

Veteran-to-Veteran Volunteer Training



Objectives of Training

At the end of the training, volunteers will be able to:

- Describe why it is important to improve our knowledge and understanding of veterans' needs
- Describe how we can best meet the needs of veterans and their loved ones
- List four unique issues veterans may face at the end of life

U.S. Veterans – The Facts

- 26 million veterans are alive today
- 25 % of all deaths occurring 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

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”

Veteran's Unique Needs

*America's veterans and their loved ones
may have unique needs.*

These needs are influenced by:

- **Combat or non-combat experience**
- Which war they served in
- If they were POWs
- If they have PTSD
- The branch of service and their rank
- Whether they were enlisted or drafted

Military Cultural Norms

Influences on end-of-life experience...

- Stoicism promoted
- 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”

Veteran Volunteers who work with Veterans in Hospice

- Bring your military training and history to your hospice work
- Are able to share a common language
- A cultural bond exists that opens doors of trust
- Share codes of conduct and honor



Veteran Volunteers who work with Veterans in Hospice

- Barriers of stoicism and secrecy dissolve (*especially combat veterans*)
- Offer unique opportunities that support life review and healing



Three Types of Response 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

Source: Deborah Grassman, VA Hospice, Bay Pines, FL

Integrated Response to Trauma

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
- 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

Traumatic combat memories can cause:

- Post Traumatic Stress Disorder (PTSD)
- History of alcohol and/or drug abuse
- Estranged relationships
- Difficulty concentrating
- Suspicion and lack of trust
- Anxiety and agitation or acting out of the trauma
- Nightmares
- Sleeping “on guard”

Incomplete Integrated Response to Trauma

"I lost my soul in Vietnam."

"If I'd justhe'd still be here today."

"Most of my brothers stayed over there."

"My son's never been the same."

"I didn't know the person who came back to me."

Post Traumatic Stress Disorder (PTSD)

- Exposure to a traumatic event
- Persistently re-experienced through:
 - Recollections/flashbacks
 - Nightmares
 - Sensory distress cues
- Individual persistently avoids associated traumatic stimuli
 - Thoughts, feelings, conversations about trauma
 - Situations that trigger sensory distress cues
- Other persistent symptoms

Post Traumatic Stress Disorder (PTSD)

- The onset of PTSD can be acute, chronic or delayed
- Impossible to predict how it will manifest and who it will affect
- Immediate treatment and ongoing support helps

How to Respond to Incompletely Integrated Trauma

- Remember 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.

How to Respond to Incompletely Integrated Trauma

- Don't touch unexpectedly. Call their name first.
- Realize that noxious stimuli can re-stimulate trauma.
- Assess for environmental triggers.

Responding to Guilt

- Combat veterans may feel guilty about acts committed during war.
- Be aware of statements to avoid.
- Create safe emotional space through listening.

Apparent Integration of Trauma

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

Apparent Integration of Trauma

“I don’t want to talk about it.”

“What good will it do anyway?”

“What’s done is done. There’s no going back.”

Symptoms of Depression

- Withdrawal
- Overwhelming sadness
- Lack of energy
- Irritability
- Emotional flatness or emptiness
- Changes in behavior and attitude
- Different feelings and perceptions
- Physical complaints

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

As a veteran...

- Offer camaraderie.
- Keep the focus on the veteran not you.
- Remember the veteran's experience may be different than yours.
- Open the door, but never push.

Recommended Interventions with All Veterans

- Make the environment emotionally safe.
- Affirm the *feeling* aspect of their conversation.
- Remember that stoicism might interfere with acknowledging physical, emotional or spiritual pain.

Recommended Interventions with All Veterans

Recognize female veterans:

- Military nurses saw trauma/mutilation
- Thank older female veterans for paving the way
- Look for PTSD in women
- May have been sexually assaulted in military

Remember

- Non-combat veterans may have served on dangerous assignments.
- Combat veterans may have served in “safe” areas
- Avoid making assumptions.
- Not all people who have suffered trauma will experience PTSD.

Range of Volunteer Services

Volunteers might:

- Provide transportation
- Make regular volunteer visits
- Provides telephone assurance calls
- Give respite for family members/caregivers
- Provide education about and assistance with veteran benefits

Replacing Lost Medals

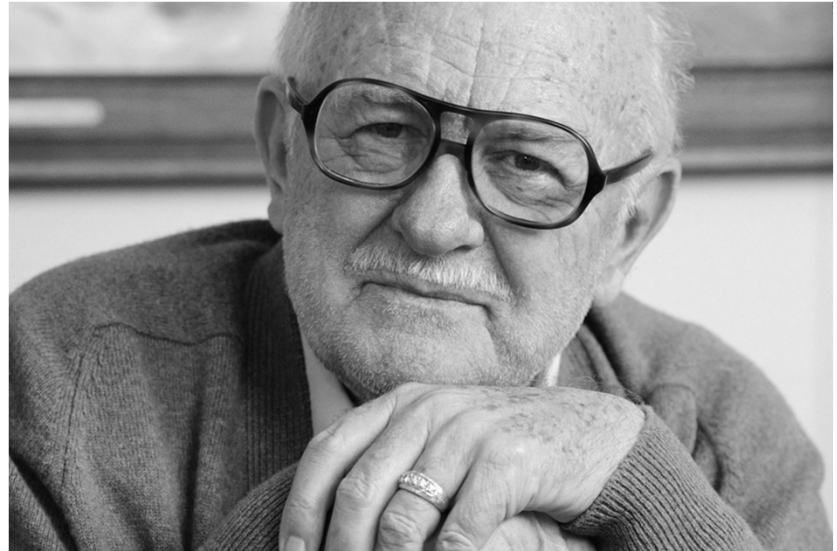


Volunteers:

- Contact Hospice of Siouxland staff to request replacement medals from the specific branches
- Coordinate the replacements of the medals



Reminiscing and Life Story Telling



Volunteers might:

- Visit and listen as patients reminisce
- Record or videotape patients' life stories
- Produce a memory book

Veteran's Day

Volunteers might...

- Visit veterans on Veterans Day in homes, nursing facilities, assisted living facilities or hospitals
- Assist LTCFs and ALFs in celebrating Veterans Day/Memorial Day
- Coordinate/Provide hospice education to veterans' groups

Volunteers who are veterans might wear their uniform and take part in the service

Veteran's Day

Hospice of Siouxland recognizes each veteran patient by:

- Awarding the veteran with a framed certificate of appreciation
- Visiting on or around Veterans Day
- Engaging with team-specific outreach
 - One team delivered breakfast to each veteran; another gave cards of thanks made by local youth.

You Are Important to Us!

- Have self awareness, you also have had a journey:
 - Be aware of your own losses
 - Have an awareness of how your military training influences your thoughts and emotions

Questions?

For future assistance, contact

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