



**An Integrative Self-care Plan for
Christian Military Chaplains
Combating Traumatic Material**

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Instructions for Use

These modules were designed to be presented to Christian military chaplains, but can be adjusted for a number of other audiences. They are organized as follows: SMART Goals, Physical Fitness, Mental Fitness, Social Fitness, and Spiritual Fitness.

The modules are designed to be presented over the course of 5 weeks (one module per week), and projected to last no longer than 45 minutes per module. The training modules will be administered through the Instructional Brief models of the Armed Forces in PowerPoint slides, and will also leave room for the presenter to include personal stories or observations.

If the presenter is interested in learning more about the material covered throughout these modules, a Supporting Research section regarding the literature on the subjects has been included below. Presenters who are unfamiliar with fitness in all four domains (physical, mental, social, and spiritual) are encouraged to read that section.

These training materials were developed by Jessi Noll, an aspiring chaplain in the United States Air Force. Please contact jessinoll@gmail.com for any questions. If you would like a copy of the power point slides for the 5 training modules please email me at the address provided.

Supporting Research

This section will analyze the literature on the Armed Forces chaplain ministry, compassion fatigue, burnout, and the interconnectedness of physical, mental, social, and spiritual health. The information provided has been designed to help Christian military chaplains combat the effects of traumatic material through an integrative self-care plan. Christians are commanded to “love thy neighbour as thyself.” (Matthew 22:39)¹ While military chaplains do a great deal of loving their neighbor through the services that they provide to service members and their families, they can only give as much love as they have for themselves. This is why military chaplains need an integrative self-care and self-love plan.

Traumatic Material in the Military

The military is a harbor for traumatic experiences, many of which originate from the stressors that occur in four major environments: garrison, training exercises, deployments, and war.² General stressors within the context of garrison are similar to those of the civilian world. They include, but are not limited to: workload, Operations Tempo (OPTEMPO), lack of predictability, role stressors, interpersonal conflict, and organizational conflict.³ In addition to the occupational stressors of everyday life, military specific trainings, deployments, and war often give rise to entirely new and overwhelming stressors. Some of these can include performance concerns, group conflict, austere living conditions, boredom, family separation, uncertainty about mission objectives or rules of engagement, transitioning between deployment and home, exposure to death, mass graves and body parts,

1. All biblical references used hereafter will be extracted from the King James Version.

2. Amy Adler et al., “Military Occupational Stressors in Garrison, Training, and Deployed Environments,” (paper presented at the *NIOSH/APA Symposium for Modeling Military Stressors: The WRAIR Occupational Stress Research Program, Toronto, 21 March 2003*): 2

3. Adler, “Military Occupational Stressors in Garrison, Training, and Deployed Environments,”

4.

and extreme violence.⁴

While these stressors are inherited upon enlisting or commissioning in the Armed Forces, there are also additional stressors caused by adverse childhood and adolescent experiences prior to joining the military. According to the Centers for Disease Control and Prevention, adverse childhood experiences (ACE) are traumatic events that occur in childhood (0-17 years). The list of potential ACEs includes: experiencing violence, abuse or neglect, witnessing violence in the home or community, having a family member attempt or die by suicide, and growing up in a household with substance abuse, mental health problems, divorce, or imprisoned family members.⁵ One study showed that, compared to civilians, those with past or present military experience have higher rates of ACEs.⁶ In the same study, it was found that women with military service have a higher rate of nearly every aspect of ACE compared to civilians. Similarly, the study suggested that men with military service have a higher prevalence of most ACEs compared to civilians.⁷ This particular study indicates that a large majority of individuals who join the military do so as a means to escape chaotic or dysfunctional home environments.⁸ Additional studies have shown that there is a link between childhood trauma—specifically, physical and sexual abuse and physical neglect—and the development of chronic depressive episodes as well as posttraumatic stress disorder.

4. Adler, “Military Occupational Stressors in Garrison, Training, and Deployed Environments,” 7-8.

5. “Preventing Adverse Childhood Experiences,” Centers for Disease Control and Prevention, April 3, 2020, https://www.cdc.gov/violenceprevention/aces/fastfact.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fviolenceprevention%2Facestudy%2Ffastfact.html.

6. Anne Sadler et al., “Life Span and Repeated Violence Against Women During Military Service: Effects on Health Status and Outpatient Utilization,” *Journal of Womens Health* 13, no. 7 (October 2004): 804.

7. Vincent Felitti et al., “Relationship of Childhood Abuse and Household Dysfunction,” *American Journal of Preventive Medicine* 14, no. 4 (May 1998): 246.

8. Sadler, “Life Span and Repeated Violence Against Women During Military Service: Effects on Health Status and Outpatient Utilization,” 809.

der (PTSD).^{9,10} According to these studies, many of those who enlist or commission in the Armed Forces are already traumatized, and are therefore more susceptible to mental, physical, social, and spiritual distress before they are even exposed to military related trauma.

The Armed Forces Chaplain Ministry

Chaplains have been an integral part of the United States military since General George Washington requested them to minister to continental army soldiers in 1775.¹¹ On that date, July 29, 1775, the Continental Congress established the rate of pay for chaplains at \$20 a month, the same wage as a captain in the infantry.¹² While \$20 per month far exceeded the normal working man's income during that time, General Washington wrote John Hancock, the president of the Congress, and said:

I have long had it on my mind to mention to Congress, that frequent applications had been made to me, respecting the Chaplains pay—which is too Small to encourage men of Abilities—Some of them who have Left their flocks, are obliged to pay the parson acting for them, more than they receive—I need not point out the great utility of Gentlemen whose Lives & Conversation are unexceptionable, being employed for that Service, in this Army, there are two ways of making it worth the attention of Such—one is, an advancement of their pay, the other, that one Chaplain be appointed to two Regiments, this Last I think may be done without inconvenience I beg Leave to recommend this matter to

9. Janneke E. Wiersma et al., "The Importance of Childhood Trauma and Childhood Depression in Adults," *Journal of Clinical Psychiatry* 70, no. 7 (July 2009): 984.

10. Rachel Yehuda, Sarah Halligan, and Robert Grossman, "Childhood Trauma and Risk for PTSD: Relationship to Intergenerational Effects of Trauma, Parental PTSD, and Cortisol Excretion," *Development of Psychopathology* 13, no. 3 (Summer 2001): 733.

11. Silvester Moody, *The Chief of Chaplains: Strategic Roadmap: Connecting Faith, Service, and Mission* (Washington, D.C.: Department of the Army, 2017), 10. http://www.chapnet.army.mil/usachcs/pdf/chaplain_roadmap.pdf.

12. George Washington, "Journals of the Continental Congress, 1774–1789," (1775), 220.

Congress whose Sentiments hereon, I Shall impatiently expect.¹³

General Washington clearly recognized the need for “men of abilities” to serve as chaplains in his Army. One specific ability required of chaplains today is now recognized as pastoral care. Pastoral care includes providing spiritual-based care, faith-based counseling, and crisis intervention counseling. These skills provide servicemembers and their dependents with opportunities to strengthen their resilience and make a greater connection between themselves and their concept of a higher power.¹⁴

Spiritual-based care, focused on soul curing rather than problem solving, is described as “Listening Presence.”^{15, 16} Understandings and definitions of spirituality differ extensively. Similarly, definitions of spiritual needs and spiritual-based care are vast and divergent. While some see spiritual needs as those areas involved with creativity, others may see them as the arts, psycho-social needs, mental health and social systems, and humankind’s longing to be in the right relationship with God.¹⁷ In spite of such variances, all people experience three basic spiritual needs: (1) to be loved and to love in return, (2) to experience forgiveness and extend it to others, (3) to find meaning and purpose in life and hope for the future.¹⁸ One approach suggests that the most natural approach to facilitating an environment as a spiritual caregiver in which others’ spiritual needs can be met is to simply talk to the person with their three spiritual needs in mind. Such an

13. George Washington, Letter to John Hancock, 31 December 1775.

14. Department of the Air Force, *Planning and Organizing*.

15. Peter L. VanKatwyk, *Spiritual Care Therapy: Integrative Perspectives* (Waterloo, Ontario: Wilfrid Laurier University Press, 2003), 49.

16. Ramakrishnan Parameshwaran, “Theory and Practice of Chaplain’s Spiritual Care Process: A Psychiatrist’s Experiences of Chaplaincy and Conceptualizing Trans-personal Model of Mindfulness,” *Indian Journal of Psychiatry* 57, no. 1 (February 2015): 21.

17. Judith Shelly, *Spiritual Care: A Guide for Caregivers* (Downers Grove, Illinois: IVP Books, 2000), 29.

18. Shelly, *Spiritual Care*, 30.

approach could entail asking about relationships with church, family, neighbors and God, challenging that which may be preventing a person from offering or receiving forgiveness, listening intently for references to feelings of guilt or God's punishment, discussing hopes, dreams and goals, as well as encouraging thoughtful recollection of significant past events and relationships that build their individual spiritual construct.

According to Alan Wolfelt, this spiritual-based care can be administered in a series of steps. The steps in the spiritual care model developed by Wolfelt are as follows: (1) actively listen to emotional pain and struggle; (2) become aware of how the patient's story triggers personal emotional memories; (3) remain mindfully aware but without "suffering" from them; (4) avoid cognitive calculations, assumptions, and judgements about decisions and behaviors; (5) focus on empathizing through verbal and nonverbal cues; (6) facilitate an environment in which the patient feels safe enough to share painful emotions and stories, which enables them to become more intrapersonally aware; (7) resist the urge to push the patient into a "treatment plan" to rid themselves of their pain and suffering.¹⁹ All in all, spiritual-based care is the art of empathetic listening as a means to help people reinstate their faith and self-worth, reconstruct relationships, and reintegrate with the community.²⁰ Such an ability to understand and share the feelings of another attunes the chaplain to the inner world of feelings, thoughts, and yearnings of the individual.²¹ In other words, as Wolfelt's seven steps are taken, the chaplain providing care develops an interpersonal ability to step into the world of others, understand what they are feeling and what they may need, and then respond in caring

19. Alan D. Wolfelt, *Companioning the Bereaved: A Soulful Guide for Counselors and Caregivers* (Chicago, Illinois: Companion Press, 2005),

20. Timothy J. Hodgson and Lindsay B. Carey, "Moral Injury and Definitional Clarity: Betrayal, Spirituality and the Role of Chaplains," *Journal of Religion and Health* 56, no. 4 (August 2017): 1124.

21. VanKatwyk, *Spiritual Care Therapy*, 25.

ways.²²

Providing spiritual-based care does not come without a cost, however. If providing spiritual-based care requires empathy and developing empathy requires vulnerability, ‘feeling with’ another person opens the caregiver to the possibility of experiencing the same pain. A compassionate presence demands lending others strength until they can acquire their own. As a result, the caregiver often can feel drained, rejected, criticized and inadequate.²³

Historically speaking, the objective of faith-based care was to guide and reconcile others to God so that their souls could be received unto salvation.²⁴ This objective, however, is subject to change depending on how a minister defines their vocation. While some chaplains may find their niche in promoting their own faith, others may see themselves as, first and foremost, a pastoral caregiver. The latter is fueled by empathy and typically overrides other functions of ministry such as proselytization. As a result, the caregiver is able to rid themselves of truth claims in their tradition, biases, personal morals and values, and other exclusive beliefs, allowing them to fully respect and attend to other’s spiritual needs.²⁵

Moreover, and similar to that of spiritual-based care, faith-based counseling is an art of empathetic listening. Such listening is used to walk in the shoes of another along their faith journey in order to convert them to their own ideas of saving beliefs (e.g., in Jesus, the five pillars of Islam, the eightfold path, Monotheism, samsara, etc.). This principle can be modeled in a number of ways, but all start with using

22. Carrie Doehring, “Teaching Theological Empathy to Distance Learners of Intercultural Spiritual Care,” *Pastoral Psychology* 67 (April 2018): 461.

23. Shelly, *Spiritual Care*, 81.

24. William Clebsch and Charles Jaekle, *Pastoral Care in Historical Perspective: An Essay with Exhibits* (Englewood Cliffs, N.J.: Prentice-Hall), 127–133.

25. Doehring, “Teaching Theological Empathy,” 463.

spiritual practices to enhance emotional regulation.²⁶ Such practices can cause others to question their religious experiences and the spiritual exercises that facilitate them. Learning spiritual practices, such as prayer, allow others to discover more personalized spiritual beliefs that lead to the discovery of deeper meanings behind themselves, the world, and the divine.²⁷ One study on the relevance of finding new spiritual practices as part of pastoral care suggests the following on the matter:

[Individuals] can reclaim or find new spiritual practices that connect with a sense of goodness in themselves, the world, and a transcendent dimension or being . . . By exploring and using spiritual practices that help them become emotionally regulated in the face of suffering, [individuals] will be more able to ‘resist the instinct to flee suffering’ and ‘to welcome the knowledge that the mystery of suffering is frequently impenetrable and that the humbling and vulnerable practices of silence, wondering, and waiting are the requirements of presence.’²⁸

Another study that analyzes the effects of faith-based counseling is a review of the practice of theological empathy.²⁹ This transpires as caregivers place themselves “in the shoes of those theologically different from them and appreciate how their lived theology can be a home for them in troubled, challenging times.”³⁰ Doehring suggests that lived theology means an assortment of values, beliefs, and practices that ‘make sense’ emotionally and spiritually.³¹ One’s lived theology comes to life as a caregiver uses it, together with theological empathy, to effectively mentalize and conceive the forms of theological or spiri-

26. Doehring, “Teaching Theological Empathy,” 464.

27. Doehring, “Teaching Theological Empathy,” 465.

28. Doehring, “Teaching Theological Empathy,” 465.

29. Carrie Doehring, *The Practice of Pastoral Care: A Postmodern Approach* (Louisville: Westminster John Knox, 2015), 18.

30. Doehring, *The Practice of Pastoral Care*, 101.

31. Doehring, *The Practice of Pastoral Care*, 4.

tual systems arising from the stress-based emotions of an individual.³² This means that the caregiver imagines themselves living the theological or spiritual system of another, and invites the emotions that come with that system in full force.³³ For example, if a person who loses their child at birth wonders what they did to ‘deserve’ such suffering, the chaplain providing spiritual-based care might wonder about the beliefs and emotions that give rise to this question.

Another facet of theological empathy entails perspective-taking. Chaplains visualize how others could experience life-giving and life-limiting beliefs and values pertaining to suffering and the divine such as racism, sexism, classism, and other interacting social oppressions that contribute to one’s view of God and religious authorities.³⁴ This approach to faith-based care encompasses compassion, reveals shame, fear, or anger, and co-creates intentional values, beliefs, and ways of coping that derive from the spiritual and religious practices of the individual seeking counsel.³⁵

The practice of faith-based care often results in chronic or long term stress and tends to diminish the caregiver’s cognitive resources needed for self-care and emotional regulation.³⁶ As such, and similar to that of spiritual-based care, a chaplain’s faith-based care does not come without a cost. After embracing the faith-based needs and beliefs of others, walking in their shoes, and internalizing the life-giving and life-limiting experiences pertaining to their suffering and views of God, a chaplain may lose their ability to provide adequate care.

32. Doehring, “Teaching Theological Empathy,” 465.

33. Doehring, “Teaching Theological Empathy,” 465.

34. Doehring, “Teaching Theological Empathy,” 465–466.

35. Carrie Doehring, “Resilience as the Relational Ability to Spirituality Integrate Moral Stress,” *Pastoral Psychology* 64, no. 5 (2013): 638.

36. Elizabeth Segal et al., *Assessing Empathy* (New York: Columbia University Press, 2017), 92–96.

Crisis intervention counseling, or pastoral crisis intervention, depicts the practical incorporation of psychological crisis intervention into pastoral care.³⁷ In order to fully understand the chaplain's role in crisis intervention counseling, the term crisis must be understood. A crisis constitutes an immediate and intense response to an event that disturbs one's holistic equilibrium, disrupts one's coping mechanisms, and results in significant amounts of distress and/or functional impairment.³⁸ Research suggests that anyone who serves in a capacity of providing pastoral care will inevitably encounter acute psychological and/or spiritual crisis.^{39,40,41,42,43} Such crises encounters can emerge in a variety of diverse settings including, but not limited to: houses of worship, hospitals, nursing homes, funeral homes or gravesites, at the scenes of accidents in both garrison and deployment settings, or even in formalized and safe office environments.⁴⁴ Whether the crises present themselves as tactile and tangible threats to one's safety and security, or existential concerns regarding self-identity, human relationships, or affiliative bonds with the divine, "skills in psychological triage, basic crisis intervention, and finally, a familiarity with other supportive resources, including psychological, psychiatric, and even

37. George Everly, "Pastoral Crisis Intervention: Toward a Definition," *International Journal of Emergency Health and Human Resilience* 2, no. 2 (Spring 2000): 69.

38. George Everly and J.T. Mitchell, *Critical Incident Stress Management: A New Era and Standard of Care in Crisis Intervention* (Maryland: Ellicott City, 1999), 1–2.

39. Everly, "Pastoral Crisis Intervention," 70.

40. Donald Wiger and Kathy Harowski, *Essentials of Mental Health Practice Series: Essentials of Crisis Counseling and Intervention* (New Jersey: John Wiley & Sons Inc., 2003), 71-74.

41. Jonathan Sandoval, "Conceptualizations and General Principles of Crisis Counseling," in *Handbook of Crisis Counseling Intervention and Prevention*, ed. Jonathan Sandoval (New Jersey: Lawrence Erlbaum Associates, 2002), 3–8.

42. Brenda Stevens and Lynette Ellerbrock, "Crisis Intervention: An Opportunity to Change," *ERIC Clearinghouse on Counseling and Student Services* (1995): 3–4.

43. Doehring, *The Practice of Pastoral Care*, 7, 8, 108, 124, 139.

44. Everly, "Pastoral Crisis Intervention," 71.

other pastoral resources” are imperative.⁴⁵ In fact, and according to some mental health experts,

following a traumatic [e]vent, crime or disaster, people may feel helpless, confused, and undergo emotional shock. Victims’ and families’ experiences in the critical hours immediately following a traumatic event strongly influence how these tragedies will impact the rest of their lives. Those receiving effective support are more likely to eventually resume healthy and productive lives, while those who do not are at higher risks of mental and physical health disorders.⁴⁶

As is illustrated above, providing solutions and meeting the needs of others through crisis intervention counseling can mean the difference between resuming healthy and productive lives following a traumatic event, or falling subject to mental and physical health disorders.

Howard Clinebell, the pioneer of a pastoral counseling approach that combines psychotherapy and religion, suggests that healing from crises can be found through the utilization of psychological, spiritual, and theological resources.^{47,48} In using such resources, the pastoral counselor seeks to achieve three primary objectives in their efforts to attend to the needs of others experiencing crisis: (1) stabilize symptoms of distress; (2) mitigate symptoms of distress; (3) restore normal function of adaptive and coping behaviors or facilitate access to further help and support.⁴⁹ However, regardless of whether these three

45. Everly, “Pastoral Crisis Intervention,” 70.

46. “Crisis Response Team Fact Sheet,” Los Angeles Police Department, December 11, 2020, http://www.lapdonline.org/home/content_basic_view/23491.

47. Howard Clinebell, *Basic Types of Pastoral Care and Counseling: Resources for the Ministry of Healing and Growth* (Nashville: Abingdon Press, 1966), 111, 137.

48. “Howard Clinebell Jr., 83; Minister Advocated Combining Religion, Psychotherapy to Treat Addiction,” *Los Angeles Times*, May 14, 2005, <https://www.latimes.com/archives/la-xpm-2005-may-14-me-clinebell14-story.html>.

49. Raymond Flannery and George Everly, “Crisis Intervention: A Review,” *International Journal of Emergency Health and Human Resilience* 2, no. 2 (Spring 2000): 119–125.

objectives are obtained, crisis carers may be subject to particular risks of adverse mental, physical, social, and spiritual effects.^{50,51,52,53,54,55}

All in all, research suggests that those who work in caregiving professions and are constantly exposed to traumatic and stressful experiences of others are at high-risk to the consequences of secondary trauma, whether that be compassion fatigue, burnout, or other side effects that come with treating the traumatized.⁵⁶ Moreover, military chaplains are at an even greater risk than other caring professions due to the wide medley of traumatic material that is presented just by nature of the military in both deployment and garrison settings. They provide spiritual-based care, faith-based counseling, and crisis intervention counseling to those who struggle with deployment cycles and war, post traumatic stress disorder (PTSD), “transitions with families and friends, separations and reunions, marital instability, divorce,

50. Jill Benson and Karen Magraith, “Compassion Fatigue and Burnout: The Role of Balint Groups,” *Australian Family Physician* 34, no. 6 (June 2005): 497–498.

51. Joseph Boscarino, Charles Figley, and Richard Adams, “Compassion Fatigue Following the September 11 Terrorist Attacks: A Study of Secondary Trauma Among New York City Social Workers,” *International Journal of Emergency Mental Health* 6, no. 2 (July 2004): 57–66.

52. Sara Fry et al., “Development of a Model of Moral Distress in Military Nursing,” *Nursing Ethics: An International Journal for Health Care Professionals* 9, no. 4 (July 2002): 373–387.

53. Jonathan Golden, “Spirituality as a Predictor of Burnout Among United Methodist Clergy: An Incremental Validity Study,” *Dissertation Abstracts International: Section B: The Sciences & Engineering* 63, no. 1B (June 2002): 576.

54. Laurie Pearlman, “Self-care for Trauma Therapists: Ameliorating Vicarious Traumatization,” in *Secondary Traumatic Stress: Self-care Issues for Clinicians, Researchers, and Educators*, ed. Beth Stamm (Baltimore: Sidran Press, 1995), 107–110.

55. George Zimmerman and Wesley Weber, “Care for the Caregivers: A Program for Canadian Military Chaplains after Serving in NATO and United Nations Peacekeeping Missions in the 1990s,” *Military Medicine* 165, no. 9 (September 2000): 687–690.

56. Charles Figley, “Compassion Fatigue: Toward a New Understanding of the Costs of Caring,” in *Secondary Traumatic Stress: Self-care Issues for Clinicians, Researchers, and Educators*, ed. B.H. Stamm (Derwood, Maryland: The Sidran Press, 1995), 3–4.

mestic abuse, and suicide . . .”^{57,58,59,60} In providing such care, counseling, and intervention, military chaplains are highly susceptible to compassion fatigue and burnout, and stand in need of a spiritual fitness plan tailored towards compassion fatigue and burnout prevention and healing.

Compassion Fatigue

Carla Joinson was the first to bring the idea of compassion fatigue to light. In 1992, while investigating the nature of burnout amongst nurses in the emergency department, she noticed that many of the nurses had lost their “ability to nurture.”⁶¹ Joinson never formally coined the term and, in 1995, it was officially adopted by Charles Figley as a more clear term for what was then called secondary traumatic stress disorder.⁶² Figley defined compassion fatigue “as a state of exhaustion and disfunction—biologically, psychologically, and socially—as a result of prolonged exposure to compassion stress and all that it evokes”.⁶³ He argued that such exhaustion presents itself as secondary trauma or ‘shared trauma’ and that the helpers experience significant changes in their lives that can be harmful, especially their

57. Vance P. Theodore, “Care Work - Factors Affecting Post 9/11 United States Army Chaplains: Compassion Fatigue, Burnout, Compassion Satisfaction, and Spiritual Resiliency,” (PhD diss., Kansas State University, 2011), 4–5.

58. Lisa Pawloski, “Coping with Military Deployment: the CARES Resource for Couples,” (PhD diss., Regent University, 2005), 2-14. file:///home/chronos/u-ccc8101c0a2af913aac-08b7ad035d64ab16ba74a/MyFiles/Downloads/Coping_with_military_deploymen.pdf.

59. Danielle Rentz et al., “Family Violence in the Military: A Review of the Literature,” *Trauma Violence Abuse* 7, no. 2 (April 2006): 94.

60. Casey Taft et al., “An Examination of Family Adjustment Among Operation Desert Storm Veterans,” *Journal of Consulting and Clinical Psychology* 76, no. 4 (August 2008): 648–656.

61. Carla Joinson, “Coping with Compassion Fatigue,” *Nursing* 22, no. 4 (April 1992): 119.

62. Siedine Knobloch Coetzee and Hester C. Klopper, “Compassion Fatigue Within Nursing Practice: A Concept Analysis,” *Nursing & Health Sciences* 12, no. 2 (June 2010): 240.

63. Charles Figley, ed., *Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized* (New York: Brunner-Routledge, 1995), 253.

ability to help others.⁶⁴

While compassion fatigue is most commonly found in military health settings from physically caring for people exposed to combat related trauma, it can also be found in caregivers who closely assimilate and absorb a patient's emotional, psychological, and spiritual trauma in training or garrison settings.^{65,66}

In one study where 13,494 adults completed a questionnaire about adverse childhood experiences (ACEs), more than half of the respondents reported at least one ACE and one-fourth reported two or more ACEs. Those who reported to have had four or more traumatic experiences during their childhood were up to twelve times more likely to experience alcoholism, drug abuse, depression, and suicidal ideation, four times more likely to develop smoking or poor health habits, have fifty or more sexual intercourse partners, and 1.6 times more likely to be physically inactive and severely obese.⁶⁷ This study suggests that there is a definite positive correlation between childhood trauma and various forms of mental, physical, and spiritual ailments. With this in mind, another study shows that individuals who are currently serving or have served in the military have a much higher prevalence of ACEs compared to those with no prior service.

It was inferred in the same study that the reasoning behind such high rates of ACEs amongst military personnel is that the military is an escape route for many individuals who have experienced adver-

64. Figley, *Those Who Treat the Traumatized*, 253-254.

65. Frank McHolm, "Rx for Compassion Fatigue," *Journal of Christian Nursing* 23, no. 4 (February 2006): 13-14.

66. Kerry Clifford, "Who Cares for the Carers? Literature Review of Compassion Fatigue and Burnout in Military Health Professionals," *Journal of Military Veterans' Health* 22, no. 3 (September 2014): 54.

67. Vincent Felitti et al., "Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults," *American Journal of Preventive Medicine* 14, no. 4 (1998): 250.

sity during their childhood and adolescent years.⁶⁸ As such, Armed Forces chaplains are at high risk of exposure to traumatic material via service members who have ACEs and arrive already carrying the common results of their trauma (i.e. alcoholism, drug abuse, depression, suicidal ideation, poor health habits, multiple sex partners, physical inactivity, and obesity). Such exposure to ACEs in counseling and intervention environments, especially for prolonged and extended periods of time, is conducive towards the development of compassion fatigue.

When chaplains experience compassion fatigue from frequent and vicarious exposure to combat related trauma, emotional, psychological, and spiritual distress, and adverse childhood and adolescent experiences, a chaplain may experience a number of potential negative side effects. Theodore explained, it is the cost of caring.⁶⁹ Such a cost is accompanied by a number of symptoms such as emotional and physical exhaustion, withdrawal, hesitancy to discuss one's own problems, and high levels of stress and irritability both inside and outside of the workplace.⁷⁰ Figley also notes that a lessening of the desire, ability, and energy to feel and care for others due to compassion fatigue can induce feelings of "tension, preoccupation, anxiety, and avoidance."⁷¹

Compassion fatigue may be crippling to any military chaplain who has to pay the price of caring for others. In fact, some literature demonstrates that compassion fatigue has the unfortunate power to

68. John Blosnich et al., "Disparities in Adverse Childhood Experiences Among Individuals with a History of Military Service," *JAMA Psychiatry* 71, no. 9 (May 2014): 1041–1048.

69. Theodore, "Care Work - Factors Affecting Post 9/11 United States Army Chaplains: Compassion Fatigue, Burnout, Compassion Satisfaction, and Spiritual Resiliency," 42.

70. Charles Figley, "Compassion Fatigue: Psychotherapists' Chronic Lack of Self Care," *Journal of Clinical Psychology* 58, no. 11 (October 2002): 7.

71. Figley, "Compassion Fatigue," 7.

“disrupt, dissolve, and destroy careers, families, and even lives...”⁷²

Burnout

The term burnout was first conceptualized by Freudenberger in 1975.⁷³ However, the concept of burnout in the 1970s was neither universally accepted nor given a standardized definition. During the nascent years of its theoretical development, different people used the term to mean different things.⁷⁴ As such, there was little to no conversation about it being a problem in the workplace, let alone finding solutions.⁷⁵ It was not until 1982 that Christina Maslach developed the theoretical postulation of burnout as a condition of “emotional exhaustion, depersonalization, and reduced personal accomplishment that occur among individuals who do people work.”⁷⁶ These psychological implications, more commonly referred to as the three core dimensions of burnout, are “exhaustion, depersonalization (a distant attitude towards the job), and reduced professional efficacy.”⁷⁷

Exhaustion is known as the underlying and defining symptom of burnout. Some have even argued that the other two aspects of burnout are irrelevant and unnecessary in meeting the criterion for

72. Sherry Showalter, “Compassion Fatigue: What is it? Why Does it Matter? Recognizing the Symptoms, Acknowledging the Impact, Developing the Tools to Prevent Compassion Fatigue, and Strengthen the Professional Already Suffering From the Effects,” *American Journal of Hospice and Palliative Medicine* 27, no. 4 (June 2010): 240.

73. Freudenberger, “The Staff Burnout Syndrome in Alternative Institutions,” *Psychotherapy: Theory, Research, and Practice* 12, no. 1 (1975): 73–82.

74. Christina Maslach et al., “Job Burnout,” *Annual Review of Psychology* 52 (February 2001): 402.

75. Maslach et al., “Job Burnout,” 403.

76. Christina Maslach and Susan Jackson, “Burnout in Health Professions: A Social Psychological Analysis,” in *Social Psychology of Health and Illness*, ed. Glenn Sanders and Jerry Suls (Hillsdale, New Jersey: Lawrence Erlbaum Associates, 1982), 3.

77. Maslach et al., “Job Burnout,” 402–403.

a proper diagnosis.⁷⁸ Exhaustion in the workplace is typically manifested through the basic stress response and overwhelming feelings of powerlessness. This combination of exhaustion and powerlessness can induce one to emotionally and cognitively distance themselves from their work in hopes to better manage its strenuous labor.⁷⁹ Some studies suggest that exhaustion is the commencement of all other implications of burnout and can lead care providers to engage in other unhealthy coping mechanisms such as cynicism and feelings of inefficacy.⁸⁰ Therefore, the remaining two implications, depersonalization and reduced professional efficacy, in addition to exhaustion, are imperative to the onset of burnout.

Maslach indicates that “depersonalization is an attempt to put distance between oneself and service recipients by actively ignoring the qualities that make them unique and engaging people,” and that “their demands are more manageable when they are considered impersonal objects of one’s work.”⁸¹ Often, this sense of detachment emerges due to work overload and/or social conflict.⁸²

The third and final implication of burnout is professional inefficacy. The onset of feelings of inefficacy can be a result of a number of external difficulties such as a lack of resources to complete tasks, insufficient time, lack of requisite tools for job specifications, or absence of needed information for productivity.⁸³ In short, the person feels that their efforts are ineffective, no matter how hard they try.

In summary, while compassion fatigue is specifically related

78. Arie Shirom “Burnout in Work Organizations,” in *International Review of Industrial and Organizational Psychology*, ed. Carry Cooper and Ivan Robertson (New York: John Wiley & Sons, 1989), 25–48.

79. Maslach, “Job Burnout,” 403.

80. Christina Maslach, “Job Burnout: New Directions in Research and Intervention,” *American Psychological Society* 12, no. 5 (October 2003): 190.

81. Maslach, “Job Burnout,” 403.

82. Maslach, “Job Burnout: New Directions in Research and Intervention,” 190.

83. Maslach, “Job Burnout: New Directions in Research and Intervention,” 190.

to the demands placed on helpers with regard to their compassion, burnout arises from the cumulative impact of stress in the workplace, specifically among healthcare and other helping professionals.⁸⁴ Moreover, and although not as serious of a condition as compassion fatigue, burnout has serious psychological implications.⁸⁵ Unfortunately, research on interventions to ameliorate burnout has been limited due to the innate difficulty in designing an intervention, implementing it effectively, and finding ways to do long-term follow-up studies.⁸⁶ Nevertheless, some studies have shown that an individual-oriented approach, such as developing effective coping skills or learning deep relaxation, may help improve the effects of burnout.

Summary

Military chaplains, in their pastoral caregiving capacities, are constantly exposed to traumatic material. While providing spiritual-based care, faith-based counseling, and crisis intervention counseling for those who have experienced trauma in garrison, training, deployment, war, or pre-military settings, chaplains may fall subject to compassion fatigue and burnout.

Compassion fatigue is a result of prolonged exposure to the traumatic experiences and narrative stories of fear, pain, and suffering which inhibits the chaplain's ability to care for, listen to, and sit with the traumatized. This cost of caring is accompanied by a number of emotional and physical symptoms such as exhaustion, tension, pre-occupation, anxiety, avoidance, hesitancy to discuss one's own problems, and high levels of stress and irritability both at work at home. Research suggests that healing from compassion fatigue comes

84. Ayala Pines and Christina Maslach, "Characteristics of Staff Burnout in Mental Health Settings," *Hospital & Community Psychiatry* 29, no. 4 (April 1978): 233–237.

85. Jason Newell and Gordon MacNeil, "Professional Burnout, Vicarious Trauma, Secondary Traumatic Stress, and Compassion Fatigue: A Review of Theoretical Terms, Risk Factors, and Preventive Methods for Clinicians and Researchers," *Best Practices in Mental Health: An International Journal* 62, no. 2 (January 2010): 57–59.

86. Maslach, "Job Burnout: New Directions in Research and Intervention," 192.

through implementing and sticking to a self-care plan.

Burnout is different from compassion fatigue because it stems from the accruing impact of stress in the workplace, not just the specific demands placed on helpers with regard to their compassion for others. In a military chaplain setting, burnout is a state of exhaustion, depersonalization, emotional distance from service members, and feelings of incompetence or lack of personal achievement due to prolonged exposure to emotional stress in the workplace. Similar to compassion fatigue, burnout has several implications such as added familial stress, weariness, a distant attitude towards the job, and inefficiency. Finally, and similar to healing from compassion fatigue, burnout is best ameliorated through practicing self-care and developing effective and healthy coping skills.

Can someone truly give that which they do not have? Military chaplains who have lost the ability and desire to care for others, or developed a distant attitude towards pastoral care due to compassion fatigue and burnout, are in no place to give love unless they practice self-love. This is why military chaplains are in need of an integrative self-care plan to prevent and treat compassion fatigue and burnout.

It is requisite that such a self-care plan and mission to love one's self addresses the four components of holistic health: physical, mental, social, and spiritual. Each of these four components must have an integrative fitness approach. This means incorporating flexibility, cardiorespiratory, core, balance, and resistance initiatives in order to strengthen and/or restore full functionality of body, mind, relationships, and spirit.⁸⁷

87. Michael Clark et al, eds., *NASM Essentials of Personal Fitness Training* (Burlington, Massachusetts: Jones and Barlett Learning, 2018), 8. The integrative Self-care Plan for Christian Military Chaplains is a holistic approach to physical fitness modules provided by the National Academy of Sports Medicine (NASM). NASM uses a progressive approach system made up of seven parts: flexibility, cardiorespiratory, core, balance, plyometric, speed, agility, and quickness training, and resistance training. An integrative Self-care Plan for Christian Military Chaplains has been developed based off of these parts.

The following five training modules take this into account, that is, an integrative self-care plan due in large measure to the traumatic material that chaplains as careworkers manage.

Five Training Modules—An Integrative Self-care Plan for Christian Military Chaplains Combating Traumatic Material

As already explained, five modules were developed as training materials for a self-care plan for Christian Military Chaplains. They are:

Module 1: SMART Goals

Module 2: Physical Fitness

Module 3: Mental Fitness

Module 4: Social Fitness

Module 5: Spiritual Fitness

These modules are designed to be presented over the course of 5 weeks (one module per week), and projected to last no longer than 45 minutes. The training modules will be presented as power point slides with suggested written content. Modules will also leave room for the presenter to include personal insights.

After reading the supporting research section, a chaplain facilitator should be able to present the following training modules. As already suggested in the information provided, chaplains, due to the nature of their carework, can suffer from aspects of compassion fatigue, burnout, and other conditions that can affect their physical, mental, social, and spiritual readiness.

It is the author's desire that these training modules can help lessen these effects and also provide suggestions for an integrative self-care plan that will help chaplains in their ministry to others and self.

The following five modules take the content from the resource section and imply the inferred information (supporting research) to the following slides.

The model on page 21 integrates the training modules as a multifaceted self-care plan composed of five modules that incorporate training in 5 areas: (1) flexibility, (2) cardiorespiratory, (3) core, (4) balance, and (5) resistance that will be explained as part of the training modules briefs.

DOMAIN				
Training Initiative	Physical	Mental	Social	Spiritual
Flexibility	The ability to move a joint through its complete range of motion	The ability to appropriately adjust one's behavior according to a changing environment	The ability to reach out to others for help	The ability to expand and stretch the human spirit
Cardio-respiratory	The ability of the circulatory and respiratory systems to provide long-term supplies of oxygen-rich blood to skeletal muscles during sustained physical activity	The ability of the brain to supply long-term calming-enriched thoughts, experiences, and senses	The ability of relationships to supply long-term interpersonal support	The spirit's ability to accept the boundless grace of Jesus
Core	The body's center of gravity and the point from which all forces originate	The mind's center of cognition and the point from which all thought, experience, and sense originate	Empathy is a relationship's center of connection and the point from which intimacy originates	Jesus Christ, the spirit's center of enablement and the point from which all grace originates
Balance	When the body is in equilibrium while moving and changing directions under various conditions	When the mind is in equilibrium while moving and changing directions under various condition	When relationships are in harmony while under various conditions	When the spirit is at peace under various conditions

The definitions under the columns physical, menal, social and spiritual are cited in the slides in training modules 1–5.

Module 1: SMART Goals

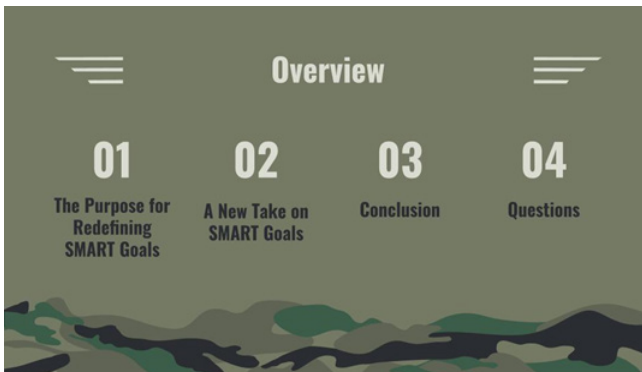
Slide #1: Introduction



Note: Use this slide to introduce yourself and discuss the purpose of the presentation.

I am Chaplain _____ and this is the first of five training modules on An Integrative Self-care Plan for Christian Military Chaplains. This first training module will focus on SMART goals and how to best approach the remaining four modules in order to become more physically, mentally, socially, and spiritually fit.

Slide #2: Overview



Note: Use this slide to give a brief overview of the content that will

be discussed throughout the presentation.

First, we will discuss the purpose of SMART goals and their significance in approaching An Integrative Self-care Plan for Christian Military Chaplains. Next, we will analyze each individual aspect of SMART goals. We will summarize what we have learned today and then open it up for questions at the end. Questions will also be entertained throughout.

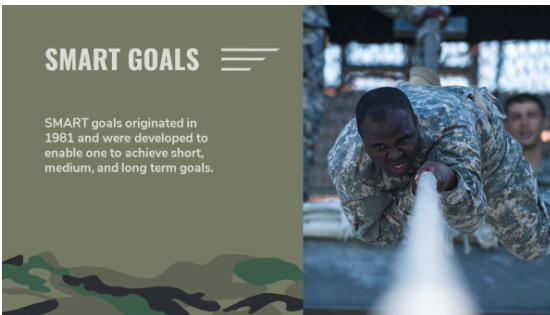
Slides #3: Purpose



Note: Use the following three slides to discuss the history of SMART goals as well as the downfalls of SMART goals today.

Now we will discuss the purpose of redefining SMART goals.

Slide #4: Purpose



Note: Use this slide to discuss the origin of SMART goals.

SMART goals first took flight in 1981 when George Doran, Arthur Miller, and James Cunningham published an article titled, “There’s a S.M.A.R.T. way to write management goals and objectives.”¹ They have had an immense impact on the world today when it comes to reaching and achieving goals.

Slide #5: Purpose

Note: Use this slide to go over the current SMART goals approach and what each letter of the acronym means.



The “S” stands for “Specific.” This means that one targets a specific area of improvement for a specific purpose. While specificity is an integral part of military life, especially when it comes to rules of engagement, uniform protocols, and for chaplains, strict adherence to confidentiality, specificity in some areas can set us up for failure. Specificity, when it comes to fitness, can lead to either burnout or underachieving.

The “M” stands for “Measurable.” This means that one can quantify their goal, or at least demonstrate progress in some way, shape, or

1. George Doran, “There’s a S.M.A.R.T. Way to Write Management’s Goals and Objectives,” *Management Review* (AMA Forum) 70, no. 11 (November 1981): 35-6. The SMART model is redefined for this self-care plan for Christian Chaplains. The original SMART goals have been adapted towards a military audience to a spiritual aspect as it pertains to wholistic fitness.

form. This criteria for goal setting is useful in most settings. However, when considering the existential and subjective nature of mental, social, and spiritual health, measurability becomes irrelevant.

The “A” stands for “Assignable,” meaning that there are clear specifications as to who will seek to achieve the goal. This is somewhat of a given considering that chaplains who are implementing the integrative self-care plan will be doing it for themselves.

The “R” stands for “Realistic” and is used to ensure that goals are realistic and achievable. This aspect of goal setting is too focused on a desired outcome, as opposed to the goal being a means to reach an outcome. Many will find themselves setting goals that are realistic and achievable but without a means to reach the goal or even start working towards it.

Finally, the “T” stands for “Time-related” and gives specifications concerning when the desired result(s) will be achieved.² While this may prove to be beneficial for short-term goals, it may be much more difficult to set time-related goals when it comes to holistic health because it is ongoing and can always improve. In other words, it is difficult to set a time-related goal for a life-long endeavor.

Overall, the original SMART goals are effective in many ways, but they fall short in many ways as well. For Christian military chaplains, a new take on SMART goals is necessary to provide them with an effective approach to reaching holistic health goals.

2. Doran, “There’s a S.M.A.R.T. Way to Write Management’s Goals and Objectives,” 35–36.

Slide #6: Introduce SMART Goals

Note: Use this slide to set the stage for redefining SMART goals.



In order to help chaplains, obtain ideal levels of fitness in all four categories of holistic health, physical, mental, social, and spiritual, the original 1981 SMART goals have been redefined.

Slide #7: Redefining SMART Goals

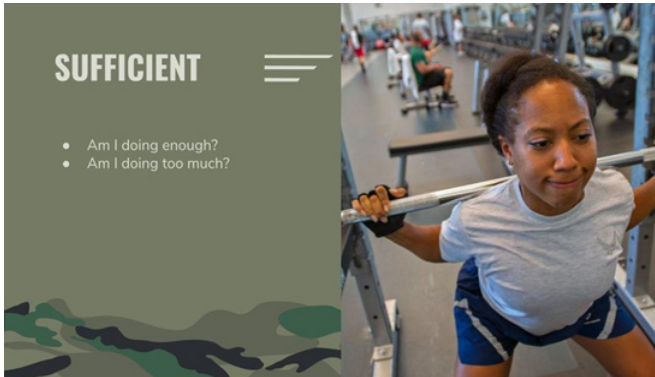
Note: Use this slide to redefine SMART goals and provide a brief definition of each letter of the acronym.

[Read slide]



Slide #8: Sufficient

Note: Use this slide to better explain the S of SMART goals.



To make a goal that is sufficient is to strive to do enough to reach optimal levels of fitness but not so much so to the point where it induces burnout.

Slide #9: Applications

Note: Use this slide to discuss how making sufficient goals applies to the four domains of fitness.



Here are a few examples of questions to ask yourself when making sufficient goals in each of the four domains. [Read slide]

Slide 10: Maintainable

Note: Use this slide to better explain the M of SMART goals.

MAINTAINABLE

- Is this an initiative that I can maintain long-term?

To make a goal that is maintainable is to strive to select fitness initiatives that can be used long-term without deprivation and unrealistic expectations.

Slide #11: Application

Note: Use this slide to discuss how making maintainable goals applies to the four domains of fitness.

MAINTAINABLE

PHYSICAL	MENTAL	SOCIAL	SPIRITUAL
Can you perform this routine 5-6 times per week indefinitely? Can you live off of this diet for the rest of your life? Are you excited about implementing this initiative every day?	Can your mind maintain long-term equilibrium while under these conditions? Is using ___ for enhancing mindfulness sustainable? Can you see yourself using this mental exercise in 5, 10, or 20 years from now?	Are your relationship goals just as useful now as they will be in the future? Are you motivated to be consistent in your relationship efforts over a long period of time?	Is the intensity of your spiritual exercise too high to make it a daily commitment? Do you see yourself connecting with a Higher Power in this way long-term? Are these practices that I can imagine getting bored of?

Here are a few examples of questions to ask yourself when making maintainable goals in each of the four domains. [Read slide]

Slide #12: Adaptable

Note: Use this slide to better explain the A of SMART goals

ADAPTABLE

- Can I perform this in any location (i.e. deployment, trainings, combat zone, home, etc.)?

To make a goal that is adaptable is to strive to implement holistic fitness initiatives that can be easily altered, adjusted, and changed depending on circumstances.

Slide #13: Application

Note: Use this slide to discuss how making adaptable goals applies to the four domains of fitness.

ADAPTABLE

PHYSICAL	MENTAL	SOCIAL	SPIRITUAL
Can I adjust this plan to be implementing in diverse settings? Am I okay swaying from my regimen for a time? Is there room for change depending on where I am at and who I am with?	Can your mental exercises be practiced outside of the comfort of your home? Do you have a protocol to stay mentally fit even during crisis or change? Do you have resources to help you practice mental fitness globally?	Can your social exercises be performed even in times of stress, difficulty, and separation? Can your relationship efforts be altered depending on experiences and other externalities?	Can your spiritual practices be performed in all locations and at all times? Can your spirituality be exercised without your everyday resources? Are there spiritual tools and resources that are easily mobile and versatile for unique and diverse settings?

Here are a few examples of questions to ask yourself when making maintainable goals in each of the four domains. [Read slide]

Slide #14: Research/Revelation

Note: Use this slide to better explain the R of SMART goals.



To make a goal that is inspired by research and/or revelation is to find a path towards holistic fitness that is approved by God and personally tailored to your individual needs and likes/dislikes. There are many Christian faith groups throughout the world, and all believe in different forms of revelation. For the purposes of these training modules, the term revelation will refer to the means by which a Christian chaplain aligns his or her will with the will of God. Whether through prayer, worship, scripture study, prophetic guidance, or other religious and/or spiritual practices, revelation is an important aspect of setting and reaching goals.

Slide #15: Application

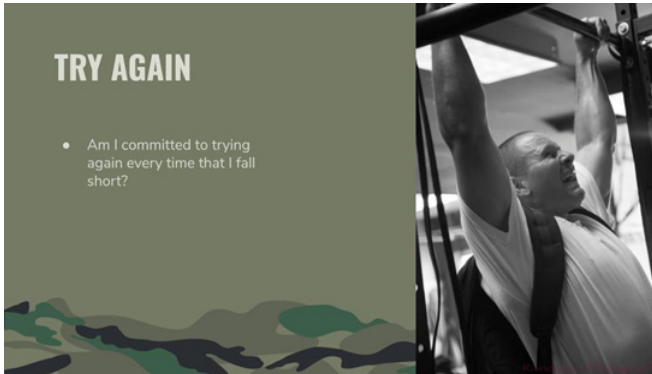
Note: Use this slide to discuss how making research/revelation based goals applies to the four domains of fitness.



Here are a few examples of questions to ask yourself when making research/revelation based in each of the four domains. [Read slide]

Slide #16: Try Again

Note: Use this slide to better explain the T of SMART goals.



Trying again is critical when it comes to setting and striving towards holistic health goals. Failure and coming up short when pursuing goals is inevitable but trying again is a choice.

Slide #17: Application

Note: Use this slide to discuss how trying again applies to the four domains of fitness.



Here are a few examples of questions to ask yourself when pursuing goals in each of the four domains. [Read slide]

Slide #18: Conclusion



Slide #19: Conclusion

Note: Use this slide to wrap up Module 1 and review the content that was discussed.

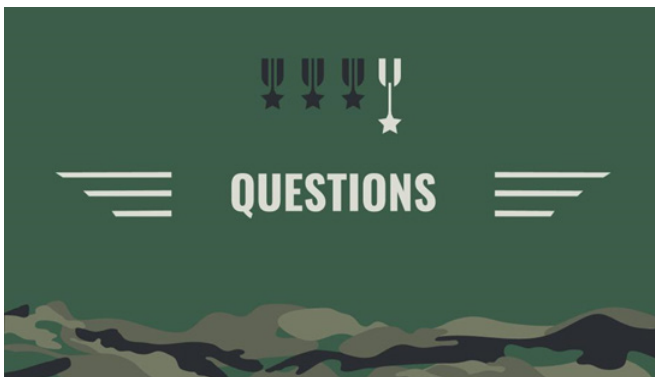
The slide features a dark green background with a mountain range silhouette at the bottom. The title "SMART GOALS" is centered at the top in white, flanked by three horizontal white lines on each side. Below the title is a table with five rows. Each row has a dark green header cell on the left and a light green content cell on the right.

SUFFICIENT	Find a balance between doing too much and too little.
MAINTAINABLE	Make long-term goals that can be sustainable.
ADJUSTABLE	Make goals that can be adjusted and altered depending on where you are at and who you are with.
RESEARCH/ REVELATION	Do your own research and seek after God's will to know what is best for your body, mind, relationships, and spirit.
TRY AGAIN	Do not let failure dictate the rest of your day, week, or even year. Pick yourself back up the second you fail.

[Read slide]

Slide #20: Questions

Note: Use this slide to provide chaplains with time to ask questions.



Module 2: Physical Fitness

Slide #1: Introduction

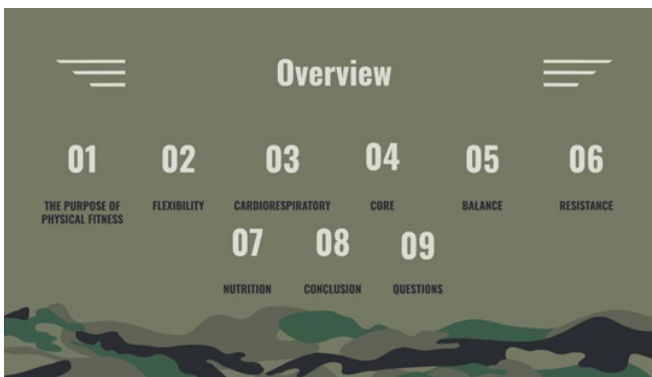
Note: Use this slide to introduce yourself and discuss the purpose of the presentation.



I am Chaplain ___ and this is the second of five trainings on An Integrative Self-care Plan for Christian Military Chaplains. This second module will focus on enabling chaplains to reach optimal levels of physical fitness through SMART goals.

Slide #2: Overview

Note: Use this slide to give a brief overview of the content that will be discussed throughout the presentation.



First, we will discuss the purpose of physical fitness and its interconnectedness with other domains of fitness. Next, we will analyze the physical implications of flexibility, cardiorespiratory, core, balance, and resistance training. We will then provide brief content pertaining to nutrition and diet. We will summarize what we have learned throughout the presentation and then open it up for questions at the end. Questions will also be entertained throughout.³

Slide #3: Purpose

Note: Use the following two slides to discuss the purpose and importance of physical fitness for overall health and wellness.



Now we will discuss the purpose of physical health and how it impacts the other three domains of fitness.

3. Information for this slide comes from the National Academy of Sport Medicine as reported in the following source: Michael Clark et al, eds., NASM Essentials of Personal Fitness Training (Burlington, Massachusetts: Jones and Barlett Learning, 2018), 8.

Slide #4: Purpose

Note: Use this slide to explain the interconnectedness of physical fitness and the other domains of fitness.



Each branch of the Armed Forces recognizes physical fitness as an important entity of wholeness. The Army promotes physical training to enhance soldier performance in areas that require “aerobic fitness, endurance, strength, healthy body composition and flexibility.”⁴ Additionally, the physical dimension of soldier fitness also incorporates sleep, activity, and nutrition to improve resilience and readiness.⁵ The main tenets of the physical domain of Comprehensive Airman Fitness include endurance, recovery, nutrition, and strength, all of which contribute to accomplishing the mission at hand.⁶ Similarly, the Navy seeks to enhance mission readiness through physical fitness to ensure that sailors are more capable of successfully pur-

4. Department of the Army, *Comprehensive Soldier Fitness*, AR 350-53 (Washington, DC: Department of the Army, 2014), 7 https://armypubs.army.mil/epubs/DR_pubs/DR_a/pdf/web/r350_53.pdf.

5. Department of the Army, *Comprehensive Soldier Fitness*, 7.

6. Department of the Air Force, *Comprehensive Airman Fitness*, AFI 90-5001 (Washington, DC: Department of the Air Force, 2019), 16 https://static.e-publishing.af.mil/production/1/af_a1/publication/afi90-5001/afi90-5001.pdf.

suing mission objectives even while under stress.⁷ While there is a great emphasis placed on the benefits of physical fitness, the forces do an exceptional job at educating service members on the important relationship between physical health and other aspects of holistic health.⁸

A number of studies show that moderate-intensity exercise is beneficial to those with clinical depression and generally promotes a happier mood.⁹ Other studies show that those who exercise regularly report changes in mental states such as mood, affect, cognition, and abilities.¹⁰

There are also a number of social benefits that come as a result of physical exercise. Those who exercised regularly are socially benefited by meeting new people, spending quality time with friends and family, building companionship, and indulging in fun competition.¹¹ Physical fitness improves social fitness.

While the physical, mental and social benefits of exercise are more tangible and objective, effects that physical fitness has on spirituality are more subjective. However, there is a positive correlation between physical health and both self-forgiveness and other-forgiveness, both

7. Department of the Navy, *Combat and Operational Stress Control*, Marine Corps Reference Publication (MCRP) 6-11C (Washington, DC: Department of the Navy, 2010), <https://www.fitness.marines.mil/Portals/211/Docs/Spiritual%20Fitness/MCRP%206-11C%20%20Combat%20and%20Operational%20Stress%20Control.pdf>.

8. Department of the Army, *Comprehensive Soldier Fitness*, 7.

9. Shepherd Ivory Franz and G.V. Hamilton, "The Effects of Exercise Upon Retardation in Conditions of Depression," *American Journal of Psychiatry* 62 (April 2006): 240–52.

10. Phillip Tomporowski and Norman Ellis, "Effects of Exercise on Cognitive Processes: A Review," *Psychological Bulletin* 99, no. 3 (May 1986): 338.

11. Renee Myers and David Roth, "Perceived Benefits of and Barriers to Exercise and Stage of Exercise Adoption in Young Adults," *Health Psychology* 16, no. 3 (May 1997): 279–80.

of which are fundamental aspects of spiritual fitness.^{12,13}

Many Christians believe in prioritizing physical health. God has given each individual a body to use and experience joy throughout mortality. One cannot expect to “abound to every good work” or see that “God is able to make all grace abound toward you” if they lack the physical necessities to feel it (2 Corinthians 9:8). God values the art of self-control because it produces godliness and translates to discipline in spiritual practices such as prayer, scripture study, and resisting temptations (1 Timothy 4:8). Jesus said that “inasmuch as ye have done it unto one of the least of these my brethren, ye have done it unto me.” (Matthew 25:40) As we use our physical bodies to lift and serve others, we are elevated to a higher level of spirituality. Christians are taught to “Love the Lord thy God with all thine heart, and with all thine soul, and with all thine strength, and with all thine mind.” (Luke 10:27) As chaplains improve their physical health, they will be physically enabled to love the Lord God and those around them with more strength.

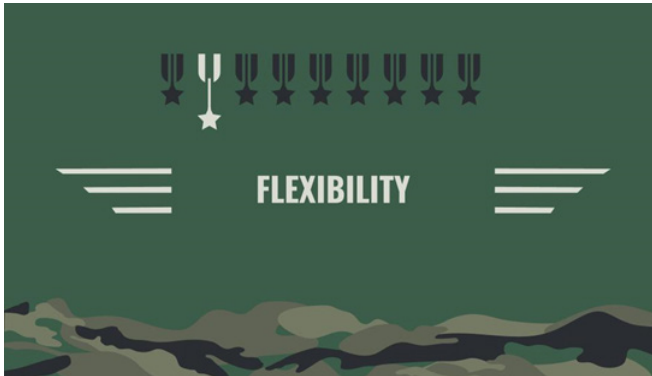
In conclusion, physical fitness directly impacts the other elements of holistic health. As military chaplains incorporate physical fitness into their daily lives, they will experience positive mental, social, and spiritual effects, all of which can help prevent and battle compassion fatigue and burnout.

12. Tobi Wilson et al., “Physical Health Status in Relation to Self-forgiveness and Other-forgiveness in Healthy College Students,” *Journal of Health Psychology* 13, no. 6 (September 2008): 802.

13. Don Davis et al., “Research on Religion/Spirituality and Forgiveness: A Meta-analytic Review,” *Psychology of Religion and Spirituality* 5, no. 4 (July 2013): 235–9.

Slide #5: Flexibility Training

Note: Use this slide to explain the benefits of physical flexibility.



There is a direct correlation between lack of flexibility and increased risk of injury.^{14,15,16,17} Conversely, those who remain flexible will be less susceptible to physical injury.

14. Erik Witvrouw et al., “Muscle Flexibility as a Risk Factor for Developing Muscle Injuries in Male Professional Soccer Players: A Prospective Study,” *American Journal of Sports Medicine* 31, no. 1 (February 2003): 43–6.

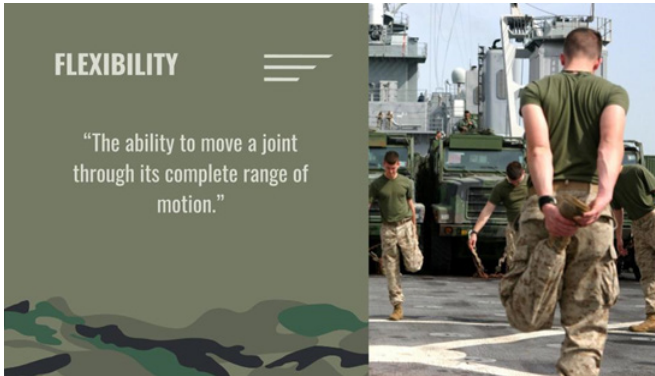
15. Erik Witvrouw et al., “Intrinsic Risk Factors for the Development of Patellar Tendinitis in an Athletic Population: A Two-year Prospective Study,” *American Journal of Sports Medicine* 29, no. 2 (April 2001): 194–5.

16. Michael Cibulka et al., “Unilateral Hip Rotation Range of Motion Asymmetry in Patients with Sacroiliac Joint Regional Pain,” *Spine* 23, no. 9 (May 1998): 10012–14.

17. Joseph Knapik et al., “Preseason Strength and Flexibility Imbalances Associated with Athletic Injuries in Female Collegiate Athletes,” *American Journal of Sports Medicine* 19 no. 1 (January 1991): 79–80.

Slide #6: Defining Physical Flexibility

Note: Use this slide to define physical flexibility and suggest its implementation into a physical fitness routine.



[Read slide]¹⁸ Chaplains must incorporate some form of flexibility training into their physical fitness regimen in order to stay physically fit.

18. Clark et al., *NASM Essentials of Personal Fitness Training*, 162–3.

Slide #7: Flexibility Training Initiatives

Note: Use this slide to present a number of physical flexibility initiatives that chaplains can choose to implement into their self-care plan.

FLEXIBILITY INITIATIVES			
Type	Benefits	How	Duration
Static Stretching	Relaxes muscles Elongates of muscles	Take a muscle to the point of tension and hold	1-3 sets, hold each stretch 30 seconds
Active-Isolated Stretching	Increases motor-neuron excitability Effective form of warm-up	Use agonists and synergists to dynamically move the joint into a range of motion	1-2 sets, hold each stretch 5-10 repetitions for 1-2 seconds
Dynamic Stretching	Improves soft tissue extensibility Effective form of warm-up	Use the force production of a muscle and the body's momentum to stretch a joint	1-2 sets, 10-15 repetitions, 3-10 exercises
Self-Myofascial Release	Releases muscular tension	Apply gentle pressure to an adhesion or "knot" with a foam roller	Find a tender spot and hold pressure on that spot for at least 30 seconds

The following are examples of initiatives that will increase physical flexibility. Using SMART goals, chaplains should strive to incorporate some, if not all, forms of stretching into their self-care plan in order to enhance physical flexibility.

Slide #8: Cardiorespiratory Training

Note: Use this slide to explain the benefits of cardiorespiratory training.

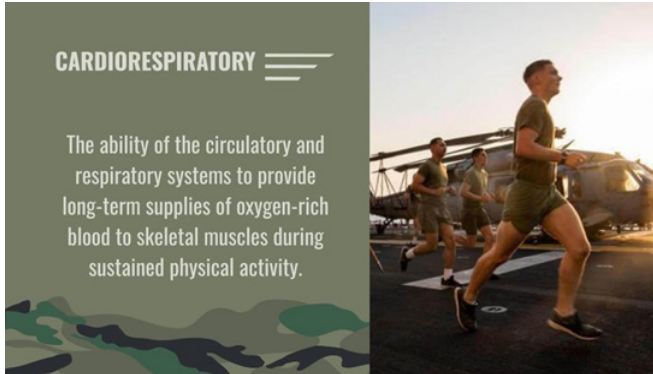


Cardiorespiratory exercise has a profound positive impact on overall health. Some benefits include a stronger heart and more equipped respiratory muscles. It also improves blood flow, breathing efficiency, oxygen transport, fuel supply, muscular development, metabolism, lean body mass, mental awareness, relaxation, and sleep. It reduces cholesterol, blood pressure, obesity, diabetes, depression and anxiety, and risk of heart disease. Finally, it increases overall lean body mass and metabolic rate¹⁹

19. Clark et al., *NASM Essentials of Personal Fitness Training*, 201–202.

Slide #9: Defining Cardiorespiratory

Note: Use this slide to define cardiorespiratory and suggest its implementation into a physical fitness routine.

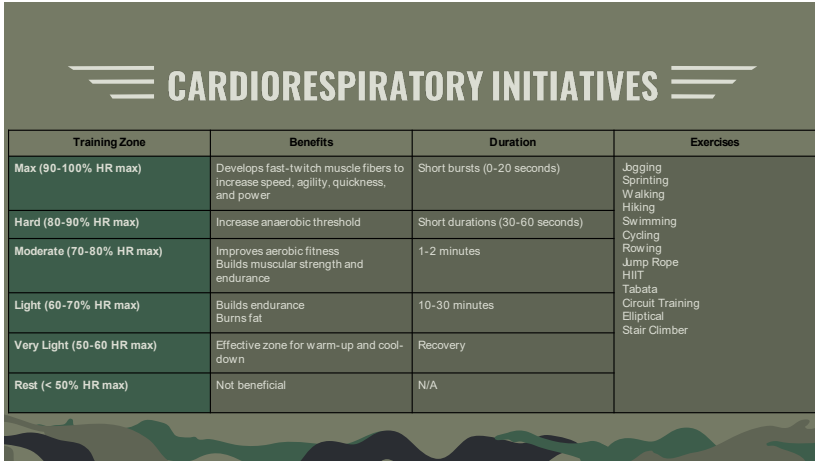


Read slide]²⁰ Chaplains must incorporate some form of cardiorespiratory training into their physical fitness regimen in order to stay physically fit.

20. Clark et al., *NASM Essentials of Personal Fitness Training*, 201.

Slide #10: Cardiorespiratory Training Initiatives

Note: Use this slide to present a number of physical cardiorespiratory training initiatives that chaplains can choose to implement into their self-care plan.



Training Zone	Benefits	Duration	Exercises
Max (90-100% HR max)	Develops fast-twitch muscle fibers to increase speed, agility, quickness, and power	Short bursts (0-20 seconds)	Jogging Sprinting Walking Hiking
Hard (80-90% HR max)	Increase anaerobic threshold	Short durations (30-60 seconds)	Swimming Cycling
Moderate (70-80% HR max)	Improves aerobic fitness Builds muscular strength and endurance	1-2 minutes	Rowing Jump Rope HIIT
Light (60-70% HR max)	Builds endurance Burns fat	10-30 minutes	Tabata Circuit Training Elliptical Stair Climber
Very Light (50-60 HR max)	Effective zone for warm-up and cool-down	Recovery	
Rest (< 50% HR max)	Not beneficial	N/A	

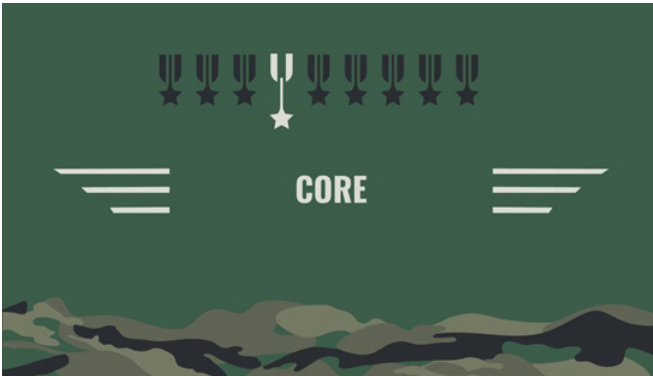
The following are examples of cardiorespiratory initiatives. Using SMART goals, chaplains should strive to incorporate some, if not all, forms of cardiorespiratory training into their self-care plan. Depending on fitness levels, health conditions, physical fitness goals, and resources, chaplains should decide which of the following training zones and accompanying exercises is best for them depending on their heart rate max calculation (220-age).^{21,22}

21. Clark et al., *NASM Essentials of Personal Fitness Training*, 209.

22. The heartrate max calculation is a general method to follow when considering fitness goals and accompanying exercises. As one increases their respiratory system's ability to provide long term supplies of oxygen rich blood to skelatal muscles during sustained physical activity, they can adjust their approach to cardiorespiratory fitness to meet the needs of their circulatory respiratory system.

Slide #11: Core Training

Note: Use this slide to explain the benefits of core training.

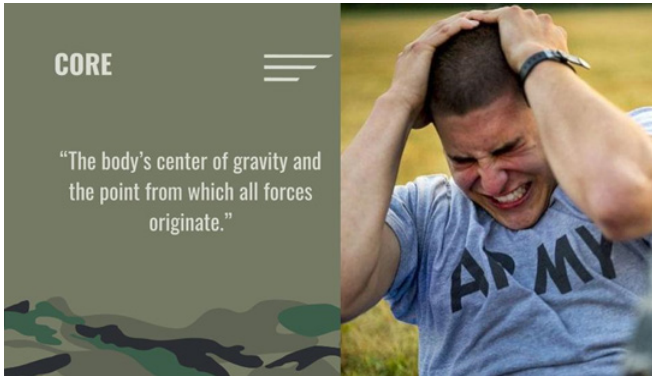


In order for the body to maximize use of strength, power, and endurance, the core must first be efficiently stabilized and developed. Without a strong core, inefficient movement patterns lead to inevitable injuries and imbalances.¹

1. Clark et al., *NASM Essentials of Personal Fitness Training*, 227.

Slide #12: Defining Core

Note: Use this slide to define core and suggest its implementation into a physical fitness routine.



[Read slide]²³ Chaplains should make core training a priority in their physical fitness endeavors.

23. Clark et al., *NASM Essentials of Personal Fitness Training*, 224–5.

Slide #13: Core Training Initiatives

Note: Use this slide to present a number of physical core training initiatives that chaplains can choose to implement into their self-care plan.

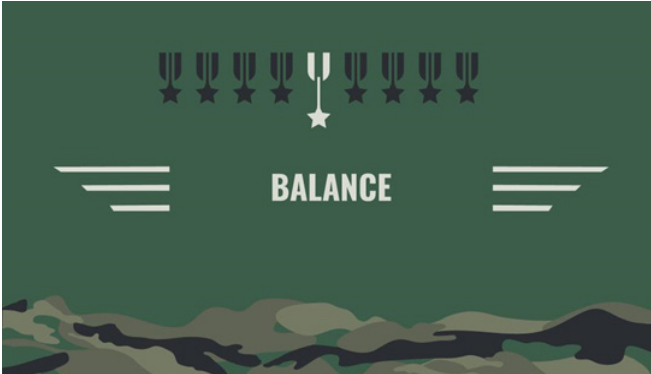
CORE INITIATIVES			
Type	Benefits	Exercises	Duration
Core-Stabilization	Improved neuromuscular efficiency Improved intervertebral stability	Marching Floor bridge Floor prone cobra Plank	1-4 sets, 12-20 repetitions, slow tempo
Core Strength	Improved dynamic stabilization Improved concentric and eccentric force Improved neuromuscular efficiency	Ball crunches Back extensions Reverse crunches Cable rotations	2-3 sets, 8-12 repetitions, moderate tempo
Core Power	Improved rate of force	Rotation chest pass Medicine ball pullover throw Front medicine ball throw Soccer throw	2-3 sets, 8-12 repetitions, as fast as can be controlled

The following are examples of core initiatives. Using SMART goals, chaplains should strive to incorporate some, if not all, forms of core training into their self-care plan.²⁴

24. Clark et al., *NASM Essentials of Personal Fitness Training*, 234–40.

Slide #14: Balance Training

Note: Use this slide to explain the benefits of balance training.



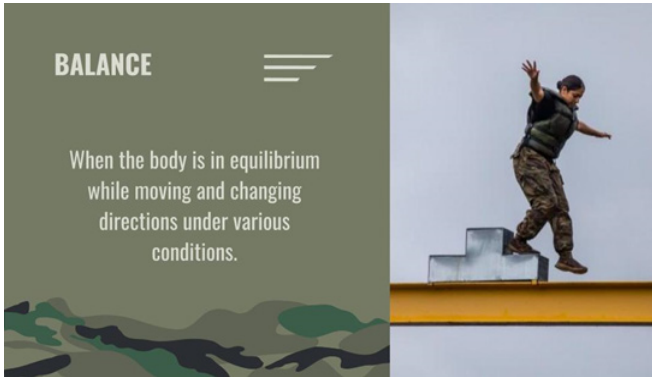
Balance training drastically reduces the risk of injury due to the positive effect that it has on postural control and static and dynamic abilities.^{25,26}

25. Emily Kovacs et al., “Effect of Training on Postural Control in Figure Skaters: A Randomized Controlled Trial of Neuromuscular Versus Basic Off-ice Training Programs,” *Clinical Journal of Sports Medicine* 14, no. 4 (July 2004): 220.

26. Carolyn Emery et al., “Effectiveness of a Home-based Balance-training Program in Reducing Sports-related Injuries Among Healthy Adolescents: A Cluster Randomized Controlled Trial,” *Canadian Medical Association Journal* 172, no. 6 (March 2005): 752.

Slide #15: Defining Balance

Note: Use this slide to define balance and suggest its implementation into a physical fitness routine.



[Read slide]²⁷ Balance training is a critical component of physical fitness and should be implemented into every self-care plan. However, balance initiatives should be incorporated through a progressive proprioceptive environment when training.²⁸

27. Clark et al., *NASM Essentials of Personal Training*, 246.

28. Clark et al., *NASM Essentials of Personal Training*, 247.

Slide #16: Balance Training Initiatives

Note: Use this slide to explain the progressive balance training initiative that chaplains can choose to implement into their self-care plan.

The slide features a dark green background with a white title 'BALANCE INITIATIVES' centered at the top, flanked by three horizontal white lines on each side. Below the title, the text reads: 'Balance initiatives should be incorporated through a progressive proprioceptive environment when training. This progression is structured as follows:'. A light green horizontal bar contains the progression: 'Two-legs on stable surface > Single-leg on stable surface > Two-legs on unstable surface > Single-leg unstable surface'. Below this, the text states: 'As soon as one becomes comfortable at any given level throughout the progression continuum, they may increase the proprioceptive environment by implementing single-leg exercises and unstable surface training. The following represents the progression continuum for unstable surfaces:'. A second light green horizontal bar lists the progression: 'Floor > Balance beam > Half foam roll > Foam pad > Balance disc > Wobble Board > BOSU ball'. The bottom of the slide has a decorative graphic of rolling hills in shades of green and blue.

[Read slide]²⁹ This slide represents the balance training continuum. Using SMART goals, chaplains should strive to incorporate balance training into their self-care plan.

29. Clark et al., *NASM Essentials of Personal Training*, 251.

Slide #17: Resistance Training

Note: Use this slide to explain the benefits of resistance training.

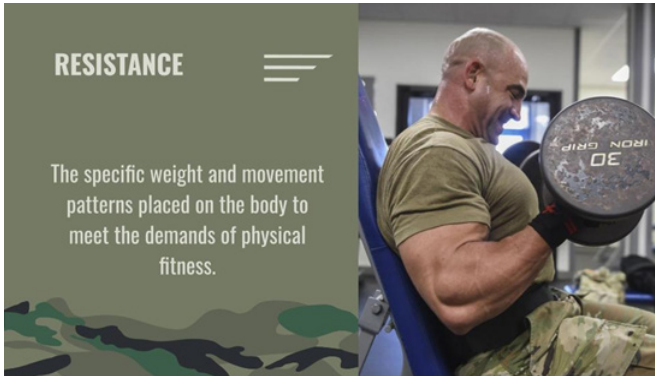


There are many benefits of resistance training. Physiologically, one who implements resistance training into their fitness regime will improve their cardiovascular efficiency, hormone production, and cholesterol regulation. Physically, resistance training can help an individual increase muscle tissue, tendon, and ligament strength and decrease body fat. Finally, a number of performance related benefits such as increased strength, endurance, power, and coordination can also occur with resistance training.³⁰

30. Clark et al., *NASM Essentials of Personal Fitness Training*, 304.

Slide #18: Defining Resistance

Note: Use this slide to explain resistance and suggest its implementation into a physical fitness routine.



[Read slide] Resistance training should be incorporated in every physical fitness regimen in order to reach ideal levels of fitness.

Slide #19: Resistance Training Initiatives

Note: Use this slide to present a number of physical resistance training initiatives that chaplains can choose to implement into their self-care plan.

RESISTANCE INITIATIVES			
Type	Benefits	How	Duration
Single-set	Beneficial for beginners	Perform one set of each exercise	6-12 exercises, 12-20 reps, 1 set, 90 sec. rest
Multiple-set	Beneficial for both beginners and advanced lifters	Perform multiple sets of each exercise	6-12 exercises, 6-16 reps 3-5 sets, 90 sec. rest
Superset	Improved muscular endurance Increased size in muscle tissue	Perform two exercises in succession with no rest	2 exercises performed consecutively, 6-12 reps, 3-5 sets, no rest
Split Routine	Optimal for increased size in muscle tissue More work can be performed when training the selected body part	Any resistance routine that trains different parts of the body on different days (Mon/Th: Chest and Triceps, Tues/Fri: Back and Biceps, Wed/Sat: Legs and Shoulders)	Can use the same structure as single-set, multiple set, or super-set durations
Circuit	Timely Improved body composition	Perform a series of exercises, one after the other, with little to no rest	6-12 exercises, 8-20 reps, 1-3 sets, 15-60 sec. rest in between exercises
HIIT	Reduced subcutaneous fat Improved VO ₂ max Best for caloric expenditure Decreased cholesterol Increased fat loss Improved blood pressure and glucose regulation Reduced cardiovascular disease	Alternate between exercises during which a person's heart rate reaches at least 80% of its maximum capacity and exercises of less intensity	Alternate between one exercise that brings a person's heart rate to at least 80% of its maximum capacity and one exercise of less intensity for as long as desired
Tabata	Same benefits as HIIT Increased size in muscle tissue	Cycle through several rounds of 20 seconds on (max effort) and 10 seconds off	4-12 exercises, 4-8 rounds, 20 second work intervals, 10 second rest cycle in between rounds, 90 second rest between exercises

Chaplains should incorporate one of the following resistance initiatives in accordance with the SMART goal guidelines.

Slide #20: Nutrition

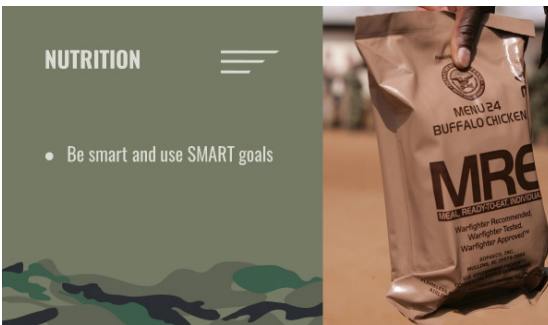
Note: Use this slide to introduce the topic of nutrition.



Nutrition is a fundamental part of obtaining physical health and wellness.

Slide #21: Approach to Nutrition

Note: Use this slide to help chaplains approach nutrition in a smart way through SMART goals.



This is not the instruction that you all perhaps thought you would get. There will be no graphs, tables, or references to studies that prove that one diet is better than another. Instead, the approach to nutrition for the purposes of physical health should be one that is simply SMART. For starters, everyone has a general idea of what food is good for the body is what is not. Instead of having sugary

cereal for breakfast, maybe stick to eggs or a smoothie. Instead of having fast food for lunch, pack a salad. Instead of skipping dinner and indulging yourself in a massive bowl of ice cream, plan accordingly and have a lean protein source and some vegetables. Generally speaking, most people know these things. Just be SMART.

Speaking of SMART, a SMART goal approach to diet and nutrition could also be beneficial. It is important that you are eating a sufficient amount of food. This means not too much or too little. Eat until you are full. Listen to your body. Eat when you are hungry. Drink enough water but do not drink too much.

Develop a relationship with food that is maintainable. Can you really live off of kale and salmon for the rest of your life? Probably not. Can you really go without donuts if they are your favorite food? Probably not. Stick to a diet that is sustainable and allows you to eat the foods that you enjoy.

Be sure that your approach to nutrition is adaptable. The more strict and unalterable your diet is, the harder time you will have on deployments, at social gatherings, and in financial predicaments. Having an adjustable diet takes away from the stress that it normally induces.

Nobody is the same. Some people are lactose intolerant, others have food allergies, and some have celiac disease. That is why there is no “golden” solution when it comes to diet. Do your research and seek after revelation to know what is best for you and your body.

Finally, all those who embark on a journey of developing healthy eating habits are destined to give in to cravings or sway from their diet because of social pressure or other circumstances. That is why it is so important to try again. Nobody is perfect. Allow yourself grace and start over when you come up short. There is no reason why you have to wait until the New Year, next month, the month before the next physical fitness assessment, or even Monday. Try again today. And if you fail again, try again.³¹

31. Information provided is general knowledge, and is the author’s personal regime of physical fitness pertaining to nutrition.

Slide #22: Conclusion



Slide #23: Conclusion

Note: Use this slide to wrap up Module 2 and review the content that was discussed.

A dark green slide with a camouflage pattern at the bottom. The title "PHYSICAL FITNESS" is written in white, bold, uppercase letters in the center. On either side of the title are three white horizontal lines of varying lengths. Below the title is a table with six rows and two columns. The first column contains the category names in white, uppercase letters. The second column contains descriptive text in white.

FLEXIBILITY	Chaplains who are flexible will be less susceptible to injury. There are four different kinds of stretching initiatives that can help promote this.
CARDIORESPIRATORY	Cardiorespiratory training can provide a number of benefits to all chaplains who implement it into their physical fitness training regimen. There are several different kinds of cardiorespiratory training, leaving the chaplain in charge of selecting their own.
CORE	A strong core is the foundation for a strong body overall. Chaplains should implement at least one, if not all, core initiatives in order to achieve ideal levels of fitness.
BALANCE	Similar to flexibility, those who implement balance training into their physical fitness programs are less likely to be injured.
RESISTANCE	Resistance training can improve hormone production while also strengthening muscle tissue, tendons, and ligament strength. Additionally, it can help reduce body fat.
NUTRITION	Be SMART.

[Read slide]

Slide #24: Questions

Note: Use this slide to provide chaplains with time to ask questions.



Module 3: Mental Fitness

Slide #1: Introduction

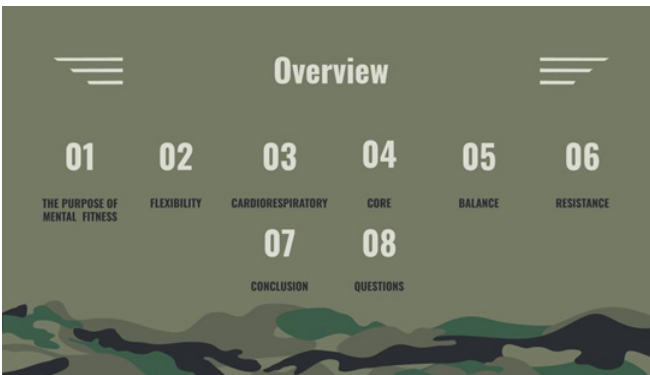
Note: Use this slide to introduce yourself and discuss the purpose of the presentation.



I am Chaplain ___ and this is the third of five trainings on An Integrative Self-care Plan for Christian Military Chaplains. This third module will focus on enabling chaplains to reach optimal levels of mental fitness.

Slide #2: Overview

Note: Use this slide to give a brief overview of the content that will be discussed throughout the presentation.



First, we will discuss the purpose of mental fitness and its interconnectedness with other domains of fitness. Next, we will analyze the mental implications of flexibility, cardiorespiratory, core, balance, and resistance training. We will summarize what we have learned throughout the presentation and then open it up for questions at the end. Questions will also be entertained throughout.

Slide #3: Purpose

Note: Use the following two slides to discuss the purpose and importance of mental fitness for overall health and wellness.



Now we will discuss the purpose of mental health and how it impacts the other three domains of fitness.

Slide #4: Purpose

Note: Use this slide to explain the interconnectedness of mental fitness and the other domains of fitness.



Each branch of the Armed Forces recognizes the significance of mental fitness. The Army encourages its soldiers to maintain a positive and optimistic outlook on life while also maintaining emotional control and psychological health.³² The Air Force considers awareness, adaptability, decision making, and positive thinking as all a part of mental fitness.³³ The Navy defines mental fitness as being “engaged in psychologically healthy behaviors that enable you to successfully meet your duties while deployed and in garrison.”³⁴

While cognitive function, positive thinking, and other aspects of psychological well-being help enhance mental fitness, they also trickle into the other domains of holistic health and strengthen them. Research suggests that mental illness, or being mentally unfit, may negatively impact productivity. As such, access to healthier foods is diminished, time for exercise is lost, and sleep quality and quantity are scarce. These common consequences to diminished mental

32. Department of the Army, *Comprehensive Soldier Fitness*, 7.

33. Department of the Air Force, *Comprehensive Airman Fitness*, 16.

34. Department of the Navy, *Combat and Operational Stress Control*.

health lead to physical health repercussions.^{35, 36} Mental illness has also been shown to impair an individual's decision making process, reducing their ability to make healthy decisions for their body and access information pertaining to their health.³⁷ Mental fitness, or lack thereof, is associated with lifestyle choices such as exercise, smoking, alcohol and drug consumption, and nutrition.^{38, 39, 40} All in all, mental fitness has a direct impact on physical fitness.

Mental health also plays an enormous role in promoting social fitness.⁴¹ Mental illness can lead to drastic changes within the dynamics of relationships both in and outside of the family.⁴² Some of these changes include a mother experiencing difficulty nurturing her young children, friends and family being overly cautious and afraid during interactions, necessary sick leave isolating them even further from their social interactions at work, and sexual tension in one or both partners causing stress and conflict.⁴³ In summary, those who suffer from mental illnesses also experience correlated distress in the social domain.

35. Paul Contoyannis and Nigel Rice, "The Impact of Health on Wages: Evidence from the British Household Panel Survey," *Empir Econ* 26, no. 4 (January 2001): 600–5.

36. Pilar Garcia-Gomez et al., "Long Term and Spillover Effects of Health Shocks on Employment and Income," *J Hum Resources* 48, no. 4 (Fall 2013): 877.

37. Anandi Mani et al., "Poverty Impedes Cognitive Function," *Science* 341 no. 6149 (August 2013): 976–980.

38. Mani et al., "Poverty Impedes Cognitive Function."

39. Andrea Deslandes et al., "Exercise and Mental Health: Many Reasons to Move," *Neuropsychobiology* 59 (July 2009): 196–197.

40. Agathocles Tsatsoulis and Stelios Fountoulakis, "The Protective Role of Exercise on Stress System Dysregulation and Comorbidities," *Ann N Y Acad Sci* 1083 (November 2006): 198–200.

41. Patricia D'ardenne and Eddie McCann, "The Sexual and Relationship Needs of People with Psychosis - A Neglected Topic," *Sexual and Marital Therapy* 12, no. 4 (December 2007): 301–303.

42. Michael Crow, "Couples and Mental Illness," *Sexual and Relationship Therapy* 19, no. 3 (January 2004): 309.

43. Crow, "Couples and Mental Fitness."

One of the most effective ways to calm the mind is to listen to the “wisdom of the body.”⁴⁴ In doing so, one is able to quiet the mind, become more aware of surroundings in the present, and find a more calm and collected version of themselves.^{45,46,47,48,49} Additionally, mind exercise can induce self-awareness and deep healing, both of which are spiritual benefits.⁵⁰

In conclusion, there is a positive correlation between mental fitness and improvement in the other components of holistic health.

Slide #5: Mental Flexibility Training

Note: Use this slide to explain the benefits of mental flexibility.



44. Elizabeth Monk-Turner, “The Benefits of Meditation: Experimental Findings,” *The Social Science Journal* 40 no. 3 (December 2019): 465–70.

45. Sylvia Boorstein, *Don't Just do Something, Sit There: A Mindfulness Retreat with Sylvia Boorstein* (San Francisco, CA: Harper, 1996), 124–125.

46. Kathleen McDonald, *How to Meditate* (New York: Wisdom Publications, 2005), 20.

47. Thich Hahn, *The Miracle of Mindfulness* (Boston: Beacon Press, 1976), 6.

48. Jamie Smart, *The Little Book of Clarity* (Chichester, United Kingdom: John Wiley & Sons, 2015), 79–80.

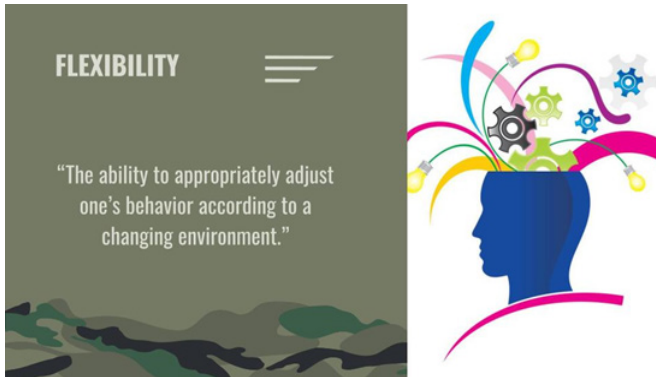
49. Shunryu Suzuki and Trudy Dixon, *Zen Mind, Beginner's Mind* (New York: Weatherhill, 1970), 83.

50. John Borysenko, *Minding the Body, Mending the Mind* (New York: Bantam, 2007), 197.

Cognition is defined as the mental action or process of acquiring knowledge and understanding through thought, experience, and the senses.⁵¹ To stretch the mind and engage cognition is to disengage from the monotony of everyday thoughts, experiences, and senses and implement a new response to the tasks at hand.^{52, 53} Greater mental flexibility is directly associated with higher resilience to stress.⁵⁴

Slide #6: Defining Mental Fitness

Note: Use this slide to define mental flexibility and suggest its implementation into a mental fitness routine.



[Read slide] Chaplains who become more mentally and cognitively flexible will learn quicker and more creative ways to fight and over-

51. Oxford Dictionary, s.v. "cognition," accessed January 22, 2021, <https://www.lexico.com/en/definition/cognition>.

52. Marianne Stenger, "7 Ways to Develop Cognitive Flexibility," informED, last modified April 10, 2017, <https://www.opencolleges.edu.au/informed/features/7-ways-develop-cognitive-flexibility/>.

53. Dina Dajani and Lucina Uddin, "Demystifying Cognitive Flexibility: Implications for Clinical and Developmental Neuroscience," *Trends Neurosci* 38 no. 9 (2015): 1.

54. Jessica Grant and Matthias Siemer, "Flexible Control in Processing Affective and Non-affective Material Predicts Individual Differences in Trait Resilience," *Cognition and Emotion* 25, no. 2 (February 2011): 387.

come traumatic material.⁵⁵

Slide #7: Mental Flexibility Training Initiatives

Note: Use this slide to present a number of mental flexibility initiatives that chaplains can choose to implement into their self-care plan.

FLEXIBILITY INITIATIVES		
Exercise	Benefits	How
Move to a different setting	Reduce stress Improve cognition Higher resiliency More equipped to fight and overcome traumatic material	Instead of counseling in your office, take those who come to you on a walk around the installation Organize a retreat to address needs on a macro level Take time off
Learn something new		Learn how to play an instrument, or even just a single song to perform during a Sunday worship ceremony Compare your favorite scriptural passages with other versions of the Bible to find new meaning Take up any new hobby (sports, cooking, dancing, working on cars, woodworking, etc.)
Cognitive restructuring		Modify the thinking process by asking three questions: What is the evidence for your current thoughts? Is there a different way of looking at it? Will I be okay if my fears actually happen? Keep a thought record when exposed to traumatic material

These are examples of initiatives that will increase mental flexibility. Using SMART goals, chaplains should strive to incorporate some form of mental flexibility training into their self-care plan.

55. Stenger, “7 Ways to Develop Cognitive Flexibility.”

Slide #8: Thought Record Table

Note: Use this slide to show the thought record chart discussed in the prior slide.

THOUGHT RECORD						
Situation Who? What? When? Where?	Moods What did you feel? Rate each mood (0-100%)	Automatic Thoughts (Images) What was going through your mind just before you started to feel this way? Any other thoughts? Images?	Evidence That Supports the Hot Thought	Evidence That Does Not Support the Hot Thought	Alternative/Balanced Thoughts Write an alternative or balanced thought Rate how much you believe each thought (0-100%)	Rate Moods Now Rerate column 2 moods and any new moods (0-100%)

Slide #9: Mental Cardiorespiratory Training

Notes: Use this slide to explain the benefits of cardiorespiratory training.

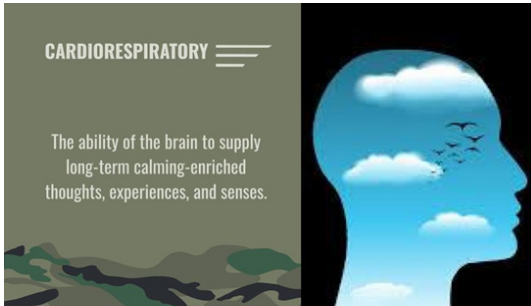


Mental cardiorespiratory exercises can have positive long-term effects. They can reduce muscle tension, lower heart rate and blood pressure, improve concentration, mood, and cognitive function, and

enhance problem solving skills.⁵⁶

Slide #10: Defining Mental Cardiorespiratory

Note: Use this slide to define mental cardiorespiratory and suggest its implementation into a mental fitness routine.



[Read slide] Chaplains must incorporate some form of mental cardiorespiratory training into their self-care plan in order to stay mentally fit.

56. "Relaxation and Mental Health," Health Direct, February 4, 2021, <https://www.healthdirect.gov.au/relaxation>.

Slide #11: Mental Cardiorespiratory Training Initiatives

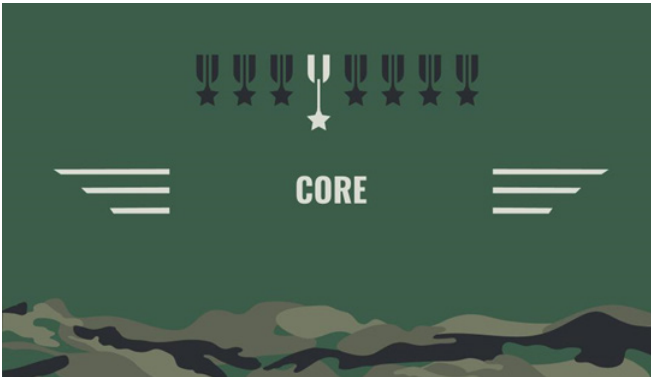
Note: Use this slide to present a number of mental cardiorespiratory training initiatives that chaplains can choose to implement into their self-care plan.

CARDIORESPIRATORY INITIATIVES		
Exercise	Benefits	How
Build your vocabulary	Long-term working memory and memory processing Enhanced visual and auditory processing Improved task-switching capabilities Improved ability to adjust to environmental changes	Keep a notebook with you when you read to write down unfamiliar words and then look up the definition Learn a new language
Use all of your senses	Improves cognitive processing, verbal and non-verbal communication, sensory capabilities, and mood Reduces fear and anxiety Maintains balance and physical fitness	Seek after appealing views from the workplace Listen to music Exercise Massage Aromatherapy Fresh cooking Try new foods
Calming meditation	Facilitates a quieter state of mind Improved concentration Cultivates quietness	Focus on one specific object, whether it be the breath, a saying or phrase, an image, a physical object, or even a physical sensation, and return your focus to that object whenever you get distracted

These are examples of initiatives that will improve the mental cardiorespiratory system. Using SMART goals, chaplains should strive to incorporate some form of mental cardiorespiratory training into their self-care plan.

Slide #12: Mental Core Training

Note: Use this slide to explain the benefits of mental core training.



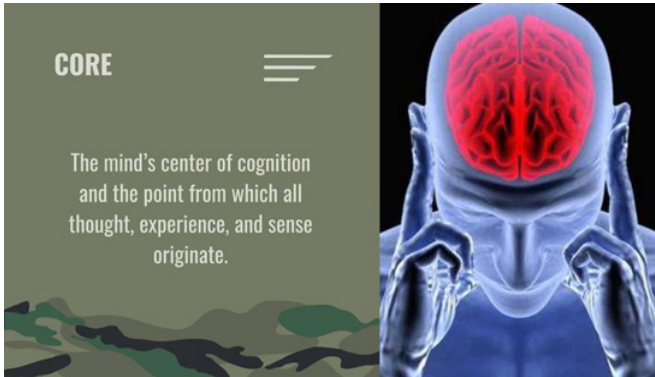
Mental core pertains to cognitive health, motor function, emotional regulation, and tactile operation.⁵⁷ A weak mental core and failure to implement mental core training could lead to cognitive impairment and poor overall brain health.⁵⁸

57. “Cognitive Health and Older Adults,” National Institute on Aging, October 1, 2020, <https://www.nia.nih.gov/health/cognitive-health-and-older-adults>.

58. National Institute on Aging, “Cognitive Health and Older Adults.”

Slide #13: Defining Mental Core

Note: Use this slide to define mental core and suggest its implementation into a mental fitness routine.



[Read slide] Chaplains should make mental core training a priority in their mental fitness endeavors.

Slide #14: Mental Core Training Initiatives

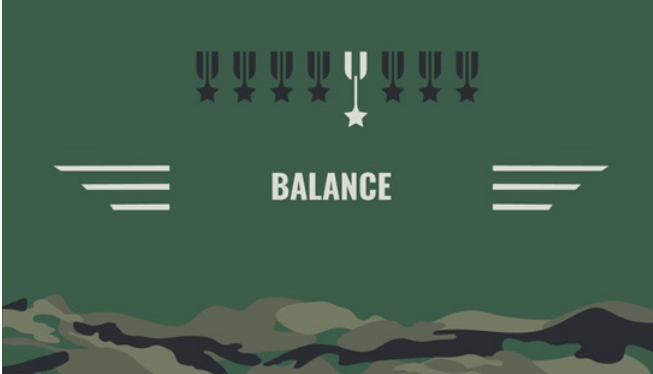
Note: Use this slide to present a number of mental core training initiatives that chaplains can choose to implement into their self-care plan.

CORE INITIATIVES		
Exercise	Benefits	How
Restorative sleep	Improved mood, problem-solving capabilities, reasoning, and concentration Flushes out toxins in the body and brain	Avoid blue light before bed Do not drink caffeine after noon Develop a sleep cycle
Breathing	Reduced stress levels Lower heart rate and blood pressure Reduced depression and anxiety Reduced likelihood of burnout	Mindful breathing <ul style="list-style-type: none"> - Focus on the breath and focus on how it moves in and out through your lungs Nostril breathing <ul style="list-style-type: none"> - Close off one nostril and breathe slowly through the other. Switch nostrils and repeat the process 4,7,8 method <ul style="list-style-type: none"> - Inhale to the count of four, hold your breath to the count of seven, and then exhale to the count of eight
Mindfulness meditation	Self-control Affect tolerance Equanimity Improved concentration Clarity	Remove distractions from the room, get into a comfortable position, focus on breathing (inhale for 10 counts, hold your breath for 10 counts, exhale for 10 counts), and consciously relax tense body parts

These are examples of initiatives that will strengthen the mental core. Using SMART goals, chaplains should strive to incorporate some form of mental core training into their self-care plan.

Slide #15: Mental Balance Training

Note: Use this slide to explain the benefits of mental balance training.

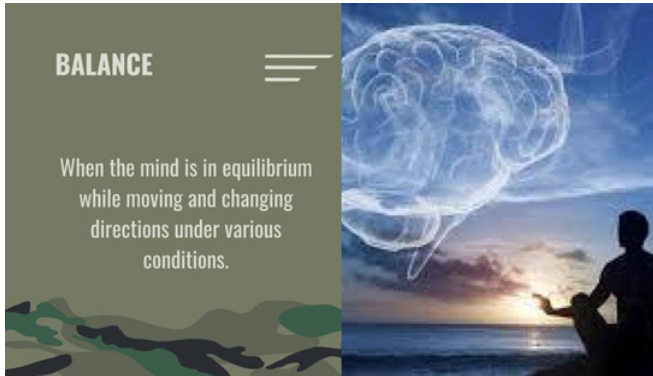


Mental balance training is fundamental in overall health and well being. Additionally, it can help prevent stress, which contributes to an upwards of 90% of all physician visits.⁵⁹

59. Luna Greenstein, "Mental Health is a Balancing Act," National Alliance on Mental Illness, March 17, 2017, <https://www.nami.org/Blogs/NAMI-Blog/March-2017/Mental-Health-is-a-Balancing-Act..>

Slide #16: Defining Mental Balance

Note: Use this slide to define mental balance and suggest its implementation into a mental fitness routine.



[Read slide] Mental balance training is a critical component of mental fitness and should be implemented into every self-care plan.

Slide #17: Mental Balance Initiatives

Note: Use this slide to present a number of mental balance training initiatives that chaplains can choose to implement into their self-care plan.

BALANCE INITIATIVES		
Exercise	Benefits	How
Gratitude journal	Reduces toxic emotions Improved learning and decision making processes	Write in your gratitude journal on certain days throughout the week (or when confronting traumatic material)
Yin Yoga	Calms the nervous system Lessens stress and anxiety Promotes self-love Encourages slowing down	Practice yoga with a slow pace and without planks, warriors, upward/downward dog, or other movements that raise the heart rate
Visualization meditation	Enhances relaxation Promotes peace Evokes calmness Increases focus and motivation	Imagine yourself achieving success Use all five senses to imagine this scene vividly

These are examples of initiatives that will improve mental balance. Using SMART goals, chaplains should strive to incorporate some form of mental balance training into their self-care plan.

Slide #18: Mental Resistance Training

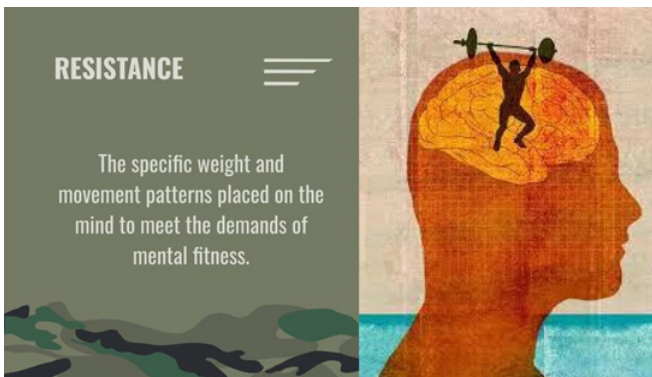
Note: Use this slide to explain the benefits of mental resistance training.



Mental resistance training is crucial in preparing and strengthening the mind to combat traumatic material and promote self-care.

Slide #19: Defining Mental Resistance

Note: Use this slide to define mental resistance and suggest its implementation into a mental fitness routine.



[Read slide] Chaplains should strive to incorporate mental resistance training into their self-care plan.

Slide #20: Mental Resistance Initiatives

Note: Use this slide to present a number of mental resistance training initiatives that chaplains can choose to implement into their self-care plan.

RESISTANCE INITIATIVES		
Exercise	Benefits	How
Cold water showers	Improves circulation Mitigates symptoms of depression and anxiety Decreases cortisol Distracts the mind from worries and fears	Take a 30-60 second cold shower or conclude a warm shower with 30-60 seconds of cold water exposure
Reframe negative thoughts	Eliminates damaging thoughts Improves ability to manage strong emotions	Replace negative thoughts with positive ones (perhaps write your thoughts down in a journal)
Progressive relaxation	Reduces tension in the body Promotes relaxation	Slowly tighten and relax muscle group at a time throughout the body
Movement meditation	Reduces stress and anxiety Evokes deeper relaxation and peace Promotes deeper sleep and focus	Walk as slowly as you can. Each time that you inhale bring one foot slowly off the ground and follow by touching the foot down toes-first then gradually followed by the lower ball of the foot and eventually the heel.

Chaplains should incorporate at least one, if not all, of the mental resistance initiatives shown in accordance with the SMART goal guidelines.

Slide #21: Conclusion



Slide #22: Conclusion

Note: Use this slide wrap up Module 3 and review the content that

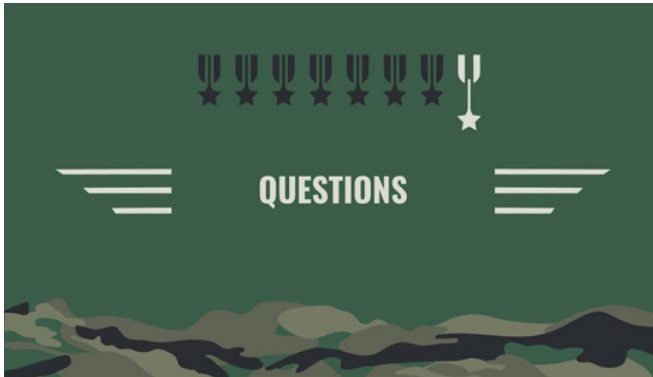
A dark green slide with a camouflage pattern at the bottom. The title "MENTAL FITNESS" is centered in white, flanked by three horizontal lines on each side. Below the title is a table with five rows, each with a category and a description.

FLEXIBILITY	Improves stress levels, cognition, resilience, and can prevent trauma from traumatic material.
CARDIORESPIRATORY	Cardiorespiratory training improves general cognitive function and provides long-term peace and calmness.
CORE	Core training improves focus, concentration, and tolerance to external stressors.
BALANCE	Promotes self-love, focus and motivation while also reducing stress and anxiety.
RESISTANCE	Reduces tension, promotes relaxation, and distracts the mind from internal and external stressors.

[Read slide]

Slide #23: Questions

Note: Use this slide provide chaplains with time to ask questions



Module 4: Social Fitness

Slide #1: Introduction

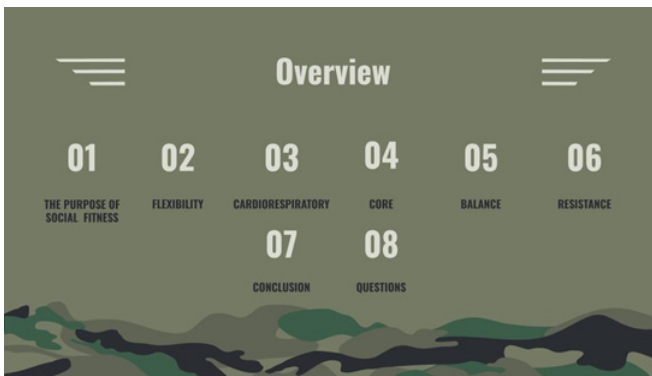
Note: Use this slide to introduce yourself and discuss the purpose of the presentation.



I am Chaplain ___ and this is the fourth of five trainings on An Integrative Self-care Plan for Christian Military Chaplains. This fourth module will focus on enabling chaplains to reach optimal levels of social fitness.

Slide #2: Overview

Note: Use this slide to give a brief overview of the content that will be discussed throughout the presentation.



First, we will discuss the purpose of social fitness and its interconnectedness with the other three domains of fitness. Next, we will analyze the social implications of flexibility, cardiorespiratory, core, balance, and resistance training. We will summarize what we have learned throughout the presentation and then open it up for questions at the end. Questions will also be entertained throughout.

Slide #3: Purpose

Note: Use the following two slides to discuss the purpose and importance of social fitness for overall health and wellness.



Now we will discuss the purpose of social health and how it impacts the other three domains of fitness.

Slide #4: Purpose

Note: Use this slide to explain the interconnectedness of social fitness and the other domains of fitness.



The Army recommends social fitness as a means to develop and uphold relationships that are fulfilling and meaningful. Social fitness also plays an indispensable role in the morale and esprit de corps that facilitates relationships and enhances resilience.⁶⁰ The Air Force encourages communication, connectedness, social support, and teamwork to promote social fitness and morale.⁶¹ The Navy determines social fitness by whether or not an individual is capable of healthy and successful interaction with peers, family, and community all while fulfilling the duties of deployment, training, and in garrison.⁶²

Social interactions have a wide range of health consequences, including physical, mental, and spiritual enhancement or risk.⁶³ For example, individuals with less and/or stressful social interaction have a higher death rate and progression of cardiovascular disease,

60. Department of the Army, *Comprehensive Soldier Fitness*, 7.

61. Department of the Air Force, *Comprehensive Airman Fitness*, 16.

62. Department of the Navy, *Combat and Operational Stress Control*.

63. Debra Umberson and Jennifer Montez, "Social Relationships and Health: A Flashpoint for Health Policy," *Journal of Health and Social Behavior* 51 (August 2011): 11.

myocardial infarction, atherosclerosis, autonomic dysregulation, high blood pressure, cancer and prolonged cancer recovery, slower wound healing, compromised immune function, chronic conditions, mobility limitations, and more.^{64,65,66,67,68,69,70,71}

Social fitness also has collateral impacts on mental health by lessening stress, enhancing personal control, and improving overall psychological wellbeing.^{72,73,74} While there are numerous health benefits in staying socially fit, there is also a “dark side” of social relationships.⁷⁵ For example, dysfunctional social relationships, whether between partners, friends, or co-workers, can be extremely stressful

64. Karen Ertel, M. Maria Glymour, and Lisa F. Berkman, “Social Networks and Health: A Life Course Perspective Integrating Observational and Experimental Evidence,” *Journal of Social and Personal Relationships* 26 no. 1 (May 2009): 73.

65. Susan Everson-Rose and Tené Lewis, “Psychosocial Factors and Cardiovascular Diseases,” *Annual Review of Public Health*, 26 (April 2005): 474–476.

66. Theodore Robles and Janice Kiecolt-Glaser, “The Physiology of Marriage: Pathways to Health,” *Physiology and Behavior* 79, no. 3 (August 2003): 409–416.

67. Bert Uchino, “Social Support and Health: A Review of Physiological Processes Potentially Underlying Links to Disease Outcomes,” *Journal of Behavioral Medicine* 29, no. 4 (August 2006): 377–80.

68. Janice Kiecolt-Glaser et al., “Emotions, Morbidity, and Mortality: New Perspectives from Psychoneuroimmunology,” *Annual Review of Psychology* 53 (February 2002): 104.

69. Robles and Kiecolt-Glaser, “The Physiology of Marriage.”

70. Mary Elizabeth Hughes and Linda Waite, “Marital Biography and Health at Mid-Life,” *Journal of Health and Social Behavior* 50, no. 3 (September 2009): 354–358.

71. Zhenmei Zhang and Mark Hayward, “Gender, the Marital Life Course, and Cardiovascular Disease in Late Midlife,” *Journal of Marriage and Family* 68, no. 3 (July 2006): 639–642.

72. Sheldon Cohen, “Social Relationships and Health,” *American Psychologist* 59, no. 8 (November 2004): 676–84.

73. Bert Uchino, *Social Support and Physical Health: Understanding the Health Consequences of Relationships* (New Haven, CT: Yale University Press, 2004), 109, 139–140.

74. Kiecolt-Glaser et al., “Emotions, Morbidity, and Mortality.”

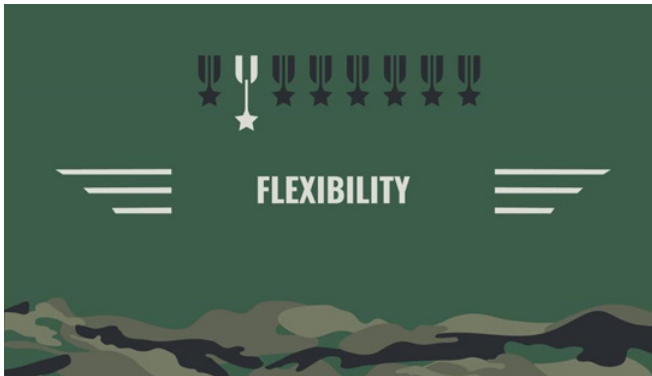
75. Umberson and Montez, “Social Relationships and Health,” 4.

and lead to psychological repercussions.⁷⁶ As chaplains incorporate healthy social interaction into their daily regimen, they will experience increased mental fitness and decreased psychological distress.

Enhanced social fitness has a direct correlation with developing a greater sense of meaning and purpose in life, both of which are facets of spiritual fitness.⁷⁷ For Christians, social health also has major spiritual benefits. Jesus declared, “For where two or three are assembled in my name, there am I in the midst of them.” (Matthew 18:20) As Christians gather to worship, they can experience an elevated sense of spirituality and, oftentimes, find strength and power from God and Jesus Christ as their Higher power. One can conclude that as military chaplains strive to develop healthy relationships with those around them, they will enhance their spiritual fitness.

Slide #5: Social Flexibility Training

Note: Use this slide to explain the benefits of social flexibility.



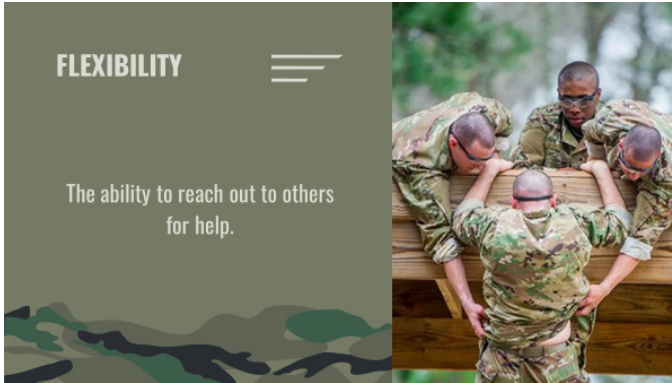
76. Heather Walen and Margie Lachman, “Social Support and Strain from Partner, Family, and Friends: Costs and Benefits for Men and Women in Adulthood,” *Journal of Social and Personal Relationships* 17, no. 1 (February 2000): 5, 28.

77. Peggy Thoits, “Stress, Coping, and Social Support Processes: Where are We? What Next?” *Journal of Health and Social Behavior* 35 (1995): 53–60.

Relationships with family and friends play an imperative role in healing from mental illness.⁷⁸ It is imperative that chaplains recognize when they need help, and that they seek after such help.

Slide #6: Defining Social Flexibility

Note: Use this slide to define social flexibility and suggest its implementation into a social fitness routine.




[Read slide] Chaplains should strive to become more socially flexible in seeking help in order to help improve overall health and wellness.

78. Ulla-Karin Schon, Anne Denhov, and Alain Topor, “Social Relationships as a Decisive Factor in Recovering from Severe Mental Illness,” *International Journal of Social Psychiatry* 55 no. 4 (2009): 343.

Slide #7: Flexibility Training Initiatives

Note: Use this slide to present a number of social flexibility initiatives that chaplains can choose to implement into their self-care plan.

 FLEXIBILITY INITIATIVES		
Exercise	Benefits	How?
Get professional help	Processing Physical, mental, social, and spiritual help Increased humility Strengthened support group	Other chaplains The Family Advocacy Program Non-medical counseling resources TRICARE or the nearest military treatment facility
Reach out to family, friends, and the community for help		Be open and honest to others about struggles Spend quality time with loved ones outside of work Participate in community functions (dining in, dining out, etc.)

This table represents a number of initiatives that will increase social flexibility. Chaplains should strive to incorporate some form of social flexibility training into their self-care plan.

Slide #8: Social Cardiorespiratory Training

Note: Use this slide to explain the benefits of cardiorespiratory training.



Social cardiorespiratory training can have positive long-term effects on relationships. It can improve overall health, enhance social support, increase patience, and strengthen relationships.^{79,80,81,82,83}

79. Stephanie Brown et al., “Providing Social Support May Be More Beneficial Than Receiving It: Results From a Prospective Study of Mortality,” *Psychological Science* 14, no. 4 (July 2003): 320–7.

80. “The Many Benefits of Caring for Others,” Caregiver Stress, May 31, 2017, <https://www.caregiverstress.com/stress-management/daughters-in-the-workplace/benefits-of-caring-for-others-canada/#:~:text=Taking%20care%20of%20someone%20else%20forces%20us%20to%20learn%20about,their%20personal%20and%20professional%20lives.>

81. Gleb Tshipursky, “12 Tips for Happy, Long-Lasting Relationships,” Psychology Today, January 18, 2017, [https://www.psychologytoday.com/us/blog/intentional-insights/201701/12-tips-happy-long-lasting-relationships.](https://www.psychologytoday.com/us/blog/intentional-insights/201701/12-tips-happy-long-lasting-relationships)

82. John Mack, “Qualities of a Good Communicator,” Pen & Pad, November 21, 2016, [https://penandthepad.com/info-8411646-qualities-good-communicator.html.](https://penandthepad.com/info-8411646-qualities-good-communicator.html)

83. Stefanie Safran, “How to Build a Long Lasting Relationship,” wikiHow, November 22, 2020, [https://www.wikihow.com/Build-a-Long-Lasting-Relationship.](https://www.wikihow.com/Build-a-Long-Lasting-Relationship)

Slide #9: Defining Social Cardiorespiratory


Note: Use this slide to define social cardiorespiratory training and suggest its implementation into a social fitness routine.



[Read slide] Chaplains must incorporate some form of social cardiorespiratory training into their mental fitness regimen in order to stay socially fit.

Slide #10: Social Cardiorespiratory Training Initiatives

Note: Use this slide to present a number of social cardiorespiratory training initiatives that chaplains can choose to implement into their self-care plan.

		
Exercise	Benefits	How
Provide support for others	Improved health Longevity Increased patience Loyalty	Instead of looking for ways other people can help you, reach out to help and support others.
Check in on relationships	Improved social support Increased social circle Empathy	Check in with your spouse, family and friends from home or other installations, or people around your current installation.
Active listening	Avoids miscommunication Strengthens relationships Solves disagreement	Make the individual(s) you are talking to your primary focus. Key in on nonverbal and verbal signs. Make eye contact and affirming statements that show you are listening. Validate the other person's feelings

These are examples of initiatives that will improve the social cardiorespiratory system. Using SMART goals, chaplains should strive to incorporate some form of mental cardiorespiratory training into their self-care plan.

Slide #11: Social Core Training

Note: Use this slide to explain the benefits of social core training.



There is a direct link between the social core and positive interpersonal outcomes.⁸⁴ Additionally, social core training may motivate engagement in prosocial actions.^{85,86}

84. Marco Iacoboni, "Face to Face: The Neural Basis of Social Mirroring and Empathy," *Psychiatric Annals* 37, no. 4 (April 2007): 238–9.

85. Nancy Eisenberg and Janet Strayer, *Empathy and its Development* (New York: Cambridge University Press, 1987), 3–13.

86. Martin Hoffman, *Empathy and Moral Development* (New York: Cambridge University Press, 2012), 56–8.

Slide #12: Defining Social Core

Note: Use this slide to define social core and suggest its implementation into a social fitness routine.



[Read slide] Chaplains must incorporate some form of social core training into their self-care plan in order to stay socially fit.

Slide #13: Social Core Training Initiatives

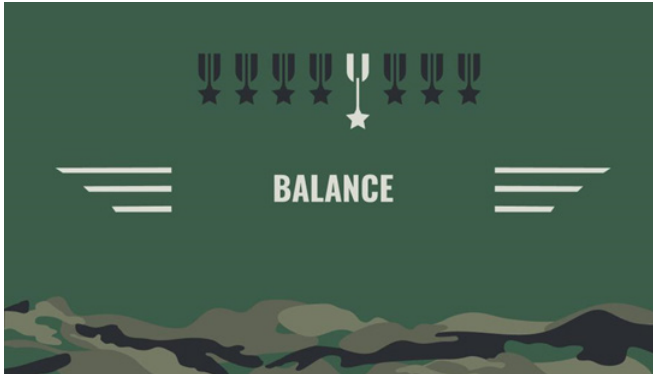
Note: Use this slide to present a number of social core training initiatives that chaplains can choose to implement into their self-care plan.

CORE INITIATIVES	
Exercise	How
Cultivate curiosity about others	Talk to strangers Be curious about others outside of your social circle Seek to understand the world of others
Recognize and confront prejudices	Seek after commonalities as opposed to differences Challenge biases
Place yourself in the shoes of another	Gain direct experiences of other people's lives Attend services of other faiths Go on a humanitarian trip
Listen and open up	Radical listening (be present with what is going on within and seek understanding) Be vulnerable (be open in sharing thoughts, feelings, and experiences)
Empathize with "enemies"	Seek understanding with those who hold different values, morals, beliefs, and ideas than you

These are examples of initiatives that will strengthen the social core. Using SMART goals, chaplains should strive to incorporate some form of social core training into their self-care plan.

Slide #14: Social Balance Training

Note: Use this slide to explain the benefits of social balance training



Social relationships, both formal and informal, have a positive effect on holistic health.⁸⁷ As such, having social balance while under various conditions, especially those of crisis and disaster, can promote self-control and healthy habits.⁸⁸

87. Lisa Berkman and Lester Breslow, *Health and Ways of Living: The Alameda County Study* (New York: Oxford University Press, 1983), 132, 201.

88. Debra Umberson, Robert Crosnoe, and Corinne Reczek, "Social Relationships and Health Behavior Across Life Course," *Annual Review of Sociology* 36 (August 2010): 140–4.

Slide #15: Defining Social Balance

Note: Use this slide to define social balance and suggest its implementation into a social fitness routine.



[Read slide] Social balance is a critical component of social fitness and should be implemented into every self-care plan.

Slide #16: Social Balance Training Initiatives

Note: Use this slide to present a number of social balance training initiatives that chaplains can choose to implement into their self-care plans.

BALANCE INITIATIVES		
Exercise	Benefits	How
Prioritize basic needs	Facilitates deeper and more meaningful connections during crisis	Focus attention on basic needs such as food, safety, and love
Communication	Increases mutual comfort Creates intimacy	Be genuine, empathetic, and warm Smile often Copy body language of others Show enthusiasm for what others share
Positive motivations	Maintains peace and calmness in relationships during crisis and difficulty	Avoid criticism, contention, and defensiveness Demonstrate love Provide appropriate affectionate touch
Notice uniqueness	Improves mood Develops positive behavior and interaction	Share gratitude towards one another Discuss unique and special characteristics Demonstrate trust
Spend time with family	Establishes a better balance between work and family life Improved marital and familial relationships Sets an example for other chaplains to develop their familial relationships	Leave work on time Plan vacations with family Weekly date night with your spouse

These are examples of initiatives that will improve social balance. Using SMART goals, chaplains should strive to incorporate some form of social balance training into their self-care plan.

Slide #17: Social Resistance Training

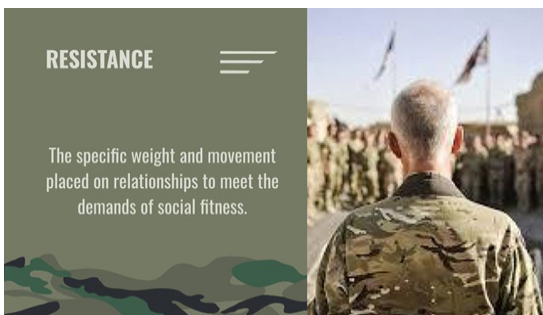
Note: Use this slide to explain the benefits of social resistance training.



Social resistance training is crucial in preparing and strengthening relationships for combatting traumatic material and promoting self-care.

Slide #18: Defining Social Resistance

Note: Use this slide to define social resistance and suggest its implementation into a social fitness routine.



[Read slide] Chaplains should strive to incorporate social resistance training into their self-care plan.

Slide #19: Social Resistance Training Initiatives

Note: Use this slide to present a number of social resistance training initiatives that chaplains can choose to implement into their self-care plan.

Exercise	Benefits	How
Prioritize basic needs	Facilitates deeper and more meaningful connections during crisis	Focus attention on basic needs such as food, safety, and love
Communication	Increases mutual comfort Creates intimacy	Be genuine, empathetic, and warm Smile often Copy body language of others Show enthusiasm for what others share
Positive motivations	Maintains peace and calmness in relationships during crisis and difficulty	Avoid criticism, contention, and defensiveness Demonstrate love Provide appropriate affectionate touch
Notice uniqueness	Improves mood Develops positive behavior and interaction	Share gratitude towards one another Discuss unique and special characteristics Demonstrate trust
Spend time with family	Establishes a better balance between work and family life Improved marital and familial relationships Sets an example for other chaplains to develop their familial relationships	Leave work on time Plan vacations with family Weekly date night with your spouse

These are examples of initiatives that will increase social resistance strength. Using SMART goals, chaplains should strive to incorporate some form of mental resistance training into their self-care plan.

Slide #20: Conclusion



Slide #21: Conclusion

Note: Use this slide to wrap up Module 4 and review the content that was discussed.



[Read slide]

Slide #22: Questions

Note: Use this slide to provide chaplains with time to ask questions.



Module 5: Spiritual Fitness

Slide #1: Introduction

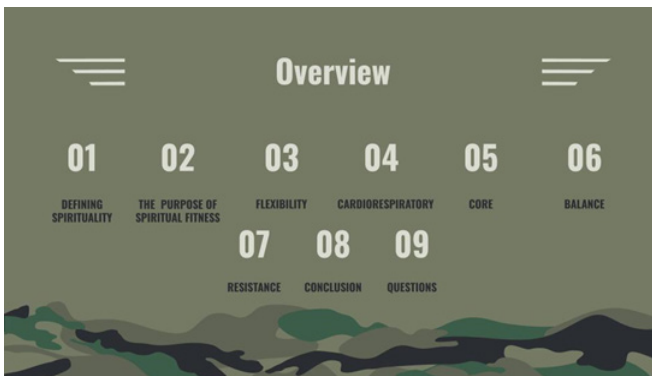
Note: Use this slide to introduce yourself and discuss the purpose of the presentation.



I am Chaplain ___ and this is the fifth and final training on An Integrative Self-care Plan for Christian Military Chaplains. This last module will focus on enabling chaplains to reach optimal levels of spiritual fitness.

Slide #2: Overview

Note: Use this slide to give a brief overview of the content that will be discussed throughout the presentation.



First, we will discuss the meaning of spirituality. Second, we will go over the purpose of spiritual fitness and its interconnectedness with the other three domains of fitness. Third, we will analyze the spiritual implications of flexibility, cardiorespiratory, core, balance, and resistance training. We will summarize what we have learned throughout the presentation and then open it up for questions at the end. Questions will also be entertained throughout.

Slide #3: Defining Spirituality

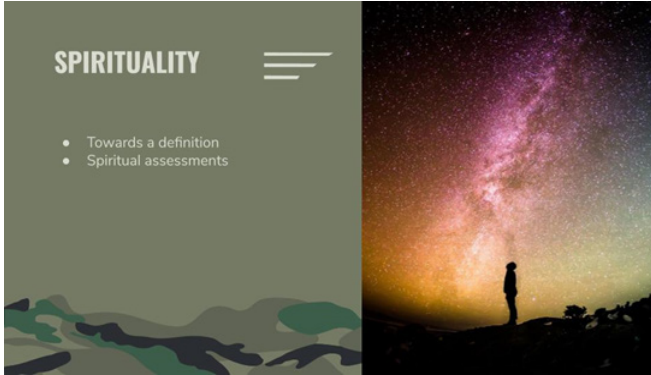
Note: Use the following two slides to discuss the definition of spirituality.



Now we will discuss what the word spirituality means.

Slide #4: Defining Spirituality

Note: Use this slide to discuss the various definitions of spirituality and provide information pertaining to spirituality assessment tools.



Spirituality has become an increasingly difficult word to define over the past 20 years.⁸⁹ In 2005, McCaroll-Butler reviewed 76 studies on spiritual health from five accredited healthcare databases. In conducting a meta-analysis of her findings, the overall trending definitions of spirituality were separated into 32 definitions and grouped into eight primary themes according to the frequency they appeared in the articles: (1) expressions of seeking after meaningful and existential fulfillment and purpose (used in 29 of the 32 definitions); (2) interrelatedness between one's own self, others, and the world (used in 26/32); (3) characterized notions pertaining to God/god(s) as the driving force of spirituality (used in 22/32); (4) a principle, although non-personified, that inspires, heartens, and revives (used in 14/32); (5) a coalescing power, differing from a principle, that creates and unites power for integrative energy (used in 12/32); (6) the ability to surpass the range of normalcy and become empowered throughout the human experience (used in 12/32); (7) a private matter, not to be

89. Martin Rovers and Lucie Kocum, "Development of a Holistic Model of Spirituality," *Journal of Spirituality in Mental Health* 12, no. 1 (January 2010): 2.

seen or heard by others (used in 7/32); and (8) the hope that enables one to survive and endure times of difficulty (used in 7/32).⁹⁰

In addition to the vast number of differing definitions of spirituality, there also exists a wide range of spirituality assessments to determine one's "level" of spirituality.⁹¹ The Spiritual Well-Being Scale (SWBS) is used to measure the quality of life and well-being concerning both transcendental and existential meaning.⁹² The Index of Core Spiritual Experiences (INSPIRIT) is used to distinguish transcendent experiences related to the existence of God or a Higher Power.⁹³ The Spiritual Assessment Inventory (SAI) is used to evaluate one's spiritual progression through the lenses of interconnectivity with others and contemplative spirituality.⁹⁴ The Spiritual Involvement and Beliefs Scale (SIBS-R) measures one's spiritual well-being according to their spiritual practices and faith.⁹⁵ The Faith Maturity Scale uses both the vertical trajectory to analyze one's relationship with God and the horizontal trajectory to assess social service with people in general.⁹⁶ The Spiritual Well-Being Questionnaire uses four categories (personal, communal, environmental, and transcendental) to determine, again, the "level" of one's spirituality.

90. Pamela McCaroll-Butler, "Assessing Plurality in Spirituality Definitions," in *Spirituality and Health: Multidisciplinary Explorations*, ed. Augustine Meier, Thomas St. James O'Connor, and Peter Vankatwyk (Waterloo, Ontario, Canada: Wilfred University Press, 2005), 43–49.

91. Martin Rovers, "Development of a Holistic Model of Spirituality," 4.

92. Will Slater, Todd Hall, and Keith Edwards, "Measuring Religion and Spirituality: Where are we and where are we going?" *Journal of Psychology and Theology* 29, no. 1 (March 2001): 4, 7–9.

93. Jared Kass et al., "Health Outcomes and a New Index of Spiritual Experience," *Journal for the Scientific Study of Religion* 30, no. 2 (June 1991): 203–211.

94. Rebecca Stanard, Daya Sandhu, and Linda Painter, "Assessment of Spirituality in Counseling," *Journal of Counseling & Development* 78, no. 2 (December 2000): 204–7.

95. Peter Bension et al., "The Faith Maturity Scale: Conceptualization, Measurement, & Empirical validation," *Research in the Social Scientific Study of Religion* 5 (1993): 1–26.

96. Bension et al., "The Faith Maturity Scale," 1–26.

All in all, spirituality is a complex idea. However, it is generally described as some supreme force or Being that gives purpose and meaning.

Slide #5: Purpose

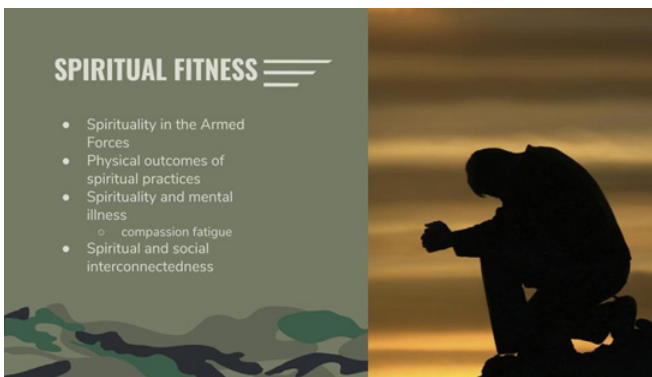
Note: Use the following two slides to discuss the purpose and importance of spiritual fitness for overall health and wellness.



Now we will discuss the purpose of spiritual health and how it impacts the other three domains of fitness.

Slide #6: Purpose

Note: Use this slide to explain the interconnectedness of spiritual fitness and the other domains of fitness.



How are these definitions and assessments implemented into the Armed Forces models of spiritual fitness? The Army identifies spiritual fitness as one's ability to find meaning in life and stay true to core values, beliefs, and identity. These defining components of the essence of a person can be strengthened through personal, philosophical, psychological, and/or religious teachings or beliefs.⁹⁷ When addressing spiritual fitness, the Air Force refers to one's abilities to stick to core values, persevere through difficult times, develop a larger perspective of one's self and others, and find meaning and purpose in life's challenges.⁹⁸ The Navy offers that spiritual fitness enhances one's ability to make correct moral decisions, and find meaning, purpose, and hope while remaining true to core values and beliefs.⁹⁹

Spirituality has been shown to play a positive role in physical health. Research involving subjects of all ages, genders, and religions shows that those who attend church, pray daily, and perform other daily spiritual practices have lower susceptibility to heart disease, cirrhosis, emphysema, myocardial infarction, chronic pain, cholesterol, stroke, kidney failure, and cancer mortality while simultaneously increasing positive health habits and longevity.¹⁰⁰ Those who are spiritual are physically healthier.

There are also a number of psychological and mental benefits to spiritual fitness. For example, for chaplains specifically, some research suggests that higher levels of religiousness and spirituality may prevent compassion fatigue and burnout while also increasing

97. Department of the Army, *Comprehensive Soldier Fitness*.

98. Department of the Air Force, *Comprehensive Airman Fitness*.

99. Department of the Navy, *Combat and Operational Stress Control*.

100. Key Seybold and Peter Hill, "The Role of Religion and Spirituality in Mental and Physical Health," *Current Directions in Psychological Science* 10, no. 1 (February 2001): 22.

spiritual growth and compassion satisfaction.¹⁰¹ People who are religious and/or spiritual are also generally more optimistic and cognitively efficient.¹⁰² Similarly, another study conducted by the Mental Health Foundation found that those who identified as spiritual and/or religious felt as though they were guided, grounded, had a greater overall sense of purpose, were allowed more opportunities to express personal pain, inner love, and compassion for others, and felt more comfort throughout their day.¹⁰³ As one becomes spiritually fit, one clearly profits psychologically. .

An individual's relationship with God can have a great deal of impact on familial satisfaction through supported morals and values, augmented love and understanding, forgiveness, compromise, and sacrifice. All these examples improve familial quality and social fitness.^{104, 105} Other studies suggest that spirituality can also have an impact on relationships outside of the immediate family. One of these findings is the positive correlation between spirituality and the motivation and ability to lead others. It was discovered that spirituality played a critical role in helping leaders make decisions and, as a result, better connect with their co-workers or clients.¹⁰⁶

101. Newmeyer et al., "Spirituality and Religion as Mitigating Factors in Compassion Fatigue Among Trauma Therapists in Romania," *Journal of Psychology and Theology* 44, no. 2 (June 2016): 142–151.

102. Sheena Sethi and Martin Seligman, "Optimism and Fundamentalism," *Psychological Science* 4, no. 4 (July 1993): 256–259.

103. Alison Faulkner and Vicky Nicholls, "Strategies for Living," *Journal of Integrated Care* 9, no. 1 (February 2001): 32–36.

104. Christopher Ellison, Amy Burdette, and Bradford Wilcox, "The Couple That Prays Together: Race and Ethnicity, Religion, and Relationship Quality Among Working Age Adults," *Journal of Marriage and Family* 72, no. 4 (August 2010): 963–975.

105. Prabu David and Laura Stafford, "A Relational Approach to Religion and Spirituality in Marriage: The Role of Couples' Religious Communication in Marital Satisfaction," *Journal of Family Issues* 36, no. 2 (December 2015): 233.

106. Stephen Jacobsen, "Spirituality and Transformational Leadership in Secular Settings: A Delphi Study" (PhD diss., Seattle University, WA, 1994).

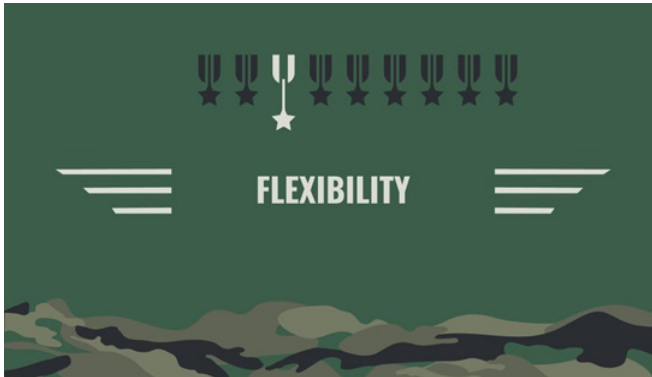
In *Wasting Time with God: A Christian Spirituality of Friendship with God*, Klaus Issler says the following of a spiritual relationship with God:

Given the opportunity—to live now or to live during the time when Jesus walked this very earth—which would we choose? Some of us would jump at the offer to be with Jesus. To be comforted by his smile and reassured by his embrace. To see his miracles firsthand—the lame walking, the blind with sight. To chat with him as did Mary, Martha and Lazarus. Does your heart yearn for such intimacy and immediacy? Yet why might Christians dream of seeing Jesus, touching him, hearing him? Is it because we detect some distance in our relationship with God?¹⁰⁷

It is in Christian nature to use spirituality as a means to develop a more intimate relationship with both humankind and the Divine. As a chaplain values and practices spirituality, they can experience increased closeness to family, friends, and God.

Slide #7: Spiritual Flexibility Training

Note: Use this slide to explain the benefits of spiritual flexibility.

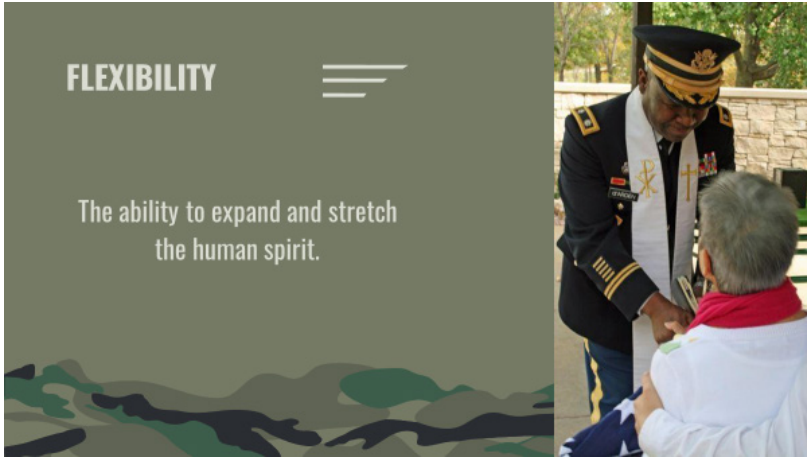


107 Klaus Issler, *Wasting Time with God: A Christian Spirituality of Friendship with God* (Westmont, Illinois: IVP Books, 2001), 13.

Doctrinally, those who are spiritually flexible are in a better place to see and feel God's presence, experience gladness and joy, and spiritually transform.

Slide #8: Defining Spiritual Flexibility



Note: Use this slide to define spiritual flexibility and suggest its implementation into a spiritual fitness routine.



[Read slide] Chaplains should strive to become more spiritually flexible in order to improve overall health and wellness.

Slide #9: Spiritual Flexibility Training Initiatives

Note: Use this slide to present a number of spiritual flexibility initiatives that chaplains can choose to implement into their self-care plan.

 FLEXIBILITY INITIATIVES 			
Exercise	Doctrine	Benefits	How
Forsake worldly possessions	Mark 1:16-18, Hebrews 13:5, Deuteronomy 31:6	Discipleship (<i>mathetes</i> or "student" or "indentured servant" to the Master Teacher) You will never feel forsaken by God The Lord will "go with thee"	Stress less about receiving and focus more on giving Consecrate your time and talents to God Donate to charities
Reframe thoughts	Joshua 1:9, Psalms 118:24, Philippians 4:8	Companionship of God Gladness	Change the D in "Disappointment" to an H and you have "His Appointment" - 1 Corinthians 1:3-7
Reach out to God	Psalms 143:6, Romans 10:13, Matthew 6:33, Psalms 50:15, 1 Peter 5:7	Salvation [from all things] Spiritual transformation Peace All will be "added to you"	Prayer Bible study Sacraments Ordinances

This table represents a number of initiatives that will increase spiritual flexibility. Chaplains should strive to incorporate some form of spiritual flexibility training into their self-care plan.¹⁰⁸

108. The tables in the modules as to spiritual flexibility were developed by the author with scriptural content and themes that relate to exercise, doctrine, benefits, and application.

Slide #10: Spiritual Cardiorespiratory Training

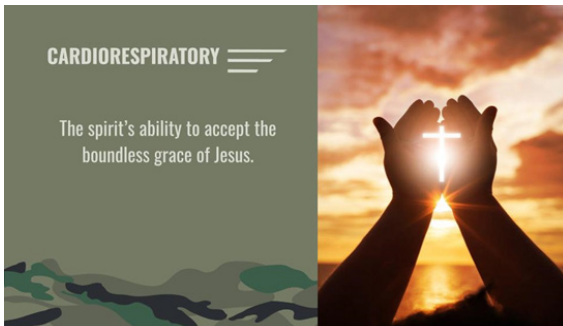
Note: Use this slide to explain the benefits of cardiorespiratory training.



According to Christian doctrine, spiritual cardiorespiratory training enables, changes, refreshes, inspires, and heals.

Slide #11: Defining Spiritual Cardiorespiratory



Note: Use this slide to define spiritual cardiorespiratory training and suggest its implementation into a spiritual routine.



[Read slide] Chaplains must incorporate some form of social cardiorespiratory training into their mental fitness regimen in order to stay spiritually fit.

Slide #12: Spiritual Cardiorespiratory Training Initiatives

Note: Use this slide to present a number of spiritual cardiorespiratory training initiatives that chaplains can choose to implement into their self-care plan.

 CARDIORESPIRATORY INITIATIVES 			
Exercises	Doctrine	Benefits	How
Reflect on why you can approach the throne of God with confidence in His grace	Hebrews 4:16, Romans 6:23, John 3:16	Obtain mercy Enabling grace	<ul style="list-style-type: none"> • Write your thoughts and feelings down • Share your thoughts and feelings with a friend • Praise God for His goodness • Tell yourself that the grace of Jesus is readily available to you and all who desire it
Reflect on the miracle of repentance	Matthew 3:8, Isaiah 55:6-7, Acts 3:19, 26, Galatians 5:22-23	Change of heart Refreshing newness of life Fruits of the Spirit (love, joy, peace, longsuffering, gentleness, goodness, faith, meekness, and temperance)	
Discover God's devotion to you	Romans 8:31, 37-39	A conviction that God loves you You can conquer your life because Jesus already did "Neither death, nor life, nor angels, nor principalities, nor powers, nor things present, nor things to come, nor height, nor depth, nor any other creature, shall separate us from the love of God."	
Remember the blood stained garden, nail-driven cross, and empty tomb	Ephesians 2:8, Galatians 5:6, 1 Peter 2:24, Leviticus 17:11, Galatians 2:20,	Christ lives within each of you You are saved You can be physically, mentally, socially, and spiritually healed	

These are examples of initiatives that will improve the spiritual cardiorespiratory system. Using SMART goals, chaplains should strive to incorporate some form of spiritual cardiorespiratory training into their self-care plan.

Slide #13: Spiritual Core Training

Note: Use this slide to explain the benefits of spiritual core training.



Doctrinally, Jesus Christ is the originating force of all hope, love, peace, and power. In training our spiritual core to strengthen our relationship with Jesus, we will be more aware of his boundless grace and have a greater sense of his presence within us and others.

Slide #14: Defining Spiritual Core

Note: Use this slide to define spiritual core and suggest its implementation into a spiritual fitness routine.



[Read slide] Chaplains must incorporate some form of spiritual core training into their self-care plan in order to stay spiritually fit.

Slide #15: Spiritual Core Training Initiatives

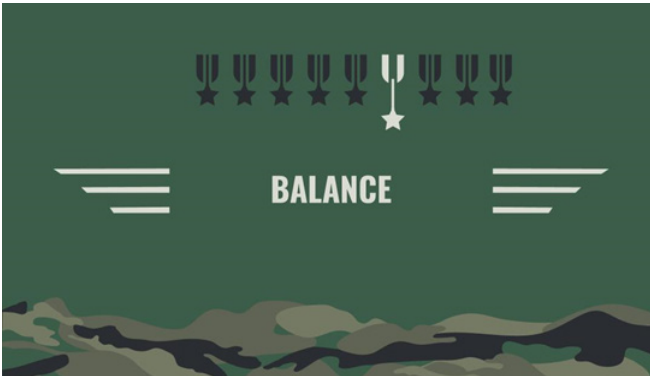
Note: Use this slide to present a number of spiritual core training initiatives that chaplains can use to implement into their self-care plan.

CORE INITIATIVES			
Exercises	Doctrine	Benefits	How
Discover Jesus within	2 Corinthians 13:5, 4:6-7, Romans 8:10, Galatians 1:15-16, 2:20, 4:19, Ephesians 3:17, Colossians 1:27	Hope Constant companionship Our spirit is life Christ will appear more frequently throughout our day God's glory can shine through us to help others	Love him Love yourself Love others
Jesus-centered study	John 5:39	Develop a more intimate relationship with Jesus	Compare and contrast the stories of Jesus in each of the four Gospels Study the several different names of Jesus (i.e. Savior, Redeemer, Messiah, Son of God, Son of Man, etc.) and their significance Reflect on the symbols of Jesus in scripture and find new meanings behind them (i.e. Bread of Life, Bridegroom, Alpha and Omega, etc.)
Praise Jesus	Luke 24:52, Colossians 3:14-17, Hebrews 12:28	Joy Love Peace Wisdom Receiving the kingdom Mercy	Music Praise Listening Give thanks for the world in which we live and take advantage of its beauty

These are examples of initiatives that will strengthen the spiritual core. Using SMART goals, chaplains should strive to incorporate some form of spiritual core training into their self-care plan.

Slide #16: Spiritual Balance Training

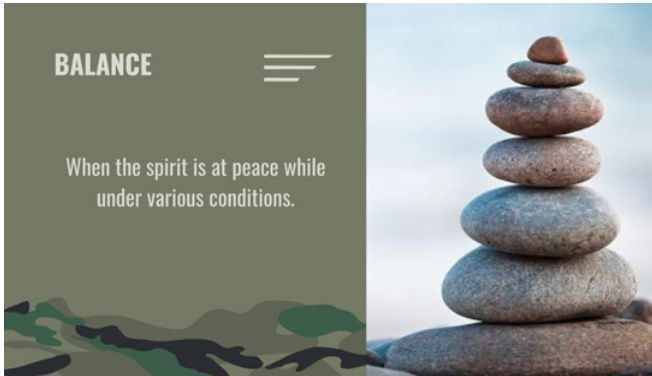
Use this slide to explain the benefits of spiritual balance training.



Doctrinally, spiritual balance can bring about wisdom, understanding, power, healing, and rest. Practicing spiritual balance is one of the best ways to find rest in the presence of God and experience the guidance of the Holy Spirit.

Slide #17: Defining Spiritual Balance

Note: Use this slide to define spiritual balance and suggest its implementation into a spiritual fitness routine.



[Read slide] Spiritual balance is a critical component of spiritual fitness and should be implemented into every self-care plan.

Slide #18: Spiritual Balance Training Initiatives

Note: Use this slide to present a number of spiritual balance training initiatives that chaplains can choose to implement into their self-care plans.

BALANCE INITIATIVES			
Exercise	Doctrine	Benefits	How
Centering prayer	<p><i>"The Father spoke one Word, which was His Son, and this Word He always speaks in eternal silence, and in silence must it be heard by the soul."</i></p> <p><i>"It is best to learn to silence the faculties and to cause them to be still so that God may speak."</i></p> <p><i>"The soul that is quick to turn to speaking and conversing is slow to turn to God."</i></p> <p><i>"What we need most in order to make progress is to be silent before this great God with our appetite and with our tongue, for the language he best hears is silent love."</i></p> <p>- Saint John of the Cross</p>	<p>Wisdom</p> <p>Understanding</p> <p>Rest in the presence of God</p> <p>Strengthened capacity for inner silence</p> <p>Increased sensitivity to the Spirit in daily life</p>	<ol style="list-style-type: none"> 1. Choose a sacred word as the symbol of your desire to be with God in prayer. 2. Find a comfortable position, close your eyes, and silently introduce the sacred word as the symbol of your desire. 3. When your mind wanders, gently return to your sacred word. 4. Before finishing your prayer, remain in silence with eyes closed for a few minutes.
Divine Therapy	Acts 10:38, Luke 8:40-48	<p>Power</p> <p>Healing</p> <p>Virtue</p> <p>Relief from affliction</p>	<ol style="list-style-type: none"> 1. Accept that the wounded self is a human disease that can be healed, and that Jesus is the divine physician. 2. Repent or change the direction in which you are looking for happiness. 3. Live life under the direction of the seven gifts of the Spirit (counsel, prudence, fortitude, reverence, wisdom, understanding, and knowledge)

These are examples of initiatives that will improve spiritual balance. Using SMART goals, chaplains should strive to incorporate some form of spiritual balance training into their self-care plan.

Slide #19: Spiritual Resistance Training

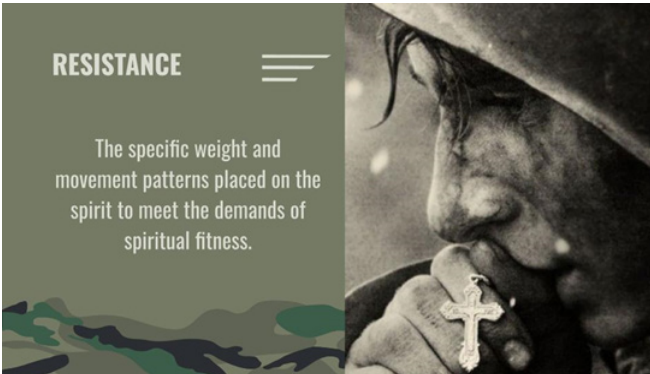
Note: Use this slide to explain the benefits of spiritual resistance training.



Doctrinally, spiritual resistance training can drastically increase spirituality, inspiration, purpose, humility, resilience, and love for self, others, and God.]

Slide #20: Defining Spiritual Resistance

Note: Use this slide to define spiritual resistance and suggest its implementation into a spiritual fitness routine.



[Read slide] Chaplains should strive to incorporate spiritual resistance training into their self-care plan.

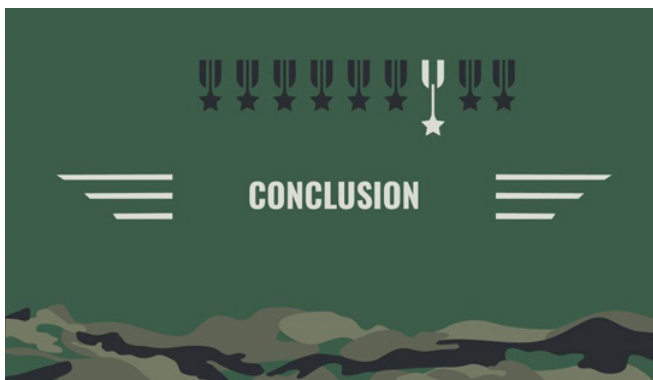
Slide #21: Spiritual Resistance Training Initiatives

Note: Use this slide to present a number of spiritual resistance training initiatives that chaplains can choose to implement into their self-care plan.

RESISTANCE INITIATIVES			
Exercise	Doctrine	Benefits	How
Read the Bible	2 Timothy 3:16, John 8:63, Hebrews 4:12, Matthew 4:1-11	Inspiration Spiritual nourishment Discernment Resiliency	Use a new translation. Read out loud. Listen to the audio while commuting to work, cooking, cleaning, or exercising. Use commentaries.
Keep a hand of God journal	Jeremiah 30:2, Psalm 119:15, Job 19:23-25	Better understanding of the nature of God Opened eyes and heart to the miracles of God Elevated spirit and awareness Further conviction of the reality of Jesus and faith in God	"But seek ye first the kingdom of God, and his righteousness; and all these things shall be added unto you." (Matthew 6:33) 1. Look for God's hand of God in your life. 2. Look for the hand of God in others' lives. 3. Keep a record of your findings.
Fasting	Matthew 6:18, Isaiah 58:5-8	Humility Increased spirituality Resilience Spiritual light Demonstration of love for God	Sacrifice something that is important to you (food, drink, technology, hobbies, etc.) for a designated period of time as a symbol of your devotion to God.
Forgiveness	Ephesians 4:2, Mark 11:25, Matthew 6:12, Romans 3:23	Restores broken relationships with self and others Emulates the example of Jesus Christ	Study the concept of grace and forgiveness. Seek forgiveness from others. Forgive others. Forgive yourself.

These are examples of initiatives that can increase and restore spiritual strength. Using SMART goals, chaplains should strive to incorporate some form of spiritual resistance training into their self-care plan.

Slide #22: Conclusion



Slide #23: Conclusion

Note: Use this slide to wrap up Module 5 and review the content that was discussed.



The slide features a dark green background with a white title 'SPIRITUAL FITNESS' centered at the top, flanked by three horizontal white lines on each side. Below the title is a table with five rows. Each row has a dark green header cell on the left and a white text cell on the right. The table is set against a background of stylized green and blue mountains at the bottom.

FLEXIBILITY	Those who are spiritually flexible are disciples, walk with God, are at peace, and experience a spiritual transformation.
CARDIORESPIRATORY	This training initiative allows one to experience grace, obtain mercy, experience a change of heart, and be physically, mentally, socially, and spiritually healed.
CORE	This initiative promotes hope, joy, love, peace, and helps us develop a more intimate relationship with Jesus and find him in yourself.
BALANCE	Spiritual balance creates an environment of understanding, power, healing and rest in the presence of God.
RESISTANCE	Spiritual strength and resistance training increases spirituality, inspiration, purpose, and love for self, others, and God.

[Read slide]

Slide #24: Example Slide

Note: Use this slide to show an example of how to implement the chaplain self-care plan.

TYPE	EXERCISE	SUFFICIENT	MAINTAINABLE	ADAPTABLE	RESEARCH/REVELATION	TRY AGAIN
FLEXIBILITY	Forgive Worldly Possessions - HEBY	This sacrifice is not too much nor too little	2 weeks is easily maintainable	If trips are canceled due to COVID, there are backup plans set in place (domestic trips)	I feel confident that this is where God wants me to be at this time in my life	If HEBY falls through, I will look for other ways in which I can serve
CARDIORESPIRATORY	Remember the blood soaked, nail-driven cross, and empty tomb	I will not let remembering get in the way of responding	I can easily accomplish this each morning upon waking up.	I can reflect in thought, on paper, with Janessa and family, or at church	I feel like one thing that God wants me to better understand is His Son's sacrifice for me and all of humankind. This is the perfect exercise to come to know that.	If I miss a day of actively remembering, I am committed to trying again the next day
CORE	Jesus - centered Study	15 minutes a day of devoted Jesus centered study is not too much nor too little	I can always find 15 minutes in the day regardless of where I am at in life	I can use paper scriptures, mobile scriptures, General Conference talks, podcasts, and other means by which I can center my study on Jesus	*See above*	If I miss one day of study, the I feel confident in resuming my studies the next day
BALANCE	Centering Prayer	A morning meditation and centering prayer will be sufficient	I meditate every day aheady, and this is an easily supplement to that	If I am not in a place where I can practice my form of centering prayer, I can use my sacred word in my thoughts and actions	I hope to develop a greater sensitivity to the Spirit and this is a great way to do so	If I do become desensitized, like mindfulness, I am committed to "bringing it back" and trying again
RESISTANCE	Read the Bible	I have no time-limits or goals other than to read at least one verse a day in the NIV	I can always make time for one verse	I will have several ways in which I can read from the NIV	In asking God how I can better prepare myself to serve His children in the Armed Forces, I felt inspired to read from the NIV	There is no reason why I will not be able to resume my NIV study after missing a day

Slide #25: Questions



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Image References

Module 1:

<https://twitter.com/USArmy/status/683311563462148096/photo/1> [slide 4]

<https://www.military.com/military-fitness/workouts/fitness-for-beginners> [slide 8]

<https://www.stripes.com/news/us-soldiers-march-through-camp-humphreys-to-honor-korean-war-medal-of-honor-recipient-1.495729> [slide 10]

<https://www.fringesport.com/blogs/news/no-gym-required-5-workouts-you-can-do-while-deployed> [slide 12]

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<https://zacheven-esh.com/8-navy-seal-self-confidence-tips/> [slide 16]

Module 2:

<https://www.istockphoto.com/photos/military-fitness> [slide 4]

<http://blog.questnutrition.com/5-stretches-to-start-your-day-off-right/> [slide 7]

<https://www.military.com/military-fitness/general-fitness/running-and-cardio/running-strategies-timed-runs-long-runs-and-rucking> [slide 9]

<https://sistacafe.com/summaries/29509> [slide 12]

https://www.army.mil/article/208976/usma_photo_of_the_week_walking_the_line [slide 15]

http://www.forthoodsentinel.com/sports/soldier-bodybuilder-places-2nd/article_4993ef94-abbd-11e8-9c23-f777dabf8799.html [slide 18]

<https://www.foodandwine.com/news/army-wants-pay-volunteers-200-eat-only-mres-3-weeks> [slide 21]

Module 3:

<https://theholisticjournal.org/wellbeing/mind/body-within-the-mind/> [slide 4]

<https://wasatchfamilytherapy.com/archives/31555> [slide 6]

<https://tinybuddha.com/blog/21-ways-create-calm-mind-without-meditating/> [slide 10]

<http://dev.tmctraining.net/service/mental-core-exercises/> [slide 13]

<https://exploringyourmind.com/discover-wellness-integral-health-and-body-mind-balance/> [slide 16]

Module 4:

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Module 5:

https://medium.com/@jennifermonahan_28426/trusting-in-a-higher-power-cc03de-3a4eae [slide 4]

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