WG 3 (Psychological Health)

The Activity of the Rear Rehabilitation Unit in the Iron Swords War from Theory to Reality

Yuval Levison Yanai, Michal Gefen.
Medical Corps, IDF.

On October 7, the Rear Rehabilitation Unit received (MALSHA) orders to commence operations. This reserve unit is activated in emergencies (war), and its mission is to treat soldiers no longer in the front lines suffering from Acute Stress Reactions (ASR) or Disorder (ASD) following operational activities. The first time activated since 1982, in the weeks and months following October 7, the unit faced a series of challenges: the number of patients was five times greater than the planned maximum capacity; the principles of Closeness, Immediacy, and Expectancy (CPI), which are the military's basis for treating ASR and ASD, did not fit the unit's treatment framework; the patients and families experienced a lack of trust and a feeling of abandonment; and there was a need to implement an overall uniform therapeutic approach among a diverse population of veteran therapists, all of whom were reservists.
In this talk, I will describe how we addressed these challenges during the unit's operational period focusing on: 1. Alternatives CPI, balancing regression with the option to return to active duty if at all possible; 2. Addressing the soldiers' need for security and containment while simultaneously exposing them to the ongoing military reality; 3. Providing a uniform approach for treatment without undermining the therapeutic identity of the therapists and their professional freedom, acknowledging that therapeutic flexibility is essential in treating the ASD phase.
I will conclude by referring to the uniqueness of the Rear Rehabilitation Unit as a military therapeutic body that treats soldiers suffering from trauma within the military system, and the inherent tension between the need to encourage the traumatized soldiers for regression and return to functioning. The statistic that more than 80% of the soldiers returned to service supports the assumption that encouragement toward regression did not significantly harm the soldiers' return to military service.

WG 3 (Psychological Health)

Integrating Individuals with Remitted Depression, Anxiety, or Obsessive-Compulsive Disorder into Combat Roles: Reevaluating Military Policies

Noa Bineth, Eliraz Cohen Levi, Avishai Antonovsky, Jacob Rotschild, Zivan Beer, Maytal Bivas-Benita, Inbal Goldshtein, Doron Stupp, Meir Shechter, Aya Bardugo, Carmel Kalla.
Israel Defense Forces Medical Corps.
Faculty of Medicine, Hebrew University of Jerusalem.

Background:
Depression, anxiety, and obsessive-compulsive disorder (OCD) affect up to 20% of young adults. Until 2020, candidates for military service in the Israel Defense Forces (IDF) with any history of mental health-related disorder were ineligible for combat roles. A policy change introduced in 2020 allowed individuals with documented remission of at least one year and positive prognostic characteristics to serve in combat units.
Purpose:
This study examines the implications of integrating individuals with a history of remitted mental health disorders into combat settings and estimates the proportion of mental health relapse.
Methods:
We included soldiers with a history of depression, anxiety, or OCD who were screened before enlistment and confirmed to be in remission for at least one year. We assessed the proportion of soldiers disqualified from service post-assignment. The Wilson score interval was used to calculate 95% confidence intervals for disqualification rates.
Results:
Between November 2020 and September 2024, 837 candidates with remitted depression, anxiety, or OCD were eligible for combat roles. Of them, 659 were recruited: 359 (54.5%) with anxiety disorders, 191 (29.0%) with major depressive disorder, and 117 (17.8%) with OCD. Seventy-two soldiers (10.6%, 95% CI: 8.5 to 13.2) were medically disqualified: 43 with anxiety disorders (12.0%), 23 with major depressive disorder (12.0%), and 6 with OCD (5.1%).
Conclusions:
Most soldiers with documented one-year remission from psychiatric disorders successfully completed combat service. An ongoing study compares these soldiers with a control group to assess long-term viability. The findings suggest a practical pathway for integrating individuals with remitted mental health conditions into combat roles.