



Evaluation of Proactive Medical Policies on IDF Combat Soldier Performance and Readiness in Operation “Roaring Lion”

*LTC. Dr. Daniel Elbo Arama
EMT-P, BEMS, MEM, PhD*

MHSRS 2026



At the moment of truth,
IDF MEDICAL CORPS.

The Research Team

Daniel Elbo Arama ^{1,2,3}
EMT-P, BEMS, MEM, PhD
PRESENTER

Declan McGuone ³
MB, BCh

Itai Even-Tov ¹

Yael Ben-Yehuda ¹

Rom Neshet ¹

Dean David Lichter ¹
MD, MBA

Matan Daniel ¹
EMT-P, BEMS, MD

Tamar Rosenboim ¹

Yael Galanti ¹

Shachar Dembo ¹

Maor Zohar ¹

Shai Herzberger ¹
MD

Avi Shina ¹
MD, MPA, MHA

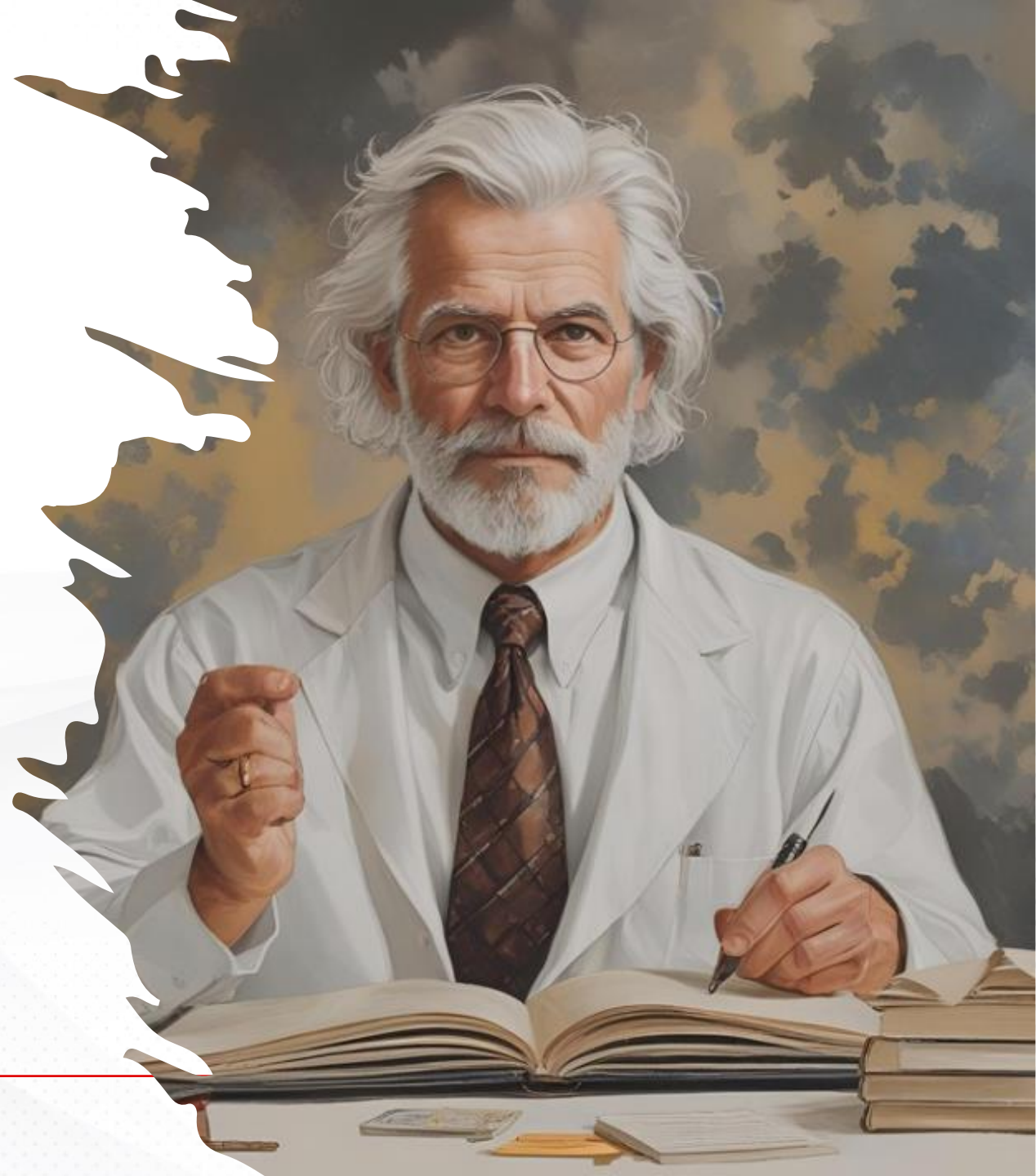


¹ Dept. of Military Medicine & "Tzameret," Hebrew University of Jerusalem · IDF Medical Corps, Jerusalem ² School of Public Health, Ben-Gurion University of the Negev, Beer Sheva ³ Yale University School of Medicine, New Haven, CT, USA



Disclaimer and Conflict of Interest

- The authors declare that they have no conflicts of interest or disclosures relevant to the content of this presentation.
- All research procedures were conducted in accordance with established ethical guidelines and with the approval of the appropriate institutional review board.
- The findings presented are based on the data available at the time of submission and may be subject to further analysis or refinement.
- This presentation represents the views of the authors and not necessarily those of the Israel Defense Forces or affiliated institutions.



Background: The Challenge

Maintaining operational readiness and soldier performance during active combat is a critical challenge for military medical systems

The IDF operation “**Roaring Lion**” demonstrates how systematic healthcare policies can enhance readiness despite operational constraints



Primary Objective of the Study

To evaluate the impact of military medical policies - **proactive medical outreach** and **optimized routine healthcare delivery** - on soldier health, treatment adherence, and operational performance during active combat.



At the moment of truth,
IDF MEDICAL CORPS.

Methods: A Mixed-Methods Design

QUANTITATIVE METRICS

- Health indicators
- Attendance rate ~72%
- Screening data

QUALITATIVE ANALYSIS

- 15 semi-structured interviews
- Soldiers & medical providers
- Barriers & facilitators to policy implementation



Key Results

Proactive medical engagement significantly enhanced soldier treatment adherence and performance

Statistically significant · $p < 0.05$

↑ Treatment Adherence

Soldiers showed measurably improved compliance with proactive medical engagement

↑ Performance & Readiness

Enhanced operational readiness sustained despite active-combat constraints

Of the patients contacted proactively, **72%** attended their scheduled medical appointment (n=1301)



Five Critical Themes

Dedicated personnel

— Evidence-based implementation requires dedicated personnel to preserve routine care.

Proactive engagement —

Soldiers show measurably improved compliance and readiness with proactive engagement.

Scalable distribution —

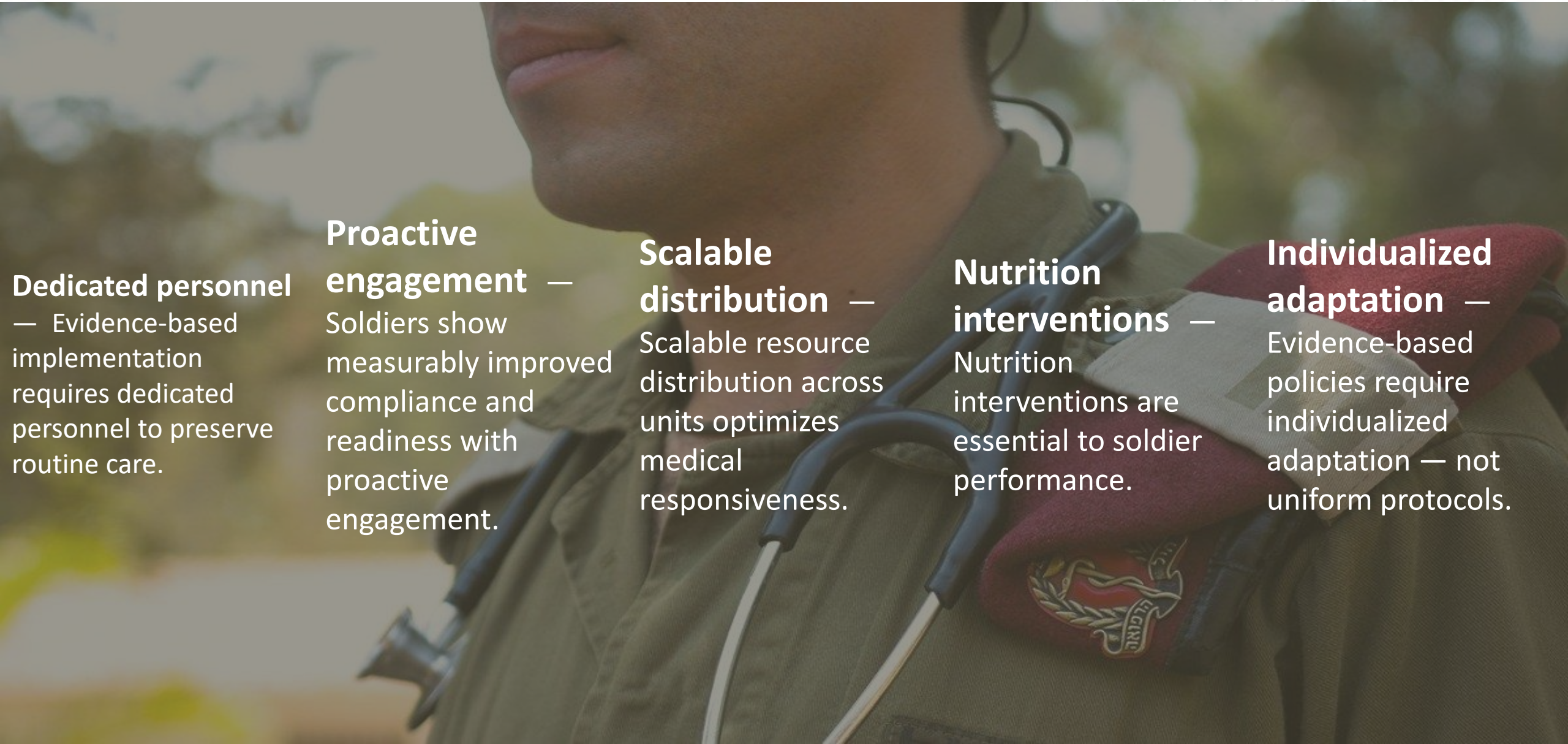
Scalable resource distribution across units optimizes medical responsiveness.

Nutrition interventions —

Nutrition interventions are essential to soldier performance.

Individualized adaptation —

Evidence-based policies require individualized adaptation — not uniform protocols.



Dedicated personnel - Evidence-based implementation requires dedicated personnel to preserve routine care

"During the emergency, everyone was pulled toward the immediate crisis.

We quickly realized that **if no one was explicitly assigned to maintain routine services, preventive care, chronic disease follow-up, and scheduled treatments - it simply stopped happening."**

Interviewee number 4



Proactive engagement - Soldiers show measurably improved compliance and readiness with proactive engagement

“Once we started proactively reaching out, scheduling follow-ups, and checking on them regularly, **compliance improved dramatically.**”

Interviewee number 11



Scalable distribution - Scalable resource distribution across units optimizes medical responsiveness

“We learned that equal distribution is not always effective distribution.

What worked was continuously adjusting resources according to the situation on the ground and the needs of each unit.”

Interviewee number 10



Nutrition interventions - Nutrition interventions are essential to soldier performance

“Part of preserving routine healthcare during the emergency was making sure soldiers maintained healthy eating habits. **When we addressed nutrition proactively, we saw a clear difference in how they functioned and coped with the operational demands.**”

Interviewee number 8



Individualized adaptation - Evidence-based policies require individualized adaptation - not uniform protocols

“Evidence-based medicine is not about applying the same protocol to everyone. During the emergency, **success came from understanding when and how to adjust the recommendations to fit the person standing in front of us.**”

Interviewee number 12



THE BOTTOM LINE

Integrating evidence-based
medical policies into military
readiness frameworks
substantially enhances
soldier performance and
operational readiness



Recommendations & Implications

Scale Across Services

Adopt systematic, scalable medical policies across military services and diverse operational environments.

Integrate Civilian Resources

Incorporate civilian healthcare resource integration into operational healthcare delivery.

Advance Readiness Frameworks

Apply policy-evaluation methodologies to strengthen military medical readiness frameworks.

Adapt, Don't Standardize

Tailor evidence-based policies to unit needs — individualized adaptation over uniform protocols.



Thank You



At the moment of truth,
IDF MEDICAL CORPS.

