

**Army in Europe
Pamphlet 600-8-109-6**

**LEADER
POST-REINTEGRATION
GUIDE**

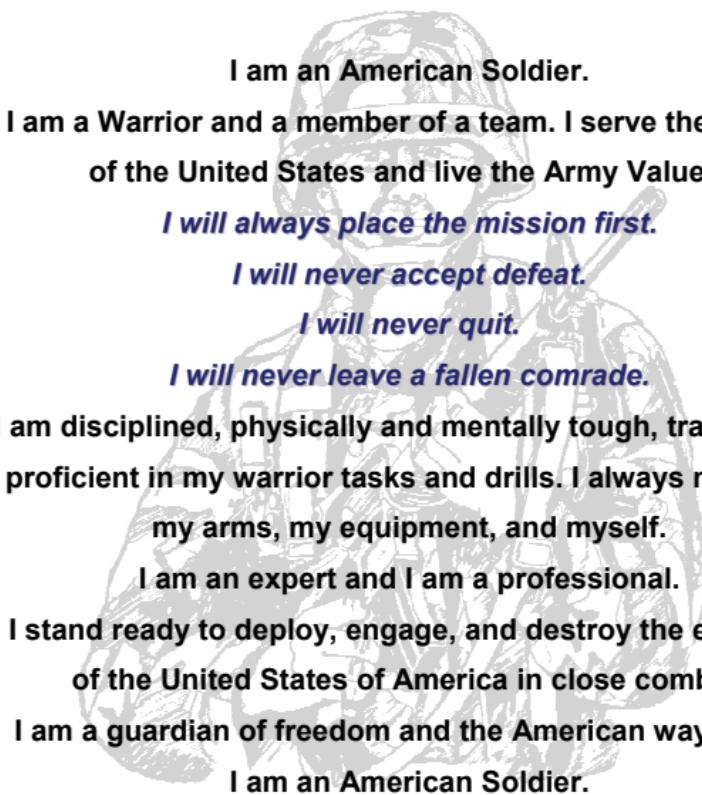
**A Resource for Leaders in the Army in Europe
Taking Care of Our Own**

**Headquarters
United States Army Europe and Seventh Army
United States Army Installation Management Command
Europe Region
Heidelberg, Germany**

1 June 2008

<http://www.per.hqusareur.army.mil/postreintegration/index.htm>

Soldier's Creed



I am an American Soldier.

I am a Warrior and a member of a team. I serve the people of the United States and live the Army Values.

I will always place the mission first.

I will never accept defeat.

I will never quit.

I will never leave a fallen comrade.

I am disciplined, physically and mentally tough, trained and proficient in my warrior tasks and drills. I always maintain my arms, my equipment, and myself.

I am an expert and I am a professional.

I stand ready to deploy, engage, and destroy the enemies of the United States of America in close combat.

I am a guardian of freedom and the American way of life.

I am an American Soldier.

Headquarters
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United States Army Installation Management Command
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Heidelberg, Germany

Army in Europe
Pamphlet 600-8-109-6*

1 June 2008

Personnel—General

Leader Post-Reintegration Guide

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Document Management

Summary. This pamphlet provides guidance on recognizing and resolving post-reintegration issues. It offers tools that leaders may use to counsel subordinates and help them understand and handle stress and other challenges arising from deployments. This pamphlet supplements AE Pamphlet 600-8-109-2. The USAREUR Post-Reintegration website at <http://www.per.hqusareur.army.mil/postreintegration/index.htm> provides the following:

- A post-reintegration behavioral health questionnaire and instructions on how to use it. Leaders should use this questionnaire to augment their counseling of Soldiers and civilian employees.
- A list of agencies that can provide post-reintegration support.

Summary of Change. This revision—

- Adds an example of a seven ½-day reintegration schedule (pg 10).
- Adds information on the behavior of children whose parents have returned home from deployment (pg 19).
- Updates United States Army garrison (USAG) locations and telephone numbers (pg 22).
- Updates health clinic locations and telephone numbers (pg 24).

Applicability. This pamphlet applies to all Active Army, Reserve, and National Guard Soldiers; and civilian employees returning from deployment.

Forms. AE and higher level forms are available through the Army in Europe Publishing System (AEPUBS) at https://aepubs.army.mil/ae/public/aepubs_main.asp

Records Management. Records created as a result of processes prescribed by this pamphlet must be identified, maintained, and disposed of according to AR 25-400-2. Record titles and descriptions are available on the Army Records Information Management System website at <https://www.arims.army.mil>.

Suggested Improvements. The proponent of this pamphlet is the USAREUR G1 (AEAGA-M, DSN 370-4154/8060). Users may suggest improvements to this pamphlet by sending DA Form 2028 to the USAREUR G1 (AEAGA-M), Unit 29351, APO AE 09014-9351.

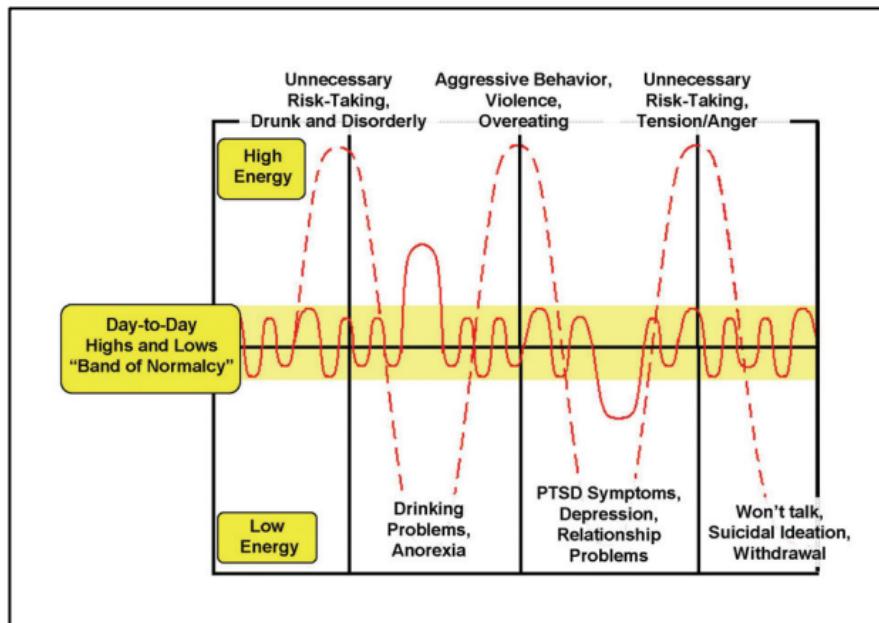
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POST-REINTEGRATION CYCLE

Redeployment, reintegration, reconstitution, and retraining can be an emotional rollercoaster for Soldiers, civilian employees, and their Families. After long and arduous deployments, the process of reunion and reintegration is an initial whirlwind of change, followed by a longer period of gradual adjustments. The figure below shows how the post-reintegration period can involve a series of highs and lows, and indicates that even those within the “band of normalcy” can have issues that lead to negative (high or low energy) behavior.



SOLDIER AND CIVILIAN RISK ASSESSMENT

Commanders and other leaders down to squad level should use the risk assessment shown below to screen Soldiers and civilian employees who have completed reintegration to help identify those who may be at risk. A check in any block may indicate that the Soldier or civilian employee needs to be monitored, referred for help, or both. A check in a block that shows misconduct on the part of a Soldier or civilian employees may indicate a need for formal administrative counseling.

SINCE COMPLETING REINTEGRATION, HAS THE INDIVIDUAL—	
Been involved in an alcohol-related incident?	
Been enrolled in counseling services with the Army Substance Abuse Program?	
Had an “at-fault” traffic accident or received traffic citations (for example, speeding, running red lights and stop signs)?	
Tested positive for drugs?	
Had disciplinary problems?	
Been absent without leave (AWOL) or been unaccounted for at any time?	
Had serious negative encounters with his or her chain of command?	
Had serious negative encounters with military or DA civilian personnel (other than the chain of command)?	
Seemed angry or sullen and withdrawn?	

**SINCE COMPLETING REINTEGRATION, HAS THE
INDIVIDUAL—**

Seemed to be a loner?	
Committed an act of domestic violence?	
Had a significant change in Family or relationships (for example, separation or divorce from spouse, loss of boyfriend or girlfriend, problems related to parenting)?	
Threatened Family members or appeared angry about Family situations or events?	
Had his or her spouse or another Family member express concern about his or her well-being to the Family readiness group or rear detachment command?	
Expressed suicidal thoughts or displayed suicidal behavior?	
Had severe financial problems?	
Had a serious accident or become seriously ill?	
Taken shortcuts (for example, failed to follow instructions or proper procedures, took unnecessary risks) that could have led to an accident?	
Shown signs of distress (agitation, grief, withdrawal), guilt, or that he or she is still bothered by combat or other events experienced during deployment?	
Had problems with his or her civilian employer (Reserve component only)?	



POST-REINTEGRATION COUNSELING

Post-reintegration counseling requires discretion and empathy, and serves to further emphasize the concern the command has for Soldiers, civilian employees, and their Families after arduous deployments. This counseling also reinforces the concept that post-deployment issues are to be expected and that leaders must be trained to recognize and address them.

The questions on page 11 will help leaders discuss sensitive issues with their subordinates. The questions are intended to help leaders determine if subordinates and Family members have underlying post-reintegration issues. The questions cover the minimum areas that should be addressed in formal counseling sessions with each Soldier and civilian employee who has returned from an extended deployment.

If a response to any question indicates that a Soldier, civilian employee, or Family member needs additional assistance, support should be obtained immediately from the agency best suited to provide assistance in the community. A list of support agencies is provided on the USAREUR Post-Reintegration website. (When seeking assistance, local procedures and standing orders must be followed.)

NOTE: While the purpose of this pamphlet is to help leaders identify individuals who need assistance, leaders must ensure that they adequately protect the legal rights of Soldiers and civilian employees when questioning them. The leader should inform Soldiers of their rights up front. If Soldiers or civilian employees make incriminating statements during an interview or counseling session, the leader conducting the session must either terminate the session or advise the individuals of their rights (for Soldiers, the rights under Article 31 of the Uniform Code of Military Justice).

When Soldiers or civilians first return from Operation Iraqi Freedom (OIF) or Operation Enduring Freedom (OEF), the unit chain of command should immediately enter them in a deliberate reintegration process in which they come to work for $\frac{1}{2}$ -days for 7 consecutive days. During these $\frac{1}{2}$ -day periods, the unit and supporting garrison will lead the redeployed Soldier or civilian through a series of mandatory briefings, assessments, and appointments. These mandated events are listed on the USAREUR Reintegration Checklist. The secondary intent for the seven $\frac{1}{2}$ -day period is to provide a methodical and gradual reintroduction of the Soldier to the Family and community before block leave begins. An example of a seven $\frac{1}{2}$ -day reintegration schedule is on the next page.

POST-REINTEGRATION COUNSELING QUESTIONS

Have you had to go on medical or dental sick call since you returned from deployment?	
Were any of your medical or dental visits directly related to the deployment?	
Were you directed during any medical appointment to stay in the hospital overnight?	
Have you been given a profile?	
Are you getting the personal support you need?	
Do you or your Family have any financial issues or difficulties due to not receiving warrior-pay entitlements?	
How has your Family adjusted to your return?	
Are you functioning as a Family unit similar to how you were functioning before your deployment?	
Have you had any major arguments with your Family or friends?	
If you have had arguments, how heated were they? Is there a chance that you could hurt someone?	
Could you benefit from counseling?	
Could any of your Family members benefit from counseling?	

BEHAVIORAL HEALTH QUESTIONS

The questions on pages 11 through 15 address problems that individuals may face during the post-reintegration period. Leaders should use these questions to help Soldiers, civilian employees, and Family members discuss potentially traumatic deployment experiences and to determine whether or not to refer an individual for mental-health assistance.

Army Substance Abuse Program counselors, chaplains, behavioral-health services personnel, social-work services personnel, and other healthcare providers can provide assistance.

Sleep problems are frequently reported by Soldiers and civilian employees after deployment and may relate to other clinical problems such as depression or posttraumatic stress disorder (PTSD). Reporting sleep problems may be a less stigmatizing way of conveying other stress-related concerns and can sometimes be an early warning signal for other problems.

NOTE: Certain symptoms are typical immediately after redeployment and are not necessarily indicators of a deeper problem. Relationships change during deployment, and reintegration may be difficult and take time. Leaders should consider whether or not the symptoms are more than they would normally expect. If symptoms persist for several months and cause distress or affect work performance, additional support should be obtained.

POSTTRAUMATIC STRESS	
Symptoms	Possible Questions
Cannot stop thinking about what happened.	Have you been having nightmares about what happened? Are you thinking about what happened all the time?
Tries to avoid thinking about what happened.	Have you tried to avoid thinking about what happened? Do things that remind you of what happened upset you?
Appears numb or disconnected from others.	Have you felt disconnected or detached from others since you returned? Are you less interested in being with your friends?
Appears jumpy or keyed up.	Have you felt on edge since you returned?

ANGER	
Symptoms	Possible Questions
Has physical fights, loses temper, throws things.	Are you getting into fights?
Has verbal fights, gets into lots of arguments with others.	Are you arguing with people?
Appears irritable or short-fused.	Do little things irritate you?
Appears on the verge of losing his or her temper.	Have you been feeling like you are on the verge of losing your temper? Do you think about hurting others or smashing things?

SLEEP DEPRIVATION ISSUES	
Symptoms	Possible Questions
Appears overly tired and lethargic.	Have you been having problems sleeping (falling asleep, staying asleep, sleeping restlessly)?
Reports difficulty sleeping or still feels tired after sleeping.	Do you think your sleep problem could be related to medications, caffeine, or a medical condition? Could your sleeping difficulties be related to feeling stressed, upset or worried?
Fatigue is interfering with work performance.	Would you like some help dealing with your sleep problem?

DEPRESSION	
Symptoms	Possible Questions
Lacks energy or is restless and fidgety.	Do you have little interest or pleasure in things you used to enjoy?
Appears sad or hopeless.	Have you been feeling down, depressed, or hopeless?
Appears irritable.	Do you feel like little things get on your nerves? Are you getting easily annoyed?
Shows an increase or decrease in appetite.	Have you noticed your appetite changing (either increased or decreased)?
Has difficulty sleeping or is sleeping too much.	Have you had trouble falling asleep or waking up and not being able to get back to sleep?
Has difficulty concentrating (for example, has trouble reading a newspaper or watching television).	Have you found it harder to concentrate?
Lacks energy.	Have you felt tired or run down?

DRINKING PROBLEMS	
Symptoms	Possible Questions
Cannot stop or cut down on drinking.	Have you tried to cut down on your drinking and found that you could not?
Drinks more or needs to drink more to get the same effect (tolerance level has increased).	Do you need to drink more to get the same effect? Are you drinking more than you used to?
Drinking appears to be affecting relationships with others.	Is your drinking causing problems at home or with your friends? Are people complaining or worried about how much you drink?
Drinking appears to be affecting work performance.	Have you noticed if your drinking is affecting how you do your job? Is it getting harder for you to bounce back in the mornings and be ready to focus on work?
Wants alcohol early in the morning.	Do you want to drink when you first wake up in the morning?

PROBLEMS WITH RELATIONSHIPS	
Symptoms	Possible Questions
Appears to have problems with spouse.	<p>Have you and your spouse been arguing a lot? Is this causing problems in your marriage?</p> <p>Are you worried about the stability of your marriage?</p> <p>Have you or your spouse spoken with anyone to get help, such as a chaplain or a counselor?</p>
Appears to have problems involving infidelity.	<p>Are you having arguments about being faithful to each other?</p> <p>Are you worried about your spouse being faithful?</p> <p>Is your spouse worried about you being faithful?</p>
Appears to have problems involving physical or emotional abuse.	Are you worried that your arguments might get out of control?
Appears to have problems with finances.	<p>Are you arguing about money a lot?</p> <p>Are arguments about money affecting your marriage?</p>

REINTEGRATION SUPPORT FOR CIVILIAN EMPLOYEES

The reintegration and post-reintegration periods can be as difficult for redeployed civilian employees and their Family members as they are for Soldiers returning from deployment. Those affected by deployments may need time off from work for reintegration.

The civilian and military leave systems and rules governing the use of personal time vary considerably. Leaders and supervisors should be familiar with civilian personnel policy and programs that govern the use of administrative time to participate in reintegration ceremonies, the application of liberal leave policy during rest and recuperation, and the use of alternate work schedules to provide flexibility in the workplace. In addition, leaders and supervisors should be familiar with the following terms:

- **Excused Absence.** Excused absence is an administrative leave and may be approved only when it clearly serves the best interest of the U.S. Government. It will not be approved when paid leave is appropriate. Generally, if an activity or task supports the mission and must be accomplished during normal duty hours (for example, attendance at family readiness group meetings), the time away from the office should be recorded as duty time or excused absence. AE Regulation 690-47 and AE Pamphlet 690-630 provide more information on excused absence.
- **Liberal Leave Policy.** When a liberal leave policy is in effect, managers must grant annual leave or leave without pay (LWOP) unless this would adversely affect the mission. LWOP allows employees to be absent without pay for specific periods when they do not have enough accrued leave. AE Regulation 690-47 provides more information on the liberal leave policy.

CHILDREN'S REACTIONS TO THEIR PARENT'S RETURN FROM DEPLOYMENT

Family members are affected by separation and may need additional time and support to completely readjust. Listed below are types of behavior that leaders can advise parents to watch for, and techniques that parents may use to help their children adjust to their parent's return.



BEHAVIOR	TECHNIQUES
Up to 1 Year	
<ul style="list-style-type: none"> • Cries. • Fusses. • Pulls away. • Clings to other parent or a caregiver. • Wets the bed or is constipated. • Has changed his or her sleeping or eating habits. • Does not recognize you. 	<ul style="list-style-type: none"> • Hold the baby and hug him or her a lot. • Bathe and change the baby; feed and play with him or her. • Relax and be patient; he or she will warm up to you after a while.
1 to 3 Years	
<ul style="list-style-type: none"> • Cries. • Is shy. • Clings to you. • Does not recognize you. • Has tantrums. • Has regressed; is no longer toilet-trained. 	<ul style="list-style-type: none"> • Do not force the child to allow you to hold, hug, or kiss him or her. • Give the child space. • Give the child time to adjust to your return. • Be gentle and fun. • Sit at the child's level.

BEHAVIOR	TECHNIQUES
<p style="text-align: center;">3 to 5 Years</p> <ul style="list-style-type: none"> • Shows anger (temper tantrums) • Acts out to get your attention; needs proof that you are real. • Is demanding. • Feels guilty (feels responsible for the parent having left). • Talks a lot to bring you up to date. • Is withdrawn. 	<ul style="list-style-type: none"> • Listen. • Accept the child's feelings. • Play with the child. • Reinforce the fact that you love the child. • Find out new things on television, at preschool, and in books.
<p style="text-align: center;">5 to 12 Years</p> <ul style="list-style-type: none"> • Feels as if he or she is not good enough. • Dreads your return because of discipline problems. • Boasts about the Army and the parent. • School performance declines. • Throws temper tantrums. • Is withdrawn. 	<ul style="list-style-type: none"> • Review activities, pictures, schoolwork, and scrapbooks. • Praise what the child has done. • Try not to criticize. • Spend personal time together on projects.
<p style="text-align: center;">13 to 18 Years</p> <ul style="list-style-type: none"> • Is excited. • Feels guilty because he or she does not live up to standards. • Is concerned about rules and responsibilities. • Feels too old or is unwilling to change plans to accommodate the parent. • Is rebellious. 	<ul style="list-style-type: none"> • Explain to the child what you experienced. • Listen with undivided attention. • Do not be judgmental. • Respect the child's privacy and friends. • Do not tease the child about his or her choice of fashion or music.



Army Community Service (ACS) provides numerous support programs and services designed to help Soldiers, civilian employees, and family members recognize and resolve post-reintegration issues.

The USAREUR Post-Reintegration website at <http://www.per.hqusareur.army.mil/reintegration/> lists telephone numbers and agencies that offer post-reintegration support in the United States Army garrisons (USAGs) shown below.

ORGANIZATION	LOCATION	DSN TELEPHONE
IMCOM-Europe	Heidelberg	370-7865
USAG Ansbach	Ansbach/Illesheim	467-2915
USAG Bamberg	Bamberg	469-7777
USAG Baumholder	Baumholder	485-8188
USAG Benelux	Mons	361-6202
USAG Brussels	Brussels	368-9721
USAG Darmstadt	Darmstadt	348-6440
USAG Garmisch	Garmisch	430-3777
USAG Grafenwöhr	Grafenwöhr	475-8371
	Hohenfels	466-4325/4860
	Vilseck	476-2650/2733
USAG Heidelberg	Heidelberg	370-6883
USAG Hessen	Hanau	323-3905
	Hanau	322-8965
USAG Hohenfels	Hohenfels	466-4325
USAG Kaiserslautern	Kaiserslautern	493-4093
USAG Livorno	Livorno	633-7084
USAG Mannheim	Mannheim	385-2315
USAG Schinnen	Schinnen	360-7450
USAG Schweinfurt	Schweinfurt/Leighton	354-6933
USAG Stuttgart	Stuttgart	430-5302
USAG Vicenza	Vicenza	634-7500
USAG Wiesbaden	Wiesbaden	335-5234

Military OneSource

**From Germany (toll free): 0800-888-0013 follow directions
(press 5 for international toll free number) then dial 800-342-9647**

From the United States (toll free): 1-800-342-9647

<http://www.militaryonesource.com>

Military & Family Life Consultants

Schweinfurt: 0175-379-4691

Heidelberg: 0175-601-1985





ORGANIZATION	DSN TELEPHONE
USAG Ansbach	467-3398
Illesheim	467-4512/4588
Katterbach	467-3398
USAG Bamberg	469-1750
USAG Baumholder	485-8080
USAG Benelux	423-5886
USAG Brussels	368-9500
USAG Darmstadt	348-6263
USAG Garmisch	430-8610
USAG Grafenwöhr	475-7152
Rose Barracks, Vilseck	476-2936
USAG Heidelberg	371-2605/2420
USAG Hessen	328-6601/6600
USAG Hohenfels	466-1750/2505
USAG Kaiserslautern	483-1750
Landstuhl	486-5762
Ramstein	479-2273
USAG Livorno	633-7357/7358
USAG Mannheim	380-4095/4096
USAG Schinnen	0245-199-3200
USAG Schweinfurt	354-7901
Würzburg	350-2313/7787
USAG Stuttgart	430-8610
USAG Vicenza	634-7484/7297
USAG Wiesbaden	337-6320/6339

HEALTHCARE INFORMATION

Advice is just a telephone call away, any time, day or night. If you have a medical concern in the middle of the night or simply need sound medical advice, all you need to do is pick up the telephone to speak to a registered nurse or get automated information on hundreds of topics.

LOCATION	TELEPHONE
Bahrain	888-475-9233
Belgium	0800-71920
Denmark	800-17357
Germany	0800-825-1600
Greece	008-001-1815-3044
Iceland	00-800-22255288, then 1-888-866-7942
Italy	800-877660
Netherlands	0800-0227944
Norway	800-12635
Portugal	800-800-128, then 1-888-866-7943
Spain	900-93-1193
Turkey	00-800-13815-9042
United Kingdom	0800-896409
United States	1-888-866-7943



SUICIDE PREVENTION

Suicide Warning Signs

An individual may be a suicide risk if he or she—

- Deliberately injures him- or herself.
- Has experienced a significant loss of a family or friend.
- Is abusing drugs or alcohol.
- Is giving away possessions.
- Recently suffered a failed relationship.
- Seems depressed (for example, is sad or tearful, is eating or sleeping poorly, feels hopeless).
- Shows changes in appearance, behavior, or mood.
- Threatens to commit suicide.
- Talks about wanting to die.



HOW TO HELP

Ask

Do not be afraid to ask, "Are you thinking about killing yourself?"

Intervene

Immediately seek assistance from a health professional.

DO NOT KEEP IT A SECRET.

Follow the Acronym L I F E

Local Help

Obtain help (for example, from a chaplain, doctor, Family member, friend, nurse, staff duty officer).

Inform

Let the chain of command know as soon as possible.

Find

Find someone to stay with the person. Never leave the individual alone.

Expedite

Get help immediately.

SEXUAL-ASSAULT PREVENTION AND RESPONSE PROGRAM

The Sexual-Assault Prevention and Response Program reinforces the Army's commitment to eliminate incidents of sexual assault through a comprehensive policy that centers on awareness and prevention, training and education, victim advocacy, response, reporting, and accountability. Army policy promotes sensitive care and confidential reporting for victims of sexual assault and accountability of perpetrators.

The Army is committed to ensuring that victims of sexual assault are protected; treated with dignity and respect; and given support, advocacy, and care. Army policy strongly supports effective command awareness and prevention programs, and law-enforcement and criminal-justice activities that maximize accountability and prosecution of sexual-assault perpetrators. To achieve these dual objectives, the Army encourages complete reporting of sexual assaults to activate both victims' services and accountability actions. The Army recognizes that victims may see the requirement for complete reporting of sexual assaults as a barrier to access services when they do not want command or law-enforcement involvement. In these cases, a "confidential-reporting" option must be offered.

All leaders are responsible for developing a strategic plan that incorporates all aspects of the Sexual-Assault Prevention and Response Program beginning with prevention and advocacy and ending with holding perpetrators accountable for their behavior. AR 600-20, chapter 8, provides more information. Sexual assault negatively affects Soldiers and civilian employees and compromises readiness.

<http://www.per.hqusareur.army.mil/sexualassault/>

USEFUL WEBLINKS

<http://www.hooah4health.com/deployment/default.htm>

<http://www.military.com>

<http://www.myarmylifetoo.com/skins/malt/home.aspx?AllowSSL=true>

<http://www.hqusareur.army.mil>

<http://www.imcom-europe.army.mil/sites/local/>

<http://www.militaryonesource.com/skins/MOS/home.aspx>

HELPFUL INFORMATION

We often assume that those most in need are aware of the valuable programs and services that can help. This, however, is not always the case. The following website provides resource guides that list services, programs, and telephone numbers of support agencies available in each USAG in the Army in Europe as well as other useful information and weblinks that leaders can use to help Soldiers, civilians employees, and Family members:

<http://www.per.hqusareur.army.mil/postreintegration/index.htm>

Leaders must make every effort to understand and recognize the problems and symptoms of post-reintegration stress and share this information with subordinates. Leaders must also foster a command climate in which problems are recognized early and appropriate support is provided without judgment on the individual needing assistance. It is through the untiring dedication and attention of leaders that we will support the “human dimension” recovery of all Soldiers, civilian employees, and Family members and remain ready and capable to execute *Any Mission, Anywhere.*

GLOSSARY

ACS	Army Community Service
AWOL	absent without leave
DSN	Defense Switched Network
LIFE	local help, inform, find, expedite
LWOP	leave without pay
OCONUS	outside the continental United States
PTSD	posttraumatic stress disorder
USAG	United States Army garrison

