

# A Leader's Duty in Tragedy and Loss

by Francisco M. Hernandez

## Introduction

Make no mistake about it, the United States is a nation at war, and inherent in war, is the loss of life. Today, the United States continues its war on terror against radical ideologies, extremist and criminal organizations, and influencers of anarchy and violence. Since the Global War on Terrorism began on September 11, 2001, the U.S. military has lost almost 7,000 service members in combat theaters of operation and over 3,300 to suicide.<sup>1</sup> For those surviving family members left behind, the loss of their loved one brings forth many questions, challenges, and emotions as they work through their loss and cope with the grief. Following these tragedies, surviving families can turn to various individuals, organizations, and institutional services for counseling, outreach, and support.<sup>2</sup> Each of these elements have an important role and function; however, a key figure to their healing process remains underutilized; the military leader. Similarly, leaders may not understand how beneficial a connection to these surviving families is to their healing process, as well.

## Background and Context

Military leaders are charged with the overall responsibility for the safety, health, and welfare of the service members assigned to them, creating a unique relationship between the leader and the service member. When tragedy befalls one of their assigned members, the loss affects these military leaders in ways that cannot be fully understood, except by the surviving family members. It is in the similarity of their responsibilities where military leaders and surviving families can find a space to connect. In tragedy and loss, leaders may find that they have an innate obligation or duty to reach out to surviving family members. By acting upon this calling, leaders may find that they are able to provide a support service to families that cannot be replicated or offered elsewhere, while also improving their own resiliency and the resiliency of others during these most challenging of times.

However, for military leaders to connect with surviving families, provide support, and improve their resiliency, better care must be taken of leaders to ensure that they are equipped with necessary tools to endure through such tragedy and loss. Although there are military sponsored programs designed to support surviving family members throughout such hardship, there is little focus outside of the prescriptive psychological and psychiatric care offered by behavioral and mental healthcare professionals on supporting military leaders as they work through their own grief, possibly connect to surviving family members and continue to lead warriors.<sup>3</sup> Research has been conducted to help improve the resiliency of military leaders, however the research and programs are generally focused on how to help leaders overcome stress caused by deployments, not on how to support them as they connect with other leaders and families who have endured loss.

As we continue examining the operational environment of today senior leaders, analysts, strategists, and historians all seem to have one common view of tomorrow; the future of the U.S. includes warfare. If the U.S. continues to send its military into the global arena to preserve its national security and interest, is it not a reasonable expectation that the military and its leaders need to be better prepared for warfare and on what to expect from warfare? The first Special Operations Forces' truth states, "Humans are more important than

hardware.”<sup>4</sup> In short, investing in the development of service members is better than developing weapons systems.

Chaplain (Major) Doug Windley, a Tragedy Assistance Program for Survivors (TAPS) survivor care team counselor and brigade chaplain, summarized it best in saying, “we are human first, and a warrior second.” Further, Chaplain Windley expressed that prior to deployment the human element must be prepared for those things we expect to face as a result of combat, to include how we deal with loss and grief. Preparedness in this fashion helps ensure that service members become better warriors while also enhancing their combat-readiness.<sup>5</sup> When it comes to leaders dealing with loss and trying to make sense of it, inaction is often the result of fright. Leaders need to understand what they can do and whom they can impact before, during, and after such tragedy.

### **What Leaders Can Provide**

If we want our leaders to be more resilient, to connect with surviving families, and support the future leaders of tomorrow, what is the problem that must be addressed and answered to get us to our desired state? In an era of rapid innovation, technology, and warfare, how do we better equip military leaders for the harshest moments of leadership, preparing them for all the duties and responsibilities of leading following the loss of a service member under their lead?

What can a leader who is better prepared for the realities of loss provide that another leader cannot? Within the context of this article, we argue there are two things a better-prepared leader can provide:

A leader can offer better support to surviving families following the loss of their loved one.

A leader can provide better support to future leaders, offering counseling and mentorship on what to expect following the loss of a service member.

By analyzing some of the support services offered, as well as interviews with leaders, surviving family members, and field professionals this article will discuss the benefits and challenges of leader-to-family connections. It will also address the importance of leader-to-leader counseling following loss, and will conclude with recommendations on how we can better support and prepare leaders for the most challenging of situations they may face. The intent is that leaders become more resilient for the surviving families, for those that they continue to lead, and for themselves. No leader or family ever wants to face such circumstances, yet today’s leaders must recognize that service members’ lives will continue to be lost in the ongoing fight against terror, in non-combat related incidents, and to enemies not yet known.

### **Literature Review<sup>6</sup>**

Researchers, including the Department of Defense’s 2007 Task Force on Mental Health made recommendations to improve service member and family access to mental health services and recommendations to make cultural changes within the military that encourage outreach to psychological health services following a traumatic event.<sup>7</sup> The Task Force on Mental Health acknowledges the inherent risks that military members face in the performance of their duties, as well as the psychological impacts upon both the military members and surviving families once a service member passes.<sup>8</sup> Research in reports such as the Task Force on Mental Health Report are thorough and the recommendations are often valid. However, the research and outputs produced fail to address the focus of this article; namely leaders engaging with surviving families, leaders providing support to future leaders who may experience loss as leaders, and how to better equip leaders to lead affectively following loss.

*Military Psychology* published an article discussing 2016 research by the Center for the Study of Traumatic Stress, Uniformed Services University of the Health Services, providing examples of how military units

and organizations afford social support services to its leaders and members that are designed to decrease psychological stress brought on from combat and non-combat related experiences.<sup>9</sup> In the article, the authors define social support as “one’s overall social network and its associated functional outcomes (e.g., emotional support)...[and] moderates behavioral and physiological stress response outcomes”.<sup>10</sup> Further, they argue and demonstrate that in military members, the greater the perceived social support, the stronger the resiliency and lower the depression is following a combat related traumatic event. However, the authors also acknowledge that the preponderance of research is only focused on military-to-military support (due to shared experiences) and that there is not enough research on how to successfully integrate external support services, such as those that would include family, friends, and outside organizations.<sup>11</sup> This study further illustrates the need to conduct research that incorporates other methods, including expanding social support networks to improve resiliency and help all affected in coping with and through loss. This is important because “In any significant event, people tend to gravitate to those who have experiences something similar. Connecting with people who have suffered a loss like yours can be very helpful.”<sup>12</sup>

In an era of social media connectedness, building networks is not too great a challenge. The *Prism* article, “Building a Network,” identified four areas of the networking process: first, the narrative is the story or event that attracts individuals to a network; second, the social aspect is the diversity within a network; third, the doctrine of the network is the rules or concepts that determine the network’s mission or use; finally, the technological kit is that which allows the ease of communication to occur. When effectively used together, a leader can facilitate a variety of networks in which to operate, both as the supported and the supporter.<sup>13</sup>

If we have determined that the building of networks, social or otherwise, is important to the long-term successes of our military, diplomatic, and development strategies, could the same concept be applied to the support offered and provided to our leaders? The authors of an article in *The Leadership Quarterly* contend that the most valuable resource to reduce psychological pressure in a leader is the emotional support and palpable concern from his or her senior leaders, as this has shown to improve overall well-being, increase performance, and lower various forms of stress, including PTSD. However, the authors also note that although the benefits of supportive leadership are valuable, more research needs to be conducted to understand how stressors truly impact a leader’s ability to provide comfort or support to subordinates.<sup>14</sup>

### **Further Insights**

In addition to current studies and literature, some senior leaders recognize the existing gap between the military and society in relation to loss. The current Secretary of the Department of Homeland Security, General (Retired) John Kelly, former Commandant of the United States Marine Corps and a Gold Star father, is to date the highest-ranking military officer to lose a child fighting in the war on terror. Secretary Kelly’s perspective on tragedy and loss are unique, feeling the pain as both a military leader and as a surviving family member. In a 2010 speech to the Semper Fi Society of Saint Louis, he stated:

*Only a tiny fraction, less than a percent, shoulder the burden of fear and sacrifice, and they shoulder it for the rest of us. Their sons and daughters who serve are men and women of character who continue to believe in this country enough to put life and limb on the line without qualification, and they serve so that the sons and daughters of the other 99% don’t have to.*<sup>15</sup>

Secretary Kelly’s speech highlighted the growing disconnect between the military and society in how they deal with sacrifice and tragedy. With such a small segment of society that is quantifiably susceptible to suffering the loss of a member in the armed forces, efforts must be made to bridge any divide between military leaders and those surviving families who are forever bound in tragedy. Personal experiences in loss have shaped many leaders, having shown them the importance of connecting leaders-to-surviving families, leaders-to-leaders, and leaders-to-support services.

In an interview discussing a leader's duty in loss, Colonel (Retired) Jeanette McMahan, a West Point graduate and Gold Star widow, shared what many leaders and surviving families have echoed when discussing the appropriateness, timeliness, and need for leaders to connect with grieving families; each will be dependent upon circumstance.<sup>16</sup> Speaking from her experience as both a military leader and as a surviving family member, COL (Ret) McMahan conveyed what other professionals and families expressed while being interviewed for this research; the ideal circumstances for a "leader-to-surviving family connection" begins prior to the loss and that this connection should consider the mutually-supporting benefits that can be provided to all affected. Terry Meyer, a respected Gold Star father and TAPS counselor, reiterated this same sentiment. While discussing how the military has shown a gracious and generous desire to comfort his family following the loss of his son, Specialist Brandon Meyer, Mr. Meyer expressed that "leaders must know the family before deployment."<sup>17</sup> Elaborating further, he explained that leaders should be proactive in the pre-deployment process, to include learning some of the more intimate family dynamics surrounding their service members, as well as being able to speak face-to-face with families specifically about worst-case scenarios. In sharing his story, Mr. Meyer recounted how the interactions he continues with members of his son's unit have been overwhelmingly fulfilling, and above what he would term, "the call of duty." Equally important, he spoke of how he believes families can be of support to the leader in their grieving process. As he expressed, "The families feel that they have a duty to give back to those who were willing to die for their loved one."

Many military members often assume that families may hold them accountable, or the families may be caused additional pain by having a connection to those who served alongside their loved one. Others may experience "survivor's guilt" and some simply may not be ready. Although these assumptions and feelings may be true, the sticking point is that leaders may not know or realize the role they can play in helping a family heal and how a connection to the surviving family can help them heal as well. Nonetheless, as Gold Star father Mr. Andrew Marshall conveyed,

*Nothing that you [the leader] can say [regarding the event surrounding the loss], will make me hurt any more than I have already hurt, because when I lost my son, I maxed out my ability to hurt. I may have an emotional response, but I cannot hurt any more than I already do. With that, please share with me all that you can, so that I may be able to experience some of what you have.<sup>18</sup>*

The words of this Gold Star father should strike a chord with all leaders. The underlying message is that surviving families acknowledge that they were not part of the event in which their loved one, your service member, lost their life. These words also express a deep empathy for what leaders carry from that traumatic experience. A leader-to-surviving family interaction is not about unloading one's pain onto the other. The connection between a leader and a surviving family relationship is based in part on the shared understanding of losing someone that both cared about and had a responsibility for during various times in their lives. As some leaders and commanders wrestle with the timeliness and appropriateness of reaching out to surviving families, it is important to understand that there may be emotional responses and plenty of questions. More important, leaders need to understand that these surviving families want to connect to those leaders that knew and cared for their loved one, and that they are not forgotten. Most importantly, a leader-to-surviving family relationship is about remembering these fallen heroes impacts on our lives, and for the families and leaders there is great comfort in not forgetting.

### **Connecting Resources<sup>19</sup>**

By looking at what families need from leaders and what leaders need from families we can identify those programs, ideas, concepts, and concerns that are of most benefit to a leader-to-surviving family connection. In addition, we can identify what leaders wish they had known to be better prepared for the duties of leadership following tragedy and loss. Professionals, such as Jaime Fitzpatrick, a Licensed Clinical

Professional Counsellor with close ties to the military community, acknowledge that leader-to-family connections will vary based on needs and reactions to grief and loss. Therefore, Mrs. Fitzpatrick suggests the more resources and options available to leaders and families, the better to all those impacted and affected by the loss.<sup>20</sup>

Organizations such as TAPS and Survivor Outreach Services (SOS) provide immediate and long-term support and services to surviving families. A key component to the success of these programs is their ability to connect and network a community of those who have a shared or similar experience in loss. As stated in part of the TAPS message, “Being a military family requires a special commitment and dedication.”<sup>21</sup> The networks of TAPS and SOS enable them to reach and connect surviving families to the support and resources they need, based on where there are in their grieving process. The function of these networks is to raise awareness, let these families know what is out there, and provide tools to help as they cope and react through their various stages of grief.

A study noted in *Military Psychology* found that in group settings, individuals who have lived through similar traumatic experiences are afforded more credibility within the group, and that these experiences can help create a support network able to support others with these same experiences, perspectives and questions.<sup>22</sup> As stated in the Army Community Service Grieving Guide, following a significant event, individuals will gravitate to those with who have similar experiences.<sup>23</sup> Any leader or family member who has experienced loss understands that the grieving process is not a successive process, and often the five stages of grief (denial, anger, bargaining, depression, and acceptance) will not necessarily occur in an orderly process. In fact, affected individuals may move back and forth between the stages and may revisit one or more throughout their journey. Knowing this, as well as having an understanding of the challenges that come with dealing with loss, should magnify the need to seek connections with others who have suffered similar losses to help with the grieving process.

## **Recommendations**

If we as a military expect that our future will include warfare, there are things we need to continue doing to better prepare our leaders for the most difficult of duties that come with leading the servicemen and women of today and tomorrow.

First, a leader support network comprised of leaders who have lost service members under their lead or command should be created. The leader support network should include a service-wide database for management and oversight. A database similar to what SOS and TAPS utilize to manage their vast networks of individuals and families over lengthy periods of time and distance would likely be sufficient for this task. A network such as this will further support a tool kit approach to providing leaders with networking, support, and the ability to share recommendations of “battle drills” or “best practices” following the loss of a service member.

Second, if a worst-case scenario happens within a unit, the impacted leader should be automatically integrated into the leader support network for mentorship and counseling in an effort to better support the leader through this most challenging of times and circumstances. Similar to how the Department of Defense made a concentrated effort to reduce the stigmas associated with receiving mental and behavioral health services, leaders should not feel hesitant to reach out to others who have experienced this type of loss. Because of the leader-centric mentorship and counseling being proposed here, behavioral and mental services should also be utilized to meet each individual leader’s needs.

Next, there is a need for leader-specific pre-command/mission/deployment training that focuses on what to expect following worst-case scenarios. This training should be provided to leaders by leaders who have experienced loss while leading (i.e., a leader support network). Leader training should continue to

include those services provided by Army Community Service because, as SOS coordinator Lisa Pokorny stated, “Even when the war is over, we are still here.”<sup>24</sup> Army Community Service will continue to provide Soldiers, leaders, families, and the installation with great resources, services, and support and is often the connecting tissue between surviving families and the military community.<sup>25</sup>

Fourth, and most important within the context of this article, given these tools, resources, and knowledge, it is the hope that leaders will act upon their innate sense of duty to reach out to surviving families. Leaders may find that families do not hold them responsible for the loss of their loved one and may find that the interaction helps put the family’s mind at ease. It is important for leaders to understand that the families are not looking to them for counseling support or services. They are looking to them to help bring the life of their loved one full circle, to close gaps, and to provide a sense of closure to the event that took the life of their loved one. Each family will have different dynamics, meaning that there is no prescriptive approach to how to approach each interaction. It is critical that leaders know the benefits and services that are offered to surviving families and be able to speak to or point families to those services should it be necessary during an interaction.<sup>26</sup>

Lastly, the timing of grief will affect the ability to build a relationship between the leader and the family. Because of this, a leader’s actions and activities prior to the event (or deployment) will help open the lines of communication and set the conditions to support the leader-to-surviving family relationship following a traumatic experience.<sup>27</sup> Although the lack of a preexisting relationship with the family does not mean that a relationship cannot be established after a loss, it will help with the initial outreach that is key to a connection following a loss.<sup>28</sup>

## **Conclusion**

The challenges of continuing to lead, fight, and live life following a tragic and untimely loss must be further mitigated so the U.S. military can continue to put forth the best force capable of defending our nation, while also recognizing and remembering the sacrifices of those who gave their lives out of a profound sense of duty. For many leaders, the care and concern for service members does not end when the guidon is passed. Although the responsibility for them may no longer be that leaders to shepherd, the duty they feel will remain. Those leaders who have lost service members should act upon that same sense of duty, connecting to surviving families and letting them know the legacy of their loved one still continues to grow. In doing so, leaders will also be provided with a great resource to help you in their grieving and coping process that will improve overall mental fitness and make them more resilient leaders.

*It pays great dividends to reach out to surviving families.  
It demonstrates that the military cares beyond that knock at the door.  
Our continued interactions with these families demonstrates  
the significance of their loved one on us and on the unit.*

- Chaplain Doug Windley<sup>29</sup>

## Endnotes

- 1 6,866 U.S. service member deaths and 3,318 suicides from 9/11/01 to current date. <http://thefallen.militarytimes.com>, and <http://www.usatoday.com/story/news/nation/2016/04/01/us-military-suicides-remain-stubbornly-high/82518278/> (accessed December 10, 2016).
- 2 <http://www.taps.org/survivors/survivor.aspx?id=6762&c=1120> (accessed December 10, 2016). The Tragedy Assistance Program for Survivors (TAPS) offers compassionate care to all those grieving the death of a loved one serving in our Armed Forces ([www.taps.org](http://www.taps.org)).
- 3 <https://www.hrc.army.mil/content/CMAOC> (accessed December 10, 2016). The Casualty and Mortuary Affairs Operations Center executes the full-spectrum of Army Casualty and Mortuary Affairs to support DOD-directed missions, Soldiers and Families for present and past conflicts. CMAOC serves as lead agent for the Defense Casualty Information Processing System (DCIPS) and provides assistance to the families of fallen Soldiers.
- 4 “ARSOF 2022,” United States Army John F. Kennedy Special Warfare Center and School’s Office of Strategic Communication (May, 2013).
- 5 Interview with Chaplain (Major) Doug Windley conducted January 31, 2017 telephonically from Fort Leavenworth, KS. CH (MAJ) Windley is a TAPS Survivor Care Team counselor and the 60<sup>th</sup> Troop Command Brigade Chaplain in the Army National Guard. He holds a Master of Divinity and a Master of Arts in Theological Studies.
- 6 The author would like to thank Major Tabitha Hernandez for her support in the editing of the literature review and her help in providing synthesis to the material.
- 7 “An Achievable Vision: Report of the Department of Defense Task Force on Mental Health,” Department of Defense Task Force on Mental Health. Falls Church, VA: Defense Health Board. 2007. <http://www.taps.org/uploadedFiles/TAPS/RESOURCES/DOD%20Mental%20Health%20Task%20Force%20Report.pdf> (accessed December 11, 2016).
- 8 “An Achievable Vision: Report of the Department of Defense Task Force on Mental Health,” Department of Defense Task Force on Mental Health. Falls Church, VA: Defense Health Board. 2007.
- 9 Dale W. Russell, David M. Benedek, James A. Naifeh, Carol S. Fullerton, Robert D. Forsten, and John T. Cacciopo, “Social Support and Mental Health Outcomes Among U.S. Army Special Operations Personnel,” *Military Psychology* 28, no. 6 (November 2016) 361–375.
- 10 Dale W. Russell, David M. Benedek, James A. Naifeh, Carol S. Fullerton, Robert D. Forsten, and John T. Cacciopo, “Social Support and Mental Health Outcomes Among U.S. Army Special Operations Personnel,” *Military Psychology* 28, no. 6 (November 2016) 362.
- 11 Dale W. Russell, David M. Benedek, James A. Naifeh, Carol S. Fullerton, Robert D. Forsten, and John T. Cacciopo, “Social Support and Mental Health Outcomes Among U.S. Army Special Operations Personnel,” *Military Psychology* 28, no. 6 (November 2016) 361.
- 12 Grieving Guide. (2017). Army Community Service.
- 13 John Arquilla, “To Build a Network,” *Prism* 5, no.1 (2014): 22-33.
- 14 Payal Sharma, and Matthew J. Pearshall, “Leading Under Adversity: Interactive Effects of Acute Stressors and Upper-Level Supportive Leadership Climate on Lower-Level Supportive Leadership Climate,” *The Leadership Quarterly* 27 no.6 (2016): 856-868.

15 Transcript of Speech given by Lt. Gen. John Kelly to the Semper Fi Society of St. Louis on November 13, 2010. Transcript published by American Thinker. [http://www.americanthinker.com/articles/2010/12/an\\_extraordinary\\_speech.html](http://www.americanthinker.com/articles/2010/12/an_extraordinary_speech.html) (accessed December 13, 2016).

16 Interview with Colonel (Retired) Jeanette McMahon conducted February 17, 2017 telephonically from Fort Leavenworth, KS. In addition to retiring as an Operations Researcher from the U.S. Army, COL (Ret) McMahon is a Gold Star spouse. COL (Ret) McMahon continues to support the military community around West Point, NY, supporting leadership development programs such as the Thayer Leadership Development Group.

17 Interview with Mr. Terry Meyer conducted February 3, 2017 telephonically from Fort Leavenworth, KS. Mr. Meyer is a Lutheran Minister, holds a Master of Divinity degree and provides counseling services. Following the loss of his son, Specialist Brandon Meyer, on January 28, 2008, Mr. Meyer along with his wife, Genia, are active members of the TAPS community.

18 Shared with the author by Mr. Andrew Marshall of Athens, Georgia, regarding the author's experience of the events on January 28, 2008, in which Mr. Marshall's son, Corporal Evan Marshall, was KIA along with four other soldiers by an IED in Mosul, Iraq.

19 The central question of this paper could have been addressed solely from a social scientist perspective however, it was also important to integrate psychological research and components because of the mental and behavioral health impacts that can manifest from a traumatic-event experience. In addition, most current literature and studies related to trauma, resiliency and coping with loss come from the field of psychology. However, the primary focus of their research is on the mental health aspect of military-to-military support, survivor-to-survivor support, organization-to-survivor support, or community-to-survivor support. A sociological perspective allows for a careful examination of the relationship between military leaders, surviving family members, the organizations that support each, and the communities in which they surround themselves.

20 Interview with Mrs. Jaime Fitzpatrick, Licensed Clinical Professional Counselor (LCPC), conducted January 30, 2017 at Fort Leavenworth, KS. Mrs. Fitzpatrick holds an M.S. in Clinical and Mental Health Counseling and works as a private practice LCPC.

21 US Army, *Tragedy Assistance Program of Survivors Survivor Guide*, (Washington, DC: Department of the Army, 2010).

22 Dale W. Russell, David M. Benedek, James A. Naifeh, Carol S. Fullerton, Robert D. Forsten, and John T. Cacciopo, "Social Support and Mental Health Outcomes Among U.S. Army Special Operations Personnel," *Military Psychology* 28, no. 6 (November 2016) 363.

23 US Army, *Grieving Guide*, (Washington, DC: Department of the Army, 2017).

24 Interview with Ms. Lisa M. Pokorny, Survivor Outreach Services Coordinator, Army Community Service, conducted February 6, 2017 at the Fort Leavenworth Resiliency Center.

25 Interview with Ms. Janice L. Downey, Division Chief, Army Community Service, Fort Leavenworth, conducted February 6, 2017 at the Fort Leavenworth Resiliency Center.

26 Interview with Colonel (Retired) Jeanette McMahon conducted February 17, 2017 telephonically from Fort Leavenworth, KS.

27 Interview with Jo Dempsey conducted February 8, 2017 at the Command and General Staff College, Fort Leavenworth, KS. Ms. Dempsey is a West Point graduate, and following her time in the service as an Operations Research Analysis, she worked at the Family Readiness Support Advisor for the 101<sup>st</sup> Airborne

Division (Air Assault), and as a director of Army Community Service in Germany and Joint Base Lewis-McChord. Ms. Dempsey is currently a student at the Army Command and General Staff College.

28 Interview with Dr. Tracy Epps conducted January 31, 2017 at the Command and General Staff College, Fort Leavenworth, KS. Dr. Epps holds a Ph.D. in Industrial Organizational Psychology. In 2009, Dr. Epps helped develop the sustainment modules for the Army's Comprehensive Soldier Fitness Program. She serves in the Army as a Research Psychologist and is currently attending the Army Command and General Staff College.

29 Interview with Chaplain (Major) Doug Windley conducted January 31, 2017 telephonically from Fort Leavenworth, KS.