Wounded Warriors:  
Their Last Battle

What 10,000 Dying Vets have taught me. 
Death is same and different than civilians. 
Some stats.

Military Culture INFLUENCES

Branch of Service 
Officer 
Enlisted 
Drafted 
Age**

Influence: Military Culture

*Big Boys/ Big Girls don't Cry  
*No Pain. No Gain  
*The more it hurts, the better.  
*Fear/Pain is a sign of weakness  
**Once a Marine, always a Marine  
*Stoicism

[Image of a picture illustrating the military culture]
Soul Injury Propagation: Stoicism

“Showing indifference to joy, grief, pleasure, pain.”

(Weberst's Dictionary)

Grit AND Grace

Biggest Influence? Combat!!

WWII: Heroes
Korea: Ignored
Vietnam: Shamed

PTSD: Diagnostic Criteria (DSM-IV)

• Exposure to a traumatic event experienced with fear, horror, or helplessness. Helplessness $\rightarrow$ control + trigger

• Trauma is persistently re-experienced (1 or more):
  - Recollections
  - Dreams
  - Acting as if trauma is recurring
  - Distress at cues that symbolize the trauma
Avoidance of associated trauma (3 or more):
- Avoidance of thoughts, feelings, conversations r/t trauma
- Avoidance of activities, places, or people that arouse recollection
- Inability to recall some aspects of the trauma
- Lack of interest in significant activities
- Feelings of detachment/estrangement from others
- Restricted range of affect
- Sense of a foreshortened future

(2 or more):
- Increased symptoms of increased arousal
- Difficult sleep patterns
- Irritability or outbursts of anger
- Difficulty concentrating
- Hypervigilance
- Exaggerated startle response

Stressor factors increasing PTSD risk:
- Severity
- Duration
- Proximity (Role in war) (Marines/Army)

(Some resources say that the single most influential risk is having killed. This complicates EOL care.)
Witness trauma vs. CAUSE trauma
“Meet their Maker”

PTSD is a mental, emotional, social, spiritual, moral, familial, intergenerational injury. Healing requires interventions that address all dimensions of suffering.

Surveying the Damage

Combat Response Trajectories

3 Trajectories: Live Differently?
Trajectory #1:
Combat Trauma Successfully Integrated

"I've faced death before in the war. I'm not afraid of death any more."

"I must have been spared for a purpose." ("If I didn't do that, it means my buddies dies in vain")

"I faced death before and every day since has been a gift."

"But for the grace of God, it would have been me who died in that war. I'm aware of the gift of grace that is with me now."

Do these vets live life differently?

Wisdom
Increased his suffering capacity

Trajectory #3:
Combat Trauma NOT Integrated (PTSD)

Listen and provide witness to their stories:
"Most of my brother remained in Vietnam".

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

"I've been fighting that war every day since I returned. ("We've been fighting that war every day since;") PTSD is an inter-generational wound.

"90% of me died in that war."

"I lost my soul in Vietnam".

"If only I would have ______, he'd still be here today. If only.... If only.... If only....."

"Why him and not me????" (survival guilt)

Don't Push. Don't abandon.

Trajectory #3:
Combat Trauma NOT Integrated (PTSD)

Suspicion and lack of Trust
Alcohol usage common
Anxiety
Agitation (Acting out trauma) (like a conscious nightmare)
Estranged relationships
Unfulfilled longing for the life not lived (guilt)

"I looked in the eyes of the dead man, and I saw peace. I looked into the eyes of the living, and I saw fear."
Edward M. (Vietnam Vet)

Tip of the iceberg. Recognize the significance. Look for the story.
Pete: PTSD

Trajectory #2:
Combat Trauma APPARENTLY Integrated: (Subclinical PTSD)

Outward Landscape
"White Knuckle Syndrome": Mask fools others, themselves.
Hollowness, aloofness, workaholism, addictions.
Agitation at EOL r/t caught unaware.

Inward Landscape

Delayed-Onset PTSD
Suffering redeemed with service...
WOMEN are Veterans Too!

-20% Sexually Assaulted: especially difficult on a military base where they thought they were safe – betrayed by trusted comrades.

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

Interventions: All VETERANS

-Intake Assessment: “Have you served:
• in the military?” (not “Are you a Veteran”)
• in a Dangerous Duty assignment?”
  (not “Are you a combat vet?”) 
  If so, encourage story (not DATA).
  (“You probably saw a lot of ugly things…”)
• Veteran-veteran volunteers (TRAINED)
• Transport to Morgue/Funeral Home under Flag (affects all in the environment)

Interventions: All VETERANS

• Affirm the FEELING aspect of the death experience, especially the tears and fears (which the military culture taught them to disdain).
• Anticipate that they might UNDERREPORT physical and emotional pain.
• Anticipate they might UNDERREPORT fear.
Thank them for serving our country and giving you your freedom. (Fund: VFW, DAV, etc)
Post a certificate of appreciation.
Pint an American flag on them with a personal message.
Vietnam War beads.
Acknowledge sacrifices the family made.
Educate veterans about their ENTITLEMENT to hospice services paid for by the VA or provided by the VA. (DD214)

INTERVENTIONS: Combat Vets

("Burning Vision", Artist: Tommy Bills)

Interventions: Trajectory #1
(Successfully Integrated Trauma)
Interventions: Trajectory #3

Emotional Pain Scale
(0=Serenity/10=Turmoil)

Understand and accept their pain, anger, shame, fear, helplessness.

“Difficult” → Disconnect

Distinguish between PTSD and “Terminal Restlessness” or Delirium. Benzodiazepines may be helpful with the latter but may produce a paradoxical reaction with the former (Benzo increases helplessness acts as original trigger→ fight to regain control).

Enter metaphor with them. (Battle metaphors are common) Watch your words! (Blow up)

Put mattress on floor if enemy soldiers are under bed.

No restraints (especially POWs) or bed alarms (PTSD).

Don’t touch without calling out their name or letting them see you first.

Interventions should be geared toward helping the patient feel safe.

Be aware that Asian Ancestry in the healthcare provider may be a trigger for WWII (Pacific theatre), Korean, and Vietnam vets. Don’t take this personally.

If Vietnam or Korean vet speaks about how Americans treated them, apologize. If Vietnam vet speaks about never being welcomed home, welcome him.
HEALING

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)

HEALING

• Assess guilt. DON’T dismiss it with platitudes.
• What is needed is healing of the heart.
• Anchoring Heart Technique
• Forgiveness changes the relationship to our past

Forgiveness at the Wall

If this vet had come to you?
- Value of war memorials
- Gaping wound in our society → Opus Peace
It is not too late to Heal our Nation!
(and we do it one dying soldier at a time).

Let’s not allow the soldier dying in our midst be unknown any longer...

Let us BEHOLD and FEEL BEHOLDEN!
...And to Their Families...

Reflecting on a 35-year Career:
Lessons Learned
Trauma Morphs at the End of Life.
The avoidance used to evade triggers, the stoicism used to hide emotions, and the numbing behaviors used to disconnect from the part of self carrying the trauma – they ALL start to crumble in the last few months of life. Once they crumble, a deeper level of injury is often revealed – a soul injury.

There are thousands of hospice workers; there are thousands of PTSD counselors, but there are only a handful of professionals who have specialized in taking care of both dying AND traumatized people.

Soul Injury Film

Event Format
• Locally-assembled panel to provide commentary and answer audience questions
• 2 CEUs for Nurses, Social Workers, Clergy, Alcoholism and Drug Abuse Counselors, Addiction Professionals, Marriage & Family Therapy, Mental Health Counseling, Death Education and Counseling, Nursing Home Administrators, Psychologists

Materials include:
• Panel Discussion Manual
• Marketing & Strategizing Guidelines
• “Ask Me about Soul Injury” buttons
• Congressional “Soul Injury Awareness Month” National Proclamation
• Monthly Insight Activities

Cost: $25 for the on-demand webcast and $50 (plus $9 for shipping and handling) for the DVD.

To register:
• Go to https://hospicefoundation.org/HFA-Products/Soul-Injury
Stay in Touch!
Leave your business card with me (or write email address on paper)
www.OpusPeace.org
(Tools, Blogs)