Healing Vietnam Veterans’ Moral Injury: A Stress First Aid Toolkit for Hospice Teams

Karen Blackstone, Anca Dinescu, Joy Laramie, Robert Morgan, Sonika Pandey, Carol Ramsey-Lucas, Patricia Watson

Washington DC VA Medical Center Hospice and Palliative Care Program
Audience Poll

- Are you a Vietnam veteran?
- Do you have a family member or friend who is a Vietnam veteran?
- Are you a health care provider for a Vietnam veteran?
- Do you work for the Department of Veterans Affairs?
- Do you work in a community (not-VA) setting?
Introduction

• In 2019, VA and NHPCO created a training program to improve wellness outcomes specifically for seriously ill and dying Vietnam veterans.
  • Post-Traumatic Stress Disorder
  • Suicide Prevention
  • Moral Injury

• https://www.wehonorveterans.org/resource-library/?fwp_conflict=vietnam
Objectives

• Describe how Moral Injury affects Vietnam Veterans with serious illness

• Describe a tool to support hospice team “first responders” to identify, assess and palliate Vietnam Veterans’ Moral Injury
• Approximately 2.7 million Americans served in the military in the Vietnam War (1961-1975)

• During the war, service men and women experienced unimaginable trauma and 58,000 died

• Soldiers returning home often faced scorn as the war became increasingly unpopular

• While the majority of Vietnam Veterans successfully readjusted, many Vietnam-era Veterans experienced post-war challenges and ongoing medical, psychological, and spiritual distress
• Today, the majority of Vietnam veteran survivors are age 65+

• Although Vietnam veterans may receive the same serious and life-threatening diagnoses as non-veteran older adults, the Vietnam Veteran’s illness experience is even more difficult when post-traumatic stress and war-related moral injury are present

• The suicide rate for older veterans is higher than that of non-veterans, and the rate among older veterans further increases with age

• The majority of seriously ill Vietnam veterans receive medical care outside the VA health care system and 97% of veteran deaths occur outside VA facilities
Vietnam Remembered

NYC gives vets belated celebration

The New York Sun

New York, May 11, 1983

The Vietnam Veterans parade was held in New York City on Wednesday, May 11, 1983. The parade was a belated celebration for veterans of the Vietnam War.

The parade started at the Vietnam Veterans Memorial in Washington, D.C., and ended at the United Nations in New York City.

The parade was attended by thousands of people, including veterans, family members, and supporters.

The parade included military units, floats, and performers. The highlight of the parade was the flypast of 112 planes, including helicopters and fighter aircraft.

The parade was a way for New Yorkers to honor the veterans of the Vietnam War and to remember the sacrifices they made.

The parade was a significant event in the city, and it was covered extensively by the media.

The parade was a way for the city to show its appreciation for the veterans of the Vietnam War and to honor their service.

The parade was a reminder of the sacrifices made by the veterans of the Vietnam War and the importance of remembering their service.

The parade was a way for the city to come together and to show its support for the veterans of the Vietnam War.

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Veterans Plaque Dedication Ceremony
November 23, 2019 at 1:00PM
Montrose Veterans Park

Vietnam Memorial Washington DC
What is Moral Injury?

Events are considered morally injurious if they transgress deeply held moral beliefs and expectations which shatters moral and ethical expectations that are rooted in religious or spiritual beliefs, or culture-based, organizational, and group-based rules about fairness, the value of life, and so forth.

Moral Injury describes the harmful psycho-spiritual aftermath of exposure to such events.
Vietnam Veterans’ Unique Risk Factors for Moral Injury

- Social burden of reintegration producing a code of silence and suppressed memories
- Occupational health exposures and aging
- Refusal to engage the Veteran’s Administration even if they have service connected disability
- Agent orange
- Immunizations
- Prophylaxis for tropical disease
- Above average alcohol and substance abuse
- Stress loaded occupations and social behaviors
Moral Injury and PTSD Symptom Overlap

**Moral Injury**
- Less likely to be related to life-threatening events
- Spiritual Focus
- Identity Focus
- Avoidance: wish to protect others
- Less Research
- Less Consensus
- Narrower Focus

**Post-traumatic Stress Disorder**
- More likely to be related to life-threatening events
- Reexperiencing
- Hyperarousal
- Avoidance: preventing re-injury
- More research
- More consensus
- Broader Focus

**Common Symptoms**
- Reminders
  - Avoidance / Denial
  - Intrusive Thoughts
  - Sleep Issues
  - Substance Use
- Negative Cognitions:
  - Guilt/Shame
  - Anger
  - Disgust
  - Betrayal
- Negative view of self
- Social problems
  - Trust issues
- Spiritual changes
  - Fatalism or sorrow
Veteran Experiences That Could Create Moral Injury

- Perceived betrayal by peers, leadership, civilians or self
- Engaging in or witnessing acts that violated personal moral beliefs
- Within ranks violence
- Acts of disproportionate violence inflicted on others
- Incidents involving death or harm to civilians
- Wishing one had done something that one didn't do
Moral Injury & Seriously Ill Vietnam Veterans

Life Review reopens unresolved emotional and spiritual wounds

Feeling as if they are unable to forgive self or be forgiven

Fearing that they are not worthy of redemption

Unable to trust anyone to open up about experiences

Despair due to loss of life meaning and purpose
Stepped Care Approach to Address Moral Injury in Hospice and Palliative Care

Stage I: Assess and palliate the suffering related to moral injury and provide social supports

Stage II: Enhance coping skills

Stage III: Treat specific moral injury issues
STRESS FIRST AID: Stages 1 and 2 in Stepped Care Model

Seven Cs of Stress First Aid:

1. CHECK
Assess: observe and listen

2. COORDINATE
Get help, refer as needed

3. COVER
Get to safety ASAP

4. CALM
Relax, slow down, refocus

5. CONNECT
Get support from others

6. COMPETENCE
Restore effectiveness

7. CONFIDENCE
Restore self-esteem and hope
Objectives of Stress First Aid

- Make a connection in a helpful/respectful way
- Restore/support a sense of safety
- Calm and orient distressed individuals
- Connect individuals to their sources of support
- Improve the ability of those affected to address their most critical needs
- Foster a sense of hope/limit self-doubt and guilt
Check Actions: Make a Connection

- Opening Questions
- Culturally Sensitive Questions
- Deepening Questions
- Religion/Spirituality Questions
“What really matters to you in your life?

What most concerns you?”

“What thought keeps coming back to you? What do you keep telling yourself?”

“How have you been feeling since...?”

“Have you been through anything like this before? How is this similar or different?”

“"How is this affecting how you feel about yourself, your relationships, the world?"
Deepening Questions to Ask a Vietnam Veteran

- Do you think you were changed as a result of being in the military? Please describe the changes.
- Do you think your experiences in the military are affecting you today?
- Is there anything about your experiences in the military that is still troubling you today?
- Do you have nightmares about the war?
- What was your homecoming like? Is there anything about your homecoming that is still troubling you today?
- Do you think your experiences in the military and your homecoming affected your relationships with family and friends?
- Do you keep in touch with anyone you served with?
- Do you think your experience in the military is influencing the way you are now coping with your illness?
### Stress First Aid:

#### Core Actions

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<td>1</td>
<td>Cover</td>
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<td>Connect</td>
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<td>4</td>
<td>Competence</td>
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<td>Confidence</td>
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<td>Cover Actions</td>
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|               | • Treat the person with kindness, compassion, respect and nonjudgment | • Ask about concerns  
• Give simple, accurate information  
• Convey that you are there to help and to keep the person safe  
• Help create a sense of safety where Veterans can disclose their concerns, worries, and struggles about making sense of their life experiences | • Protect the person from unnecessary exposure to reminders  
• Set boundaries to protect them and others  
• If you have to act firmly or abruptly, moderate the impact at your first opportunity  
• Reinforce compliance by promptly and positively acknowledging actions that follow your instructions |
Have a conversation about how safe the Veteran feels, such as any concerns they might have about:

- Any feelings of loss of control
- Confidence level about getting adequate pain relief
- Fear of abandonment
- Any feeling of fear of death
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<th>Approach</th>
<th>Information</th>
<th>Direction</th>
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<td>• Maintain a calm presence</td>
<td>• Ask questions in calming or distracting way</td>
<td>• Emphasize the present, and what’s practical / possible</td>
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<td>• Respect needs</td>
<td>• Use reflection, clarifying statements to communicate that you’ve heard correctly</td>
<td>• Use distraction at times</td>
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<td>• Expect and show understanding of emotions</td>
<td>• Provide information about services</td>
<td>• Direct to use simple self-calming actions</td>
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<td>• Validate</td>
<td>• Give reassurance</td>
<td>• Writing</td>
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<td></td>
<td>• Convey that reactions are understandable without dismissing or minimizing</td>
<td>• Guided breathing</td>
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<td>• Guided imagery</td>
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• “What we do and what we say is not as important as what the Veteran says. And what they really want from us is to know that we can tolerate being in their presence as they try to figure out who they are now at the end of life.”

• “Be a witness and stand in non-judgment, and just be with them. Bear witness – the story does not need to be true. It is their story. You do not need to act on it if they talk about war crimes. It’s about not passing judgment.”

• “If you don’t know how to respond, say something like: “how very interesting. I’ve never heard that perspective before.” Or: “I’ve never thought of that experience in that way before.” Acknowledge what they’ve said.”

• “If you want more information, say something like: “You’ve had such an amazing experience, and it sounds like you’ve experienced some things that nobody should have experienced – help me understand how that’s impacting you now.””
**Connect Actions**

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<tr>
<td>• Connect people to trusted supports however possible</td>
<td>• Get contact information</td>
<td>• Foster reconnection with family, friends</td>
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<td>• Look for people in vicinity to connect individuals to</td>
<td>• Look for people in vicinity to connect individuals to</td>
<td>• Encourage peer support with those available</td>
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<tr>
<td>• Ask about who are most trusted supports (including pets)</td>
<td>• Ask about who are most trusted supports (including pets)</td>
<td>• Solicit volunteers to provide support</td>
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**Diagram:**
- Connect Actions
- STRESSORS
- Connect
- Wellness
• “Educate families on what Moral Injury is and how it can affect Veterans at the end of life.”

• “Help the family have a connection at end of life if they have felt distanced or ostracized.”

• “If family members get jealous of the fact that the Veteran has never told them something that he told you, say something like: “Often it is difficult for Veterans to share their experience with the ones they love because they swore an oath to protect the ones they love. If its such a burden for them to bear, why would they do that to the ones they love?””

• “The family is often trying to figure out who are they in relation to a Veteran when that Veteran is dying. They might still be angry at him, but if they know his experiences, it can diffuse or redirect their anger to the war versus just to the Veteran.”
Competence

Actions

Approach
• Approach the situation with an eye towards restoring a sense of control and improving the person’s ability to deal with moral injury reactions

Information
• Determine people’s needs, what your role is, and what else is needed
• Provide verbal and written information on coping skills:
  • Relaxation / breathing / sleep training
  • Thought-stopping skills
  • Mindfulness-based/acceptance skills
  • Communication/social-skills training

Direction
• Facilitate skills practice and trouble-shooting
• Get people connected to other resources:
  • Spiritual care
  • Clinical Care
  • Other Veterans (such as Veteran volunteers)
• Encourage use of resources
Competence Actions:

Examples

- “For the Veteran who feels “I’m dying and I’ve never done this before,” be prepared to have a conversation about it, about how they want to choose to die, and what their models of death and dying are.”

- “For the Veteran who may feel like he doesn’t know how to talk with his family about his sense of moral injury, help them to understand how to have a conversation that focuses on how that moral injury has affected them in their relationships and how it is affecting them now, rather than having to disclose the circumstances of the morally injurious events.”
## Confidence Strategies

### Approach
- Keep a neutral or positive attitude
- Avoid judgment

### Information
- Clarify misunderstandings and distortions
- Give information about treatment options
- Ask about how they would like to proceed

### Direction
- Focus on the present moment or future
- Reduce guilt about actions with Confidence strategies
**Confidence Suggestions: Moral Injury**

**Make simple, nonjudgmental statements such as:**

- “I can understand why you’re feeling this way, given your strong values,”
- “I know this can be rough,”
- “What can I do to help / What would be helpful?”

**Help the individual to construct a timeline or narrative with room for personal strengths, positive relationships, spiritual change, appreciation for life, or what is helpful.**

**Help the person examine the double edged sword of their values and beliefs, and focus on the present.**

**Be willing to talk with them as many times as they need, give them relevant reading materials, and connect them to treatment or to people who have dealt with similar things, such as Veteran volunteers.**
Be careful about the following actions:

- Statements that imply judgments about what the person could or should have done
- Statements or questions that can be perceived as accusatory or incriminatory
- Statements or gestures indicating that you think the person should be reacting differently now
- Offering possibly inaccurate information, or potentially false hope. If you cannot answer a person’s question, do your best to learn the facts
Confidence Actions:

Examples

• “Talk about their strengths and vulnerabilities, and about the values they bring. Emotional pain is often an echo of a commitment to core values. Use core values as part of the discussion.”

• “If the Veteran speaks of guilt because of acts of omission, say something like: “It sounds like you’re sad about something you didn’t do?””

• “If you can’t tolerate bearing witness, be honest. Say something like: “I don’t know if I can hear this story, but I know someone who can. I can connect you with a Veteran Service Organization like the VFW, etc.””
Self-Care Strategies for Hospice and Palliative Care Providers

- Self-monitor and pace yourself daily
- Use a buddy system to share distressing stress reactions
- Take brief breaks for basic physical care
- Use consultation and supervision routinely
- Practice stress management during the workday
- Stay aware of your limits and needs
- Use vacation and personal time
In the midst of this pandemic, one the likes of which we have never before seen, we, as veterans, are transported back to memories of our service during the Vietnam War, the last time America witnessed this shocking loss of life. Although the environment and circumstances of our war are not precisely the same as yours, we see a direct correlation to the experiences, conditions, and fallout that we endured from our time in the “trenches.” We know from our wartime experiences the feelings of social isolation; little contact with family; the endless, incoming casualties; the stressful anxiety of making triage decisions; and the frustration of lacking critical medical equipment and personal safety items.

We remember the sadness of our hearts in not having the time to do all we wanted to do for the patients in our care. We see on your faces and hear in your voices the profound weight and sense of grief that you carry. We know that, along with these feelings, you have the added fear and threat of dealing with this unpredictable virus and the burden of potentially exposing family and friends.

We were not prepared for our war, just as you are facing situations unlike any you have experienced before. The daily chaos, anxiety, and stress of the shifts you work can be overwhelming at times with patients wherever you turn, all of whom need your care and attention. You are running a marathon with no finish line in sight, even though you are running as fast as you can.

Your coworkers will be with you forever as you are sharing something that no one else will ever truly understand. This may well be the most intense experience of your life. This will change your life. Don’t forget to take care of each other, because you have each other. However, when all is said and done, on the other side of this national crisis, you need to pause, reflect, and get in touch with yourself. We spent too many years after we came home from the war dealing with the denial of our feelings and memories.

One of the legacies of the Vietnam War is that society now accepts Post-traumatic Stress as a natural reaction to abnormal events. We discovered the importance of seeking professional help to explore the emotional residue created by our war. We had to take a deep dive into our feelings and search our souls in order to heal ourselves. We know this path—it is a life-long journey. Your loved ones are suffering and sacrificing in this fight. Don’t forget to include them in this process. Family and friends are your first line of support and are critical to healing.

We write this letter because we believe we share a commonality of serving our nation in a time of uncertainty and need. You are the very essence of what make America great. Your courage, determination, strength, and selfless sacrifice give us hope. Our thoughts and prayers are with you all. We salute you. You are not alone. We stand with you.
https://www.wehonorveterans.org/resource-library/?fwp_conflict=vietnam

Karen.Blackstone@va.gov