, Spooner faced his own challenges with PTSD, and traumatic brain injury, approaching recovery with the same discipline and commitment that defined his military service. In 2016, he partnered with Josh and Lisa Lannon to co-found Warriors Heart, where he helped build a full continuum of care—from detox to aftercare—on campuses in Texas and Virginia, guiding thousands of warriors toward healing.

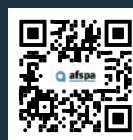
A powerful and authentic voice in the recovery and military community, Spooner speaks openly about the invisible wounds of service, empowering others to seek help and understand they are not alone. His work has been featured on the TODAY Show, A&E's Intervention, Stars and Stripes, FOX News DC, KSAT, and major network affiliates nationwide. Spooner has been sober for over three decades and is a devoted husband and father. Learn more at Warriorsheart.com/tom-spooner-my-why/.



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ADVENTURE AS MEDICINE:

HOW MILITARY FAMILIES ARE FINDING HEALING IN THE OUTDOORS

A federal program is transforming the health and well-being of service members and their families — one hike, paddle, and campfire at a time.

By Lindsay Knight

The orders come. The boxes get packed. A family uproots everything, again, and arrives somewhere new, far from friends, family, and anything familiar. For more than 1.3 million active-duty service members and their families, this cycle is simply life. But the stress it generates is anything but simple.

According to Blue Star Families' Military Family Lifestyle Survey, 73% of active-duty family respondents report high stress. Military spouse satisfaction with the military way of life dropped significantly between 2021 and 2024. Meanwhile, 63% of active-duty service members cite family considerations as a key factor in their decision to stay in — or leave — the military. The health of the family is inseparable from the readiness of the force.

One program is tackling this challenge in a straightforward way: by getting families outside and connected to one another.

What Is Military Families Outdoors?

Military Families Outdoors (MFO) is a federally supported program that provides nature-based wellness experiences to service members, active-duty families, and military-connected communities across the United States. Administered by the Defense Health Agency and the National Park Service, it brings together the expertise

of Blue Star Families, Wilderness Inquiry, Armed Services YMCA, and The Center for Health & Nature at Texas A&M University to deliver programming across national parks, public lands, and urban waterways nationwide.

The program launched in 2024 as a pilot. In its first year, it reached more than 9,000 participants across 33 public lands and 43 national park sites — offering guided hikes, canoe trips, overnight camping experiences, environmental education programs, and summer day camps. By 2025, MFO had expanded to over 20 additional sites, serving more than 13,500 service members and families. In total, more than 20,000 military family members have participated in the program's first two years.

The Science Behind Getting Outside

A growing body of research supports what MFO participants discover firsthand: time in nature improves mental and physical health. Outdoor activity reduces cortisol levels, decreases anxiety and anger, improves sleep quality, enhances cognitive function, and supports physical fitness. Time in nature has also been linked to improved spiritual well-being — a dimension of health that is frequently underserved in conventional wellness programming.

For military families specifically, the benefits go deeper.

Frequent relocation creates chronic social isolation. Deployments fracture family routines. The cumulative toll of military life can leave families feeling disconnected — from their communities, each other, and themselves.

MFO addresses these challenges upstream, before they become crises.

"These experiences have brought so much joy into our lives," wrote one Active Duty Air Force spouse in a post-program survey. "Making those hard days without family or friends worth it. When you know a community cares for



you, and wants you to explore and experience wonderful places.”

The Numbers Tell the Story

In 2025, 96% of MFO participants reported feeling a sense of belonging in the outdoors. Ninety-five percent said they better understood how parks and public lands could improve their family’s mental health, and 87% said the same about physical fitness. In Wilderness Inquiry’s post-trip surveys, 92% of participants reported feeling more connected to themselves, their family, or their community — and 90% said they felt more open to challenge and trying new things.

Perhaps most meaningfully, 89% said they felt more confident in their ability to access the outdoors independently with their families — a sign that MFO is building lasting habits, not just one-time experiences.

In year one, participants made an average of 2.1 new social connections per program — a small number that carries outsized significance for families who often arrive at a new duty station knowing no one.

A Continuum of Care

What sets MFO apart is its intentional design. The program operates along a four-stage continuum: Invite, Introduce, Engage, and Empower.

It begins with awareness — ensuring military families know that national parks, public lands, and outdoor programs are accessible to them. Many do not. From there, MFO introduces families to nature through approachable, short-dose experiences: a Canoemobile event on an urban waterway, a guided nature walk, a



summer day camp for military children through the Armed Services YMCA’s Ranger Week program. In 2025 alone, 1,980 children participated in Ranger Week programming across 17 events.

For families ready to go deeper, MFO offers multi-day immersive experiences through Wilderness Inquiry, including extended camping and paddling trips into backcountry settings that challenge families in ways that are transformational. “I saw my family truly challenge themselves and succeed,” wrote one Active Duty Army participant. “I feel as though I saw their true physical potential and ability to break free of screens and home comforts.”

Finally, MFO works to empower families to carry the outdoor habit forward on their own — providing skill-building resources, Nature Near You guides tailored to each military installation, PCS Route guides that turn military moves into family adventures, and a nature-based wellness curriculum being piloted at military wellness centers.

More Than Recreation

It would be easy to categorize MFO as a recreation program. It is more than that.

At its core, MFO is a health intervention — one designed to address the structural stressors of military life through a low-cost, high-impact prescription: go outside, together. The program explicitly frames itself as an upstream solution to the mental health, retention, and readiness challenges facing the all-volunteer force.

The logic is sound. Stronger, healthier, more resilient families produce retained service members. And retained service members sustain the force.

“These events are priceless for us,” one MFO family wrote after their first program. “It’s such a wonderful way to help welcome families during a sometimes difficult transition.”

For the military families discovering trails, paddling rivers, and sleeping under stars for the first time through MFO, the outdoors is becoming more than a destination. It is becoming a tool for healing, connection, and resilience — one adventure at a time.

Military Families Outdoors programs are free for active-duty service members and their families. Learn more and find programs near you at militaryfamiliesoutdoors.org.



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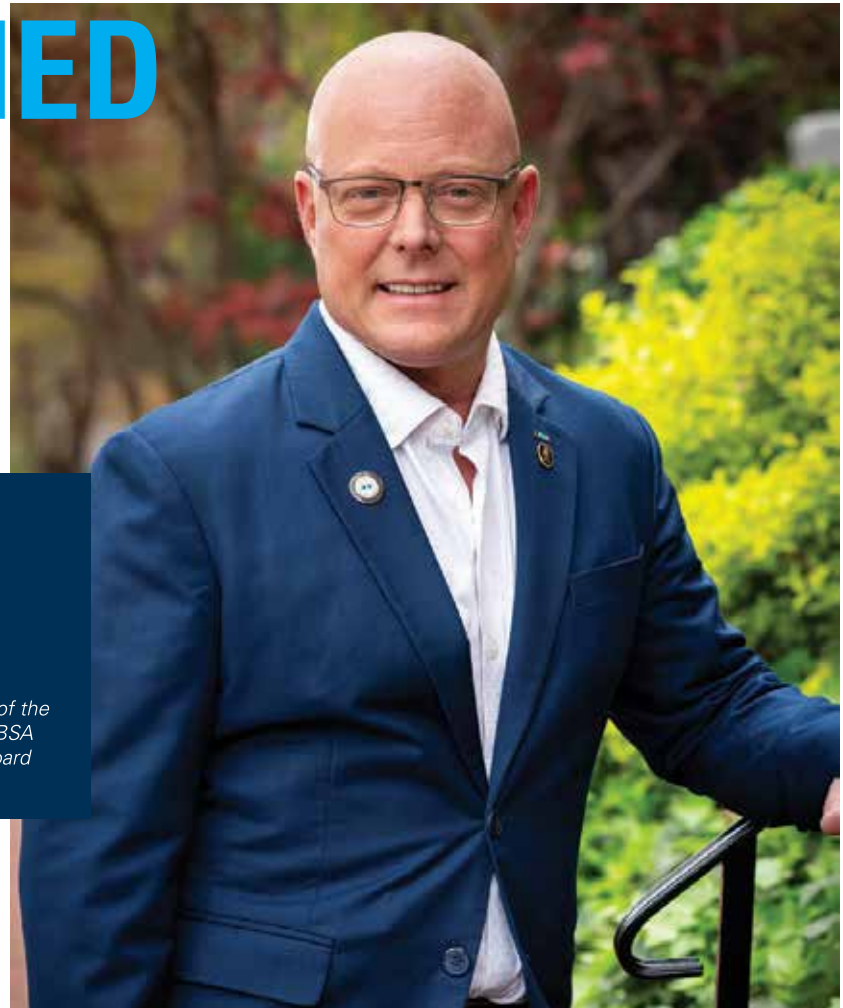


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*13th Master Chief Petty Officer of the
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