Volunteers: An Essential Ingredient in Caring for Veterans at the EOL

Objectives of Training

At the end of the training, the volunteer will be able to:
• Describe why it is important to improve our knowledge and understanding of Veteran’s needs
• Describe how we can best meet the needs of Veterans and their loved ones
• List four unique issues that Veterans may face at the end of life

At the end of the training, the Volunteer Staff Coordinator will be able to:
• Engage the Veteran community in improving end-of-life care for Veterans
• Develop expertise in military culture and Veteran end-of-life issues
• Hospice Veteran volunteer may have issues resurface while working with other Veterans

Why is it Important to have Volunteers Targeted Specifically for Veterans?

• The culture of stoicism & societal reactions can discourage Veterans from sharing their war experiences. Trained volunteers can learn how to create a safe, emotional environment for their comrades
• When one Veteran talks to another, stoicism and secrecy may dissolve (or, detrimentally reinforced!)
• Veterans share a common language; code of conduct and honor; own culture
• Sharing supports life review and healing

Why is it Important to have Volunteers Targeted Specifically for Veterans?

• It’s an important way to earn your STARS!
Forming a Veteran Committee or Taskforce

- Have ONE identified Chairman who also acts as liaison.
- Committed group of members that include volunteers
- Veteran community connections
- Understanding of Veteran issues
- Have time to commit
- Diverse membership that includes Veterans
- Defined goals

Advertising Your Veteran Volunteer Program Internally

At Team Meetings
- Ask if team members know Veterans who might be interested in volunteering
- Describe the Veteran Volunteer program to the team
- Share with them the list of Veteran patients on their team and ask if any could use a Veteran volunteer.
- Report any success stories with Veteran volunteers

Recruiting Veteran Volunteers

- Search for Veterans in your existing volunteer pool
- Present at VFWs, DAVs, ALs, etc.
- Contact Veteran Service Officers (VSO’s) and Vet Centers
- Utilize your Hospice Veteran Partnership to contact VA hospitals, clinics and state Veterans homes (or, YOU provide the volunteers for the VA or Vets Home)

Recruiting Veteran Volunteers

- Recruitment fliers and posters sent to senior centers, libraries, corporations, faith institutions, etc.
- On-line volunteer recruitment (www.volunteermatch.org)
- Hospice website, newsletters
- Community events recognizing Veterans
- Hold an annual Veteran Day event for veterans, and identify needs for volunteers
- Make public service announcements on local radio, TV, and newspaper

Screening and Interviewing Veteran Volunteers

- Screening questions help with volunteer placement (patient visits, administrative) assignments
- “Have you served in the Military?” (Not “Are you a Veteran?”)
  - Branch of service, rank
  - Services dates
  - Combat experience? Triggers? Is death a trigger?
- “Do you experience post traumatic symptoms or are you in active treatment for PTSD?”
- “How comfortable are you with tears?”
Screening and Interviewing Veteran Volunteers

- “How has your military training and experience influenced your thoughts and feelings about death and dying?”
- “Is there anything that might still be troubling you from dangerous duty assignments in the military?”
- Match Veterans with similar histories for optimal outcomes
- Should be supervised for at least 3 visits, along with debriefing and pt/family feedback

Non-Veteran Volunteers

Hospice volunteers without a military history may want to support Veterans at end of life
  - Had family members who served
  - Raised in a military family
  - Worked closely with the military as a civilian
  - Employed in an organization that serves Veterans
  - Identify Veterans as underserved
  - Committed to no Veteran dying alone
  - Willing to learn about Veterans’ needs

Cautions about Veteran Volunteers

- If assigned patients, volunteer may experience troublesome symptoms
- Also may experience relief of guilt and shame by caring for fellow Veterans (brotherhood/sisterhood)
- Need to examine their own relationship with stoicism to make sure that they won’t reinforce it.
- Need reinforcement that all Veterans are different and may not feel the same as they do.
- Some Veteran volunteers may prefer hospice patients who are not Veterans

Training Veteran and non-Veteran Volunteers

- Include Veteran-specific content in volunteer orientation
- Use resources from www.WeHonorVeterans.org for education
- DVD: Wounded Warriors: Their Last Battle
- Book: Peace at Last (Appendices B, C)
- Non-Veteran volunteers should consult with the Volunteer Coordinator about a patient that might benefit from a Veteran volunteer

US Veterans – The Facts

- 26 million Veterans are alive today
- 25% of all deaths in the US are Veterans
- More than 1,800 Veterans die each day
- The VA cares for a minority of Veterans at the end of life: 96% die in the community.
- Only 33% of Veterans are enrolled in the VA to receive benefits.
Women are Veterans Too!

Marie Bainbridge RN
Vietnam Veteran
Bronze Star Recipient
Bay Pines VA Hospice Nurse

Veteran’s Unique Needs at the End of Life

America’s veterans and their loved ones may have unique needs

These needs may be influenced by:
• Combat or non-combat experience
• Which war they served in
• If they were POWs
• If they had/have PTSD
• The branch of service and their rank
• Whether they were enlisted or drafted
• The age they were when they served

War Experience + Non-Combat Dangerous Duty Assignments

• World War II
• Korean “Conflict”
• Vietnam War
• Gulf War
• Iraq/Afghanistan
• Other “conflicts” around the world
• Peacetime dangerous duty assignments

War’s Consequences

“The outcome of any armed conflict holds not just the promise of peace but also dark, terrible revelations, questions of justice over the vanquished, and, for far too many, the confronting of personal loss.”

Veterans History Project:
Forever a Soldier: Unforgettable Stories of Wartime Service

Military Cultural Norms

Influences on end-of-life experience...
• Promotion of stoicism
• Fear and admitting pain seen as a sign of weakness
  – “Big boys don’t cry”
  – “No pain no gain”
  – “Few good men”
  – “Once a Marine always a Marine”

Types of Response to War Trauma

Three responses to war trauma:
• Integrated Response to Trauma
  – Trauma has been processed
  – Healing occurs - life goes on
• Incomplete Integration of Trauma
  – PTSD is prolonged
• Apparent Integration of trauma
  – Trauma is kept in the unconscious and everything seems to go on
  – Lingering effects of war trauma
  – Undiagnosed/ delayed onset

-Deborah Grassman, VA Hospice, Bay Pines, FL
### Possible Outcomes from Combat Experience

Some are able to integrate experience into their lives, especially if they:
- are naturally resilient
- have good family and social support
- had a positive war outcome
- talked about their war experiences

### Integrated Response to Trauma

“I’ve faced death before... I’m not afraid anymore... I’m not afraid now.”

“I’ve faced death before and survived... Every day since then has been a gift.”

It’s important to:
- Listen carefully
- Invite them to tell their stories
- Express appreciation for their service to our country, and
- Celebrate their accomplishments with them
- Affirm the wisdom they have gained and let it impact your life

### Post Traumatic Growth Symptoms

- Relating to others
- Open to new possibilities
- Personal strength
- Spiritual changes
- Appreciation of life

### Incomplete Integrated Response to Trauma

“I lost my soul in Vietnam.”

“If I’d just … he’d still be here today.”

“Most of my brother stayed over there.”

“My son’s never been the same.”

“I didn’t know the person who came back to me.”

Indications of a Veteran with incomplete integrated trauma include:
- PTSD
- History of alcohol and/or drug abuse
- Estranged relationships
- Unfulfilled longings
- Suspicion & lack of trust
- Anxiety and agitation or acting out of the trauma
- Nightmares
- Staying “on guard”

### Traumatic Combat Memories Can Cause:

- Alcohol/drug abuse
- Social isolation
- Anxieties
- Anger outbursts
- Difficulty concentrating
- Post-Traumatic Stress Disorder (PTSD)
- Guilt/Shame

### How to Respond to Incompletely Integrated Trauma

- Remember that their behavior is related to trauma
- Offer statements such as, “Some Veterans tell me they experienced some horrific things in war. Did anything like that happen with you?”
- After a question about war, sit quietly
- Some medications may help
- Don’t touch unexpectedly. Call their name first.
- Realize that noxious stimuli can re-stimulate trauma
- Assess for environmental triggers
Apparent Integration of Trauma

“I don’t want to talk about it.”
“What good will it do anyway?”

Indicators that a Veteran may have Apparent Integration of Trauma include:
• Acting out behaviors
• Workaholic or other addictive behaviors
• “White Knuckle Syndrome”-Veteran appears hollow or aloof

These Veterans should receive the same interventions and care as for Veterans with Incomplete Integrated Trauma.

As a Veteran...

• You may offer camaraderie
• Keep the focus on the Veteran patient, not yourself
• Remember the Veteran’s experience may be different than yours
• Open the door but never push

Utilizing Veteran Volunteers

Assist in Replacing Lost Medals
– Contact agencies in charge of replacing medals
– Coordinate the replacement of these medals

Obtaining VA services/admission if needed

Responding to Stoicism

• Create safe emotional spaces for tears and fears by validating feelings:
  “It’s only normal that you might feel sad right now. It’s okay to cry.”
  “Most veterans tell me that they feel a little afraid at a time like this.”

Responding to Guilt: Hear It & Get Help

FORGIVENESS!
FORGIVENESS!
FORGIVENESS!

Much to be forgiven for:
• Self (killing, etc.)
• Self (not killing, not dying, “friendly fire”)
• ENEMY*****
• Government (using/betraying them in Vietnam)
• The World (for being like it is)
• God (for allowing the world to be like it is)

• Assess guilt. DON’T dismiss it with platitudes.
• What is needed is healing of the heart.
**Utilizing Veteran Volunteers**

Assist Veterans in Reminiscing/ Telling Life Stories, including their military story
- Listen as patient reminisces
- Record/ videotape patient's life story
- Produce a Memory Book or a CD/ DVD
- Assist Veteran in connecting with the Veteran History Project at www.loc.gov/vets/

**Utilizing Veteran Volunteers**

Call or visit Veterans on Veterans Day and Memorial Day
- Visit Veterans in their homes, nursing facilities, assisted living facilities or hospitals and VA programs
- Veteran volunteers might consider wearing their uniform and take part in the ceremony
- Volunteers could distribute certificates for Veterans Day
- Children could make Veteran Day cards for distribution

**Acknowledgement and Respect**

Acknowledging Family Sacrifice

**Edward J Chaffin**

1967-1969 Vietnam Veteran
Combat Veteran
We appreciate our veterans
Escort at Death with Flag

Honor Guard
Taps
Pledge of Allegiance

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**Veteran’s Day**

Volunteer
- Visits Veterans on Veterans Day in homes, nursing facilities, assisted living facilities or hospitals
- Could assist LTCF’s and ALF’s in celebrating Veterans Day/ Memorial Day
- Volunteers who are Veterans might wear their uniform and take part in the service
- Provide hospice education to Veteran’s groups

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“VA must offer to provide or purchase hospice & palliative care that VA determines an enrolled veteran needs”.
- 38 CFR 17.36 and 17.38

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**Burial and Burial Benefits**

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**Supporting Veteran Volunteers**

- IDT meetings
- Regularly scheduled volunteer support meetings
- Newsletters
- Continuing education with Veteran specific content
- E-mail groups and postings
- Opportunities for them to share stories about their Veteran patients
Recognizing Veteran Volunteers

- Acknowledge your Veteran volunteers on Veteran’s Day (gifts, certificates)
- Ask hospice staff and management to call your Veteran volunteers and thank them for both their volunteer service and their service to the country
- Share Volunteer information with your staff:
  - What branch of the military did they serve in and what their rank was?
  - Did they serve in any wars?
  - What are their contact numbers?
  - What are the best times to call them?

Supporting Veteran Volunteers

- Volunteer coordinators: be aware of signs a Veteran volunteer is having negatives reactions or experiences
- Reaction could be withdrawal from patient – even without knowing why
- Volunteer may becomes sad or even depressed
- May re-live his/her own experience while hearing patient reminisce about their experiences
- Volunteer may have flashbacks or increased emotional reaction or arousal

Recognizing Veteran Volunteers

- Order a presidential proclamation on Veterans Day at www.whitehouse.gov

In Closing:

May each of us here have the GRIT, the GRACE, the HUMILITY, the LOVE to heal our war-ravaged soldiers and our broken nation.

May we be the link that connects the circle so they feel connected to HUMANITY once again.

May we not miss the opportunity to help these veterans’ souls from Iraq Desert Storm Vietnam Korea Nazi Germany and various other parts of the world where they served so they can have peace...at last.

May we help them know that the circle goes on, joining them to you and me.

Our people, our nation, our God would be ever so grateful.

- DEBORAH GRASSMAN