



Leader's Overview: An Introduction to the Performance Triad

Professional
**SOLDIER
ATHLETE**
HERE IT'S NOT A GAME



Ready. Resilient. Responsible. Healthy.

The **Professional Soldier Athlete** is an unstoppable force and in the Army, our mission is not a game. Being ready, resilient and healthy are hallmarks of the Profession of Arms and characteristics of the Professional Soldier Athlete. We also remain indebted to the **Army Family** for all they do and for their vital influence on the health and readiness of Soldiers.

The intention of the Army Ready and Resilient campaign is to integrate and synchronize multiple Army-wide programs aimed at improving physical, psychological and emotional health. The Performance Triad is a key enabler of the campaign that promotes healthy lifestyle choices that combine the right amounts of **Sleep, Activity, and Nutrition** to reach optimal performance.

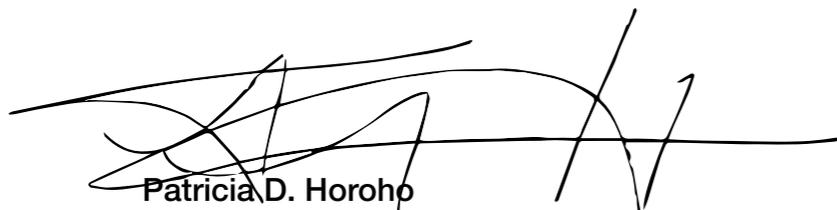
We count on Army leaders to be the example of readiness and resilience to successfully accomplish the mission, every time. The Performance Triad requires leaders at all levels to be engaged both professionally and personally in health, and the health conversation. We know we are the greatest Army in the world; the challenge now is to be the healthiest Army as well. **Army Strong!**



Raymond T. Odierno
General, United States Army
Chief of Staff



Raymond F. Chandler III
Sergeant Major of the Army, United States Army
Sergeant Major of the Army



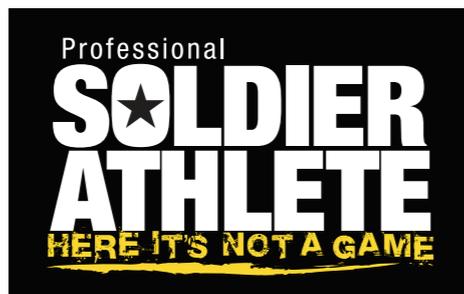
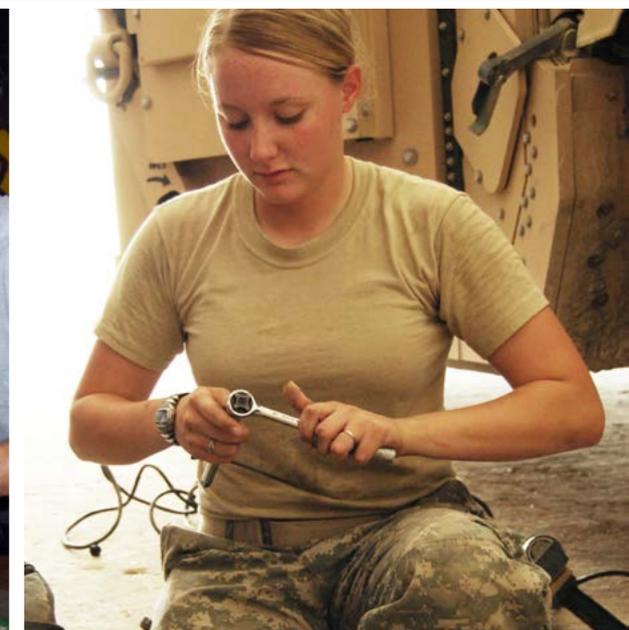
Patricia D. Horoho
Lieutenant General, United States Army
The Surgeon General and Commanding General,
United States Army Medical Command



Donna A. Brock
Command Sergeant Major, United States Army
United States Army Medical Command

Index

Introduction	2
Call to Action	4
The Army's Ready and Resilient Campaign (R2C)	5
Performance Triad Pilot	6
What Leaders Can Do During the Pilot	6
Overarching Messages and Talking Points	6
Sleep	7
Activity	8
Nutrition	9
Educational Materials and Tools	10
Army Subject Matter Experts	11
References	13



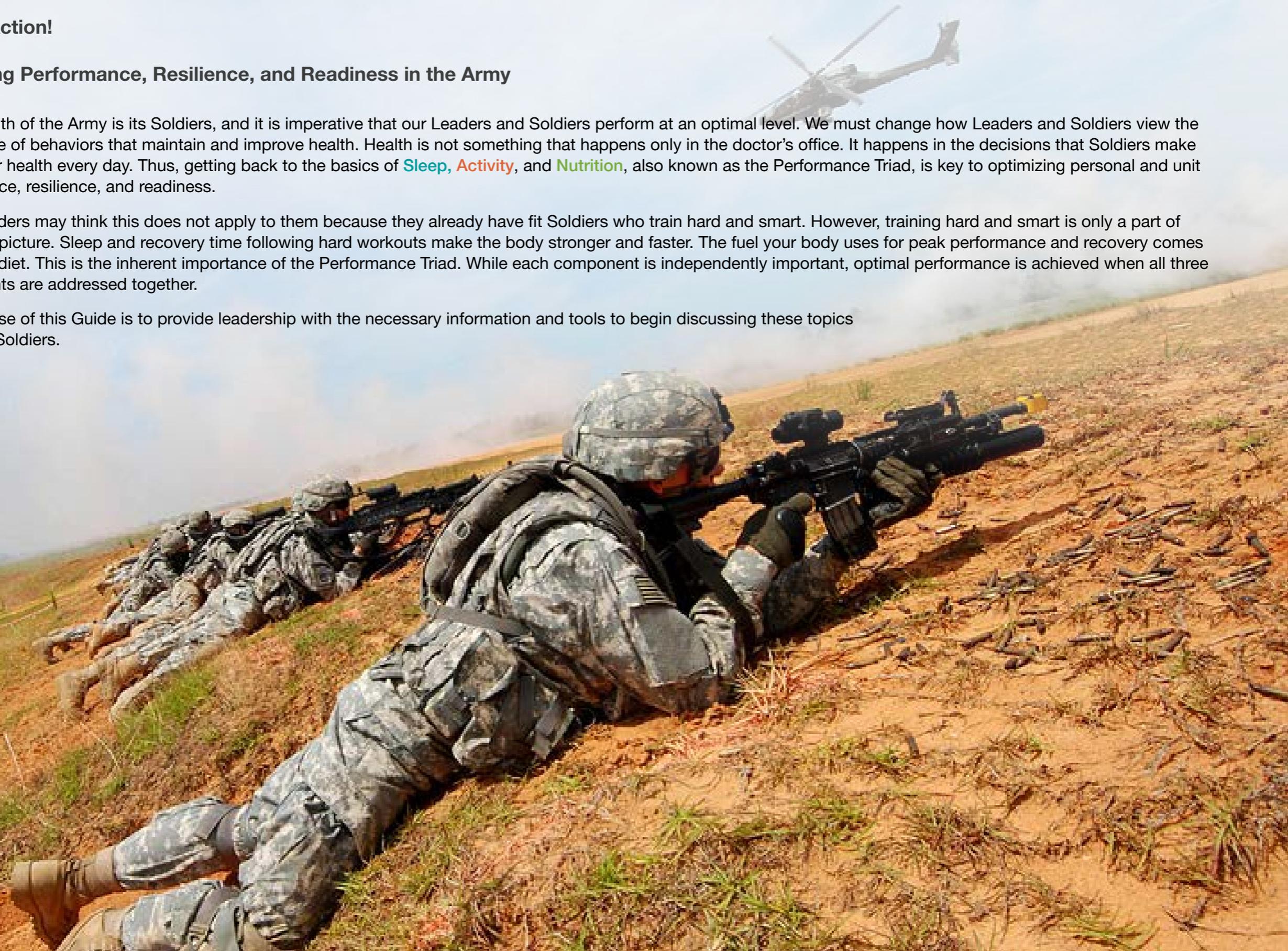
Call to Action!

Improving Performance, Resilience, and Readiness in the Army

The strength of the Army is its Soldiers, and it is imperative that our Leaders and Soldiers perform at an optimal level. We must change how Leaders and Soldiers view the importance of behaviors that maintain and improve health. Health is not something that happens only in the doctor's office. It happens in the decisions that Soldiers make about their health every day. Thus, getting back to the basics of **Sleep**, **Activity**, and **Nutrition**, also known as the Performance Triad, is key to optimizing personal and unit performance, resilience, and readiness.

Some Leaders may think this does not apply to them because they already have fit Soldiers who train hard and smart. However, training hard and smart is only a part of the whole picture. Sleep and recovery time following hard workouts make the body stronger and faster. The fuel your body uses for peak performance and recovery comes from your diet. This is the inherent importance of the Performance Triad. While each component is independently important, optimal performance is achieved when all three components are addressed together.

The purpose of this Guide is to provide leadership with the necessary information and tools to begin discussing these topics with their Soldiers.



The Army's Ready and Resilient Campaign (R2C)

Secretary of the Army John McHugh ordered the Ready and Resilient Campaign March 2013:

- “The campaign must be a top priority for all Army Leaders.”
- “For us to continue to increase capability and performance, we must continue to build resilience in our total force.”
- “We will develop resilience programs that build and promote healthy lifestyles based on the performance triad of **sleep**, **activity**, and **nutrition**.”
- “The plan will be based upon building physical, emotional and psychological resilience in our Soldiers, Families and Civilians so they improve performance, which ultimately prepares them to deal with the rigors and challenges of a demanding profession.”
- “In addition, the plan shall create a holistic, collaborative and coherent enterprise to increase individual and unit readiness and resilience.”

The Performance Triad Pilot & R2C

How Do They Align?

- Ready and Resilient:
 - » Integrates resilience training as a key part of the Army's professional military education throughout a Soldier's career from induction through separation or retirement.
 - » Integrates and synchronizes Army wide efforts to increase individual resilience and improve unit readiness by encouraging positive activities and reducing or eliminating harmful behaviors. Focuses on eliminating stigma associated with getting help to address issues such as suicide and suicidal thoughts and ideations, sexual harassment/sexual assault, bullying and hazing, and substance abuse. Seeks to influence a cultural change in the Army by directly linking personal resilience to readiness and emphasizing the responsibility of personnel at all levels to build and maintain resilience and thereby contribute to increasing unit readiness.
- The Performance Triad Pilot, developed by Army Medicine in partnership with FORSCOM:
 - » Supports the Ready and Resilient Campaign with the goal of increasing unit health and unit performance, and decreasing injuries.
 - » Provides Leaders and Commanders with tools to increase knowledge and awareness of healthy **sleep**, **activity**, and **nutrition** — the Performance Triad.

Why Is It Important?

- A healthy mind and body are essential to individual and unit readiness.
- Resilience combines mental, emotional, and physical skills to generate optimal performance (i.e., readiness) — in combat, healing after injury, and in managing work and home life.
- Resilient individuals are better able to bounce back and overcome adversity by leveraging mental and emotional skills and behaviors.
- Individual resilience can be built, maintained, and strengthened when viewed as an enduring concept and acquired through regular training.

Source: Ready and Resilient Campaign, <http://www.army.mil/readyandresilient>

Performance Triad Pilot

The pilot was initiated in September 2013 within three battalions on Fort Bliss, Fort Bragg and Joint Base Lewis-McChord. Local medical assets assisted the participating battalions with implementation and education materials were provided by leading SAN experts from the USAMEDCOM. This includes:

Sleep:

- Sleep hygiene training
- Sleep management training
- Sleep tools and resources

Activity:

- Healthy activity training
- Unit and individual level injury risk assessment
- Injury prevention tools and resources
- Physical Training guidance

Nutrition:

- Nutrition for optimal health and performance training
- Navigating the eating environment guidance
- Dietary supplement safety training
- Nutrition tools and resources

Technologies:

- Personal Fitness Device
- Military Power, Performance and Prevention (MP3) Platform
- GAT 2.0 and ArmyFit
- Healthy Eating Activity Lifestyle Training Headquarters (H.E.A.L.T.H.) Application

What Leaders Can Do During the Pilot

- Plan for and promote **Sleep, Activity, and Nutrition** among your Soldiers during all phases of training.
 - » Enforce sleep discipline with your Soldiers.
 - » Encourage your Soldiers to engage in physical activity and train smart.
 - » Assess nutrition and encourage proper fueling among your Soldiers.
- Reinforce the Messages and Talking Points below with your Soldiers.
- Lead by example.
 - » Ensure that your own **Sleep, Activity, and Nutrition** behaviors align with those you promote among your Soldiers.

Overarching Messages and Talking Points

Our Soldiers must perform and excel at a professional level just like any world-class athlete. Being physically and mentally ready to take on the demands their bodies will endure in battle requires fundamental training and education about **Sleep, Activity, and Nutrition**.

- No matter who we are, how old we are, or what we do, we need a balance of **Sleep, Activity, and Nutrition** to build and sustain health.
- Each component of the Triad contributes equally to Soldier and unit readiness, performance, and resilience. However, because these components interact, promoting all three simultaneously will synergistically achieve readiness, performance, and resilience well beyond levels achieved by addressing only one or two of the components.
- Prepare Soldiers as professional athletes.
 - » A Soldier needs to train for conflict just like an elite athlete trains for competition. Through proper physical training (PT), fueling, and optimal sleep, Soldiers will be better prepared to face the challenges of unified land operations.

Sleep

Sleep is a biological need for brain function and critical for sustaining mental abilities required for success on the battlefield. Soldiers require 7-8 hours of high quality sleep every 24-hour period to sustain operational readiness.

When Leaders and Soldiers do not get enough sleep, their performance suffers—putting themselves and fellow Soldiers at increased risk for errors, accidents, and mishaps. The bottom line is that disciplined sleep equals survivability, focus and mental agility.

Sleep Myths

- Most sleep-deprived Soldiers think that they are less vulnerable to the effects of sleep loss because they believe that they need less sleep or they can just tough it out.
 - » A sleep-deprived Soldier loses self-awareness of his/her own impairment.
- One misconception is that Soldiers who fall asleep at inappropriate times (for example, while on duty) do so out of negligence, laziness or lack of willpower. This may, however, mean that a Soldier has not been afforded enough sleep time by his unit leaders.
 - » Soldiers who routinely get 5-6 hours of sleep perform similar to a person with a blood alcohol content of .08. These Soldiers are highly prone to micro-sleep and falling asleep at the wheel. Fatal errors can occur.

Leaders need to ask their Soldiers how much sleep they are getting in the field and ensure they get 7-8 hours.

10 Effective Sleep Habits for Everyone

1. **Create a quiet, dark, comfortable sleeping environment.** Cover windows with darkening drapes or shades (dark trash bags work too) or wear a sleep mask to block light. Minimize disturbance from environmental noises with foam earplugs or use a room fan to muffle noise. If cold, adjust the room temperature to suit you. If you can't, use extra blankets to stay warm. If you are hot, use the room fan to both muffle noise AND keep you cool.
 2. **Remove distractions from the bedroom.** Make sure your bed is comfortable and use it only for sleeping. Don't read, watch TV, or listen to music in bed. Remove all TVs, computers, and other "gadgets" from the bedroom. Don't dwell on, or bring your problems or emotionally upsetting arguments to bed.
 3. **Stop caffeine use at least 6 hours before bedtime.** Caffeine promotes wakefulness and disrupts sleep.
 4. **Don't drink alcohol before bed.** Alcohol initially makes you feel sleepy, but it disrupts and lightens your sleep several hours later. In short, alcohol reduces the recuperative value of sleep. Nicotine – and withdrawal from nicotine in the middle of the night – also disrupts sleep. If you need help to stop drinking or using nicotine products, see your healthcare provider for options.
 5. **Get your exercise in by early evening.** Exercising is great, but exercising too close to bedtime might disturb sleep. If you experience difficulty initiating or maintaining sleep after nighttime exercise, try exercising earlier in the day or evening (at least 3 hours before bedtime).
 6. **Don't go to bed hungry.** A light bedtime snack (e.g., milk and crackers) can be helpful, but do not eat a large meal close to bedtime. And empty your bladder just before you go to bed so that the urge to urinate doesn't disrupt your sleep.
- The following sleep hygiene tips are especially critical for those experiencing sleep problems:*
7. **Maintain a consistent, regular routine that starts with a fixed wake-up time.** Start by setting a fixed time to wake up, get out of bed, and get exposure to light each day. Pick a time that you can maintain during the week AND on weekends. Then adjust your bedtime so that you target 7-8 hours of sleep.
 8. **Get out of bed if you can't sleep.** Only go to bed (and stay in bed) when you feel sleepy. Do not try to force yourself to fall asleep – it will tend to make you more awake, making the problem worse. If you wake up in the middle of the night, give yourself about 20 minutes to return to sleep. If you do not return to sleep within 20 minutes, get out of bed and do something relaxing. Do not return to bed until you feel sleepy.
 9. **Nap wisely.** Napping can be a good way to make up for poor/reduced nighttime sleep, but naps can cause problems falling asleep or staying asleep at night – especially if those naps are longer than 1 hour and/or if they are taken late in the day (after 1500 hours). If you need to nap for safety reasons (e.g., driving), try to take a short (30-60 minute) nap in the late morning or early afternoon, just enough to take the edge off your sleepiness.
 10. **Move the bedroom clock to where you cannot see it.** If you tend to check the clock two or more times during the night, and if you worry that you are not getting enough sleep, cover the clock face or turn it around so that you can't see it (or remove the clock from the bedroom entirely).



Activity

While physical activity is a critical component of military performance, PT-related injuries are a leading barrier to medical readiness. Leaders must understand that PT-related injuries are largely preventable. Soldiers with musculoskeletal injuries make up 45 percent of the medically not ready or nondeployable. In theater, musculoskeletal injuries represent the major cause of noncombat medical evacuation, and the majority of these injuries result from physical training.

Activity Messages and Talking Points

- Unit readiness is directly related to Soldier health, fitness, and performance.
- A dynamic (moving) warm-up will improve performance on the Army Physical Fitness Test (APFT).
- Army Physical Readiness Training (PRT) improves performance and decreases the likelihood of overuse injuries.
- Soldiers less likely to get injured tend to have normal joint flexibility and superior coordination, balance, core strength, core endurance, and power.
- Studies suggest that movement tests may predict those at risk for injury.
- For those at risk for injury, a focused training program may decrease that risk.
- Training quality and variety is more important than quantity. Gradually increase intensity, duration, and frequency of training to avoid injury.
- Dynamic warm-ups (e.g., walking prior to jogging and jogging prior to running) prepare the body for activity, increase performance, and decrease the risk of injury.
- Stretch AFTER (not before) working out to relax muscles and increase flexibility.
- When beginning an Extreme Conditioning Program, speak with a physical fitness expert (Physical Therapist, Certified Athletic Trainer, Master Fitness Trainer), start gradually, and watch for symptoms of over-training such as unusual fatigue and/or muscle soreness or musculoskeletal injuries.
- See your unit healthcare provider as soon as you get injured.
- If injured, your Restorative Physical Readiness Training (RPRT) trainer or Master Fitness Trainer (MFT) can help develop an exercise program for you.
- Being physically active will help you be the best Soldier you can be...run faster, jump higher, lift more; maintain a healthy weight; improve attitude, behavior, and mood; sleep better; and perform at your best!
- Prolonged sitting increases the risk of blood clots, diabetes, heart disease, cancer, obesity, and death.
- Regular exercise does not counteract the ill effects of sitting...keep moving!
- Everybody should move at least 10 minutes of every hour and walk 10,000 steps a day to maintain health.
- Regular movement increases blood flow, breaks down fat, burns calories, and may increase your life expectancy.



Nutrition

The exceptional demands placed on military personnel make good nutrition crucial. Success requires a combination of strength and endurance—both physical and cognitive. One factor that contributes to mission success and life-long health is good nutrition. It is well known that appropriate nutritional habits and interventions improve performance.

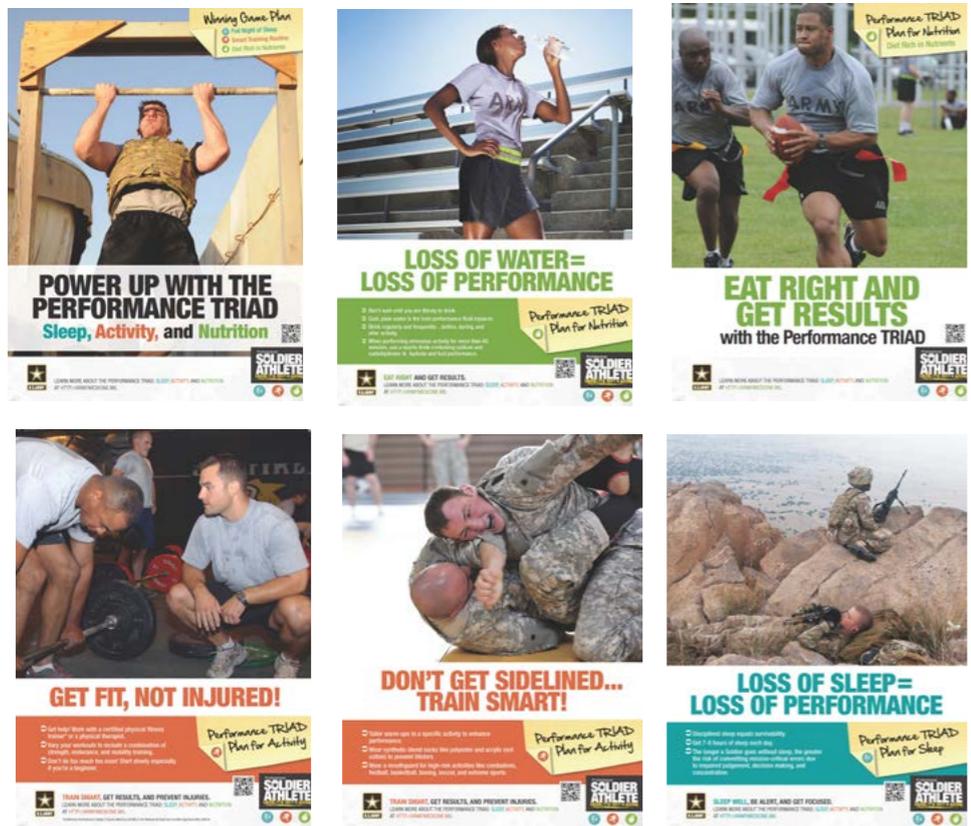
Nutrition Messages and Talking Points

- There is a strong relationship between nutrition and quality of life that includes enhanced performance, weight maintenance, disease prevention, and healthy aging.
 - » Eat a variety of foods such as fruits, vegetables, whole-grains, lean protein sources, and low-fat sources of calcium (dairy products).
 - » Eat fewer foods with salt, saturated fat and trans-fats, cholesterol, added sugars, and refined grains.
 - » Balance calories with physical activity to manage weight.
- Proper food choices and timing maximize performance in the gym, during a combat mission, at home, at work, and everywhere in between.
 - » Soldier readiness is directly related to nutritional fitness.
 - » The body is a machine – quality fuel intake leads to quality performance output.
 - » View food as part of physical conditioning - appropriate pre- and post-training fueling strategies are essential.
 - » Eating regular meals maintains energy levels, improves endurance, and increases metabolism. Try not to go more than 4-5 hours without eating and remember to refuel after an intense workout.
 - » When eating in the Dining Facility, use the “Go for Green” food labeling system to guide your choices.
- Hydration is critical to performance success.
 - » Water is the best hydrator - drink early and often to avoid dehydration.
 - » Think before drinking - limit consumption of alcohol and sugary beverages!
 - » Energy drinks are not the same as sports drinks and should never be used for hydration.
 - » Energy drinks generally contain large quantities of caffeine and other ingredients - most of which do absolutely nothing to enhance health.
- Warfighters often turn to dietary supplements because of the extreme demands of mission performance.
 - » Be informed about making safe dietary supplement choices.
 - » Unlike medications, most dietary supplements have not been rigorously tested for their benefits and side effects.
 - » Whole foods are the best source for an edge on performance.
 - » For a reputable reference, visit Operation Supplement Safety at: hprc-online.org/dietary-supplements/OPSS.



Educational Materials

A major component of the Performance Triad Pilot is the dissemination of awareness and educational materials to include: posters, tip cards, pocket guides, and digital media.



Technology Tools

Comprehensive Soldier & Family Fitness: Comprehensive Soldier and Family Fitness (CSF2) is a long-term, enduring initiative that broadens the assessment and training of every member of the Army beyond the standard physical and technical abilities. Psychological strength, like physical strength, does not just “happen”- it must be trained, practiced, and refined. <http://csf2.army.mil/>

Army H.E.A.L.T.H.: Army H.E.A.L.T.H. provides a comprehensive exercise plan that includes cardio, strength, and stretching exercises. You can modify these plans at any time. <http://armyhealth.pbrc.edu>

ArmyFit: ArmyFit is a technologically savvy resource that can help you meet your Performance Triad goals of improved performance through optimal activity, nutrition, and sleep. ArmyFit provides the keys to living a healthy lifestyle. Start with the Global Assessment Tool 2.0 and access the custom programs, experts, and a whole suite of tools. <http://csf2.army.mil>

ARMY SUBJECT MATTER EXPERTS

SLEEP



COL Steve Lewis, PhD, LCSW

Behavioral Health Division,
Army Medicine

Education:

- » PhD, Social Work, Florida State University
- » MSW, California State University Sacramento
- » BA, University of Nevada Reno

Credentials:

- » Diplomate in Clinical Social Work, National Association of Social Workers
- » Awarded Surgeon General's "A" Proficiency Designator in Social Work
- » Theater Behavioral Health Consultant, 44th MEDCOM, OIF (2008-2009)
- » OIC, 1/82 BCT Brigade Behavioral Health Section, OEF (2005-2006)
- » Chief, 82d ABN DIV Division Mental Health, OIF (2003-2004)
- » Commander, 254th MED DET (CSC), OPERATION JOINT ENDEAVOR (1995-1996)

Contact Information:

Steve.J.Lewis4.mil@mail.mil
(210) 221-7267

Role:

Lead POC for sleep hygiene, management and reset education and training.

ACTIVITY



LTC Scott Gregg, MHA, MBA, MSPT

Allied Health Staff Officer
Rehabilitation and Reintegration Division,
Office of the Surgeon General

Education:

- » MHA & MBA, US-Army Baylor University
- » MS Physical Therapy, Washington University in St. Louis
- » BS, Biology, Wake Forest University

Credentials:

- » Fellow, American College of Healthcare Executives
- » Board Certified Orthopedic Clinical Specialist, American Board of Physical Therapy
- » Specialties (Deputy Consultant to The Surgeon General for Physical Therapy)

Contact Information:

Scott.R.Gregg.mil@mail.mil
(703) 681-5779

Role:

Lead POC for healthy activity education, injury risk assessment and Restorative Physical Readiness Training

ARMY SUBJECT MATTER EXPERTS

NUTRITION



COL Laurie Sweet, MHA, MSS , RD, LD
 Nutrition Program Manager and Consultant to the
 Army Surgeon General
 US Army Medical Command

Education:

- » MSS, Strategic Studies, US Army War College
- » MHA, Health Administration, Baylor University
- » MS, Sports Medicine/Exercise Science, Chapman University
- » BS, Foods and Nutrition, Montana State University

Credentials:

- » Academy of Nutrition and Dietetics
- » Awarded the Surgeon General's "A" Proficiency Designator

Contact Information:

Laurie.E.Sweet.mil@mail.mil
 (210) 808-2784

Role:

Lead POC for nutrition education and training and Army MOVE!

TECHNOLOGY



MAJ Mark Mellott, PhD

Army Medicine Visiting Chair, National
 Defense University
 G6, Office of the Army Surgeon General

Education:

- » University of Georgia, BA (1997) in English Literature
- » Troy State University, MPA (1999) in Information Systems Management
- » Clemson University, PhD (2010) in Policy

Credentials:

- » S6/Chief Information Officer at the Brigade, OEF (2012) and Battalion, Kosovo (2000), OIF (2006) levels
- » Company Commander, HHC, 30th Medical Brigade, OIF (2003-2004)
- » Flight Medic (1994-1996)
- » Lead Company Medic (1992-1994)
- » Member Health Information Management Systems Society (HIMSS)

Contact Information:

Mark.D.Mellott2.mil@mail.mil
 (202) 685-2782

Role:

Lead POC for technology

References

Armed Forces Health Surveillance Center. January 2009. Diagnoses of overweight/obesity, active component, U.S. Armed Forces, 1998-2008. Medical Surveillance Monthly Report, 16(1), pp 2-6. Available online at: http://afhsc.mil/viewMSMR?file=2009/v16_n01.pdf.

Army. Mil. New Training Initiative Prepares Soldiers as Athletes. July 2010. Available online at: <http://www.army.mil/article/43074/new-training-initiative-prepares-soldiers-as-athletes>.

Bullock SH, Jones BH, Gulchrist J, Marshall SW. 2010. Prevention of physical training-related injuries: Recommendations for the military and other active populations based on expedited systematic reviews, Am J Prev Med: 38(1S), S156-S181.

FM 6-22.5. March 2009. Combat and Operational Stress Control Manual for Leaders and Soldiers. Chapter 4: Sleep Deprivation. Available online at: http://armypubs.army.mil/doctrine/DR_pubs/dr_a/pdf/fm6_22x5.pdf.

Human Performance Resource Center. The Warfighter Nutrition Guide. Available online at <http://hprc-online.org/nutrition/nutrition-resources>.

Jones B, Knapik J, Hauret K. 22 March 2012. Briefing: Physical Activity and Risks of Injuries in Civilian and Military Populations. Available online at: http://usaphc.amedd.army.mil/PHC%20Re-source%20Library/PAandInjuryinCivandMil_SMRC%20Talk_22MAR2012FINAL11-7-12.pdf.

Nindl B. 22 March 2012. Strategies for Enhancing Military Physical Readiness in the 21st Century. U.S. Army War College. Available online at: www.dtic.mil/cgi-bin/GetTRDoc?AD=ADA561612.

Singh A, Bennett T, Deuster P. 1999. Peak Performance Through Nutrition and Exercise. Uniformed Services University of the Health Sciences. Department of Military and Emergency Medicine. Available online at <http://hprc-online.org/dietary-supplements/files/ergopam.pdf>.

U.S. Army Public Health Command. 23 February 2011. Information Paper. Body Mass Index and Percent Body Fat.

U.S. Army Public Health Command. January 2011. Technical Guide 320: Guide to Coping with Deployment and Combat Stress. Available online at: <https://usaphcapps.amedd.army.mil/HIOShop-pingCart/viewItem.aspx?id=124>.

U.S. Army Stand-To! Soldier Athlete Initiative. August 2010. Available online at: <http://www.army.mil/standto/archive/2010/08/17/>.

Whelan D. 15 June 2012. Briefing: HP Nutrition Campaign Topline Research Briefing.