

Global Scripture Impact

Veterans and the Church

Summary of the original Sector Report

Introduction

Since 2001, some 2.3 million Americans have served in Iraq and Afghanistan. U.S. Veterans now comprise more than 7 percent of the U.S. population. “There are going to be 1 million new Veterans in the next five years,” said Patrick Bellon, head of Veterans for Common Sense (Kristof, 2012)

U.S. military officials understand that the nation is going to need the Church’s help as these Veterans reintegrate into American society. However, many churches lack the understanding, materials and support they need to successfully serve those who have faithfully served their country.

The Church must overcome barriers and reach out in service to Veterans as the government’s services, such as Veteran’s Affairs (VA), face their own barriers to service – like the escalating numbers of Veterans in an already overwhelmed system.

Recent reports indicate the military recognizes the local church’s role in a Veteran’s successful re-entry. “Church leaders can provide the spiritual guidance and community support that medical professionals cannot,” said National Guard Chaplain Paul Minor at a Home Base Conference in Massachusetts.

All Veterans need community support. The need for Veterans to belong and have purpose is one of the best ways to satisfy mental, physical, emotional and other needs. Veterans have given up months and years in support of a cause only to find they are no longer needed on the battle lines. They need to reconnect and rebuild relationships and find and retain gainful and meaningful employment.

Members of the military and Veterans are created by God with God-given needs: physical and psychological health, a desire for meaningful and gainful employment, membership in a community and, more than anything, a Creator who knows, forgives and comforts them. The Christian Church has a unique opportunity to present God to Servicemen and women, as well as Veterans through the provision and exposition of his Word, services and community offered by his people. They need consistent encouragement to find help and hope through salvation in Jesus.

Situational Analysis

Statistics show:

- Veterans now comprise more than 7 percent of the U.S. population
- 78 percent of all Veterans are white, nearly 12 percent black, 6 percent Hispanic, 1 percent Asian and other ethnicities form the remaining 3 percent (National Center for Veterans Analysis and Statistics, 2012)

- The number of female Veterans is rising steadily and is expected to comprise almost 16 percent of the Veteran population in 2035 (National Center for Veterans Analysis and Statistics, 2010)
- 46 percent of Veterans live in the suburbs, 25 percent in urban areas, 21 percent in rural areas and 6 percent remain on base

Many military members have experienced events that few other church members can fully understand. They have seen casualties, death and horrific sights. While it is true that trauma can occur in any area of life, trauma due to war is different. While victims of war learn to cope with violence as normal, soldiers are actually trained to enact violence. While individuals living in war-torn areas are taught to take cover, be defensive and survive, troops are taught to be aggressive and take aim. Combat involvement can broadly impact military members on issues of self-identity, alienation, disillusionment with leaders, damage to religious and spiritual beliefs, and moral injury (Wood, 2012).

Veterans' Strengths

A great strength of Veterans is their ability to lead and serve under leadership. Another asset of Veterans is their understanding of service and self-sacrifice, and the meaning of discipline. Military members also value structure in their lives. Veterans understand loyalty, friendship and community. They know how to be dependent on others and what it is like to have others depend on them. Military members are required to cooperate with individuals very unlike themselves in terms of race, gender, religion, economic status, age, intelligence or physical condition.

Needs Analysis

While Veterans have numerous strengths, those attributes have come at a high price. Chuck Kluesner, an Army Veteran and co-founder of Mental Health Association in Atlantic County's Veterans Network, explains, "We must never forget that Veterans may have been asked to do things totally outside the realm of 'normal' human behavior, so they inevitably know the whole truth of what we are all capable of doing (both good and bad) as individuals, as a society and as human beings. We should recognize the common strengths of our military Veterans that are too often overlooked, but as a civilized society, we should be wary of the means by which it took to come to these ends" (Kluesner, 2011).

The challenging circumstances that military members endure and the hurdles individuals face upon retirement from the military produce a number of needs. Needs among the military are considered through the lens of the Comprehensive Soldier Fitness model and grouped into five areas of physical, mental, emotional, social and spiritual fitness.

Physical Fitness

The Global War on Terror has introduced more sophisticated forms of weaponry so troops are sustaining severe and unique wounds in combat. Improvised Explosive Devices (IEDs) are often the weapon of choice; they cause wounds, burns, amputations, traumatic brain injury (TBI), spinal cord injuries and blindness. Because of advancements in armor and medical care, more soldiers are surviving their wounds – the current survival rate is 90 percent (The American Legion, 2012). That reflects better treatment, but also produces a large number of vets living with wounds or disabilities. (Grabbe, 2008)

The VA reports that since 1986, there has been a 46 percent increase in the number of Veterans with a service-connected disability, from 2.3 million to 3.4 million. For soldiers serving in the Iraq and Afghanistan wars, TBI is one of the most common physical injuries. TBI is difficult to recognize, diagnose and treat. Severe TBI can leave a person almost incapacitated, but even mild TBI, also known as a concussion, can lead to disruptive symptoms including headaches, sleep problems and memory loss (PBS, 2011). The number of TBI sufferers is difficult to determine, but estimates range from 50,000 according to the Department of Defense to 115,000 according to the Pentagon.

Mental Fitness

Involvement in the military has proven to create great challenges for mental health. For young men, ages 17 to 24, being a Veteran almost quadruples the risk of suicide, according to a study in the American Journal of Public Health (Kristof, 2012). Almost a quarter of a million Iraq or Afghanistan Veterans have been diagnosed with mental health injuries (Wood D., Iraq, Afghanistan War Veterans Struggle with Combat Trauma, 2012). The effects of war trauma run longer and deeper than previously thought. Even when war trauma is diagnosed, it is still difficult to treat. When there is damage to the frontal lobe or to tissue deep within the brain due to TBI, patients will not recover fully – “not back to where they were before, ever, with that kind of injury” (Wood, 2012). “Our job is to help people find coping strategies, tolerate their limitations,” says Dr. James Kelly, a neurologist and director of the Defense Department’s National Intrepid Center for Excellence for traumatic brain injury and psychological health.

The most critical concern regarding war trauma and post-traumatic stress disorder (PTSD) is suicide. Brain injuries of the sort that are common in the Iraq and Afghanistan wars increase the risk of suicide by half (Kramer, 2011). The average rate of suicide among U.S. troops in 2012 was nearly one a day. In 2009, America lost more troops to suicide than were killed in Iraq and Afghanistan. The number is even more startling among Veterans. The national Veterans suicide crisis line operated by the VA receives an average of 17,000 calls a day. The VA staff believes the suicide rate is more than 500 per month (Wood D., Iraq, Afghanistan War Veterans Struggle with Combat Trauma, 2012). Data regarding Veterans’ deaths is scarce as the military does not track Veteran suicides by their branch of service or by the wars they fought.

Emotional Fitness

Veterans often return to the environment that looks similar to the one they knew before they served, but find that they have changed. Some key emotional challenges for Veterans include anger and irritability, hopelessness, isolation, guilt or shame, or anxiety. When Veterans are depressed much of the time, they have trouble eating or sleeping, neglect their personal hygiene or health, feel anxious, withdrawn or experience frequent and dramatic mood changes – all of which may be signs of emotional challenges that need to be addressed. Veterans may feel anger

over a traumatic event, injury, the loss of a friend from their unit, or transitioning from service. Some Veterans suffer from survivor's guilt – feeling responsible for surviving when others did not.

Social Fitness

Critical to Veterans' health is their social fitness, their relationships to their families and the surrounding culture through employment and service. Combat can have traumatic effects that hinder Veterans from forming and maintaining close, trusting relationships. (Challenge America, 2012). Veterans with combat experience have marriages that are 62 percent more likely to fail than those of civilians (Iraq and Afghanistan Veterans of America, 2012).

After family, job availability is a critical concern for returning troops. More than 220,000 Veterans of Iraq and Afghanistan are out of work. In 2011, the rate of unemployment for Veterans was 12.1 percent, but 9 percent for civilians. While the rate of employment is improving for civilians, it is declining for Veterans. Employment is a huge problem for America's youngest Veterans. In 2010, Veterans aged 18 to 24 had a jobless rate of 30.4 percent – drastically up from 18.4 percent the prior year. That same period, the civilian rate improved from 16.9 percent to 15.3 percent.

Unemployment is associated with a two- to three-fold increased relative risk of suicide, compared with those employed (T.A. Blakely, 2003). While the workplace may be stressful, it offers troops structure, support and help in finding meaning in everyday life.

The increase of young people entering the military and not staying for a full 20-year career makes the transition to civilian employability more difficult, causing high unemployment, especially among young Veterans. Many younger, non-commissioned Veterans have only completed high school and the job market is harshest on those with less education. Many Veterans come from and return to rural locations where there are fewer job opportunities. Further, those who are out of work the longest are the least likely to be hired. And in the eyes of many employers, military members have been out of the job market for their entire service time (Beucke, 2011).

Some Veterans face immense social needs as they struggle with homelessness, chemical dependency or criminal justice violations. There are currently 68,000 homeless Veterans in the United States, nearly a quarter of whom have been homeless for a year or more and suffer from at least one chronic and costly-to-treat health condition (Hagerty, 2012). The number of female homeless Veterans is on the rise. About 8 percent of Veterans who are sheltered or identified as homeless are female (Israel, 2012).

Spiritual Fitness

Rarely does war leave someone's faith untouched. Some military members experience a great strengthening in their faith during their years of service. Hardship can deepen one's walk with God. In other cases, troops who once claimed to have faith in God come to have more doubts and questions as a result of their service.

“A lot of guys come back angry with God – how could the God we understood and were raised to believe in let this war stuff go on?” asked Rick Weidman, a combat medic with the Americal Division in Vietnam, who still struggles with PTSD. “We witnessed and participated in so much horror that was in such violence with the value structure in which we were raised. It’s a miracle people come back as together as they are. The whole concept of spiritual or moral pain goes beyond traditional psychotherapy” (Wood, 2012).

In a 2004 study of approximately 1,400 Vietnam Veterans, almost 90 percent Christian, researchers at Yale found that nearly one third said the war had shaken their faith in God and that their religion no longer comforted them.

The church needs to be able to help people deal with the things they have seen and experienced in combat so they can regain their moral fiber and understand that even though they are responsible for the death of other human beings, God still loves them and has a plan for their lives.

Barriers to Service

The needs of Veterans are numerous and the number of Veterans from the current war efforts is growing daily. The government recognizes the need for the Church to help Veterans in their reintegration. However, churches face a number of barriers to service for Veterans and their families.

Inactivity

Many churches assume that there are no military Veterans in their congregation or community. Or church members and leaders assume that there is little the church can do to serve or encourage Veterans. While victims of war are seen as such, the local church often views soldiers as self-reliant heroes who have been trained to take care of themselves. Thus, many churches do not view serving Veterans as a critical ministry.

Lack of Training

The biggest issue with churches is a lack of training or equipping for ministry to Veterans. Church members often ask how to care for Veterans, what to do about PTSD and complain that psychological materials are indecipherable.

Of the 2012 Iraq and Afghanistan Veterans respondents surveyed, two-thirds said they think neither troops nor Veterans are getting the mental healthcare they need. Most Veterans face challenges that can be handled by the local church. “The real problems we military members deal with are those every church deals with. We need help putting our marriages back together again. We need help parenting again, finding a job, and going back to school. And we need to reconnect with God” (Huyser-Honig, Church Military Support that Any Congregation Can Do, 2008).

Location

The reality is that Veterans are spread thinly across the country. “The hard part about the community effort is that if you take the total number of Iraq and Afghanistan war vets and divide them amongst the 3,000-plus counties in the country, you’re talking maybe a handful per county” (Glassman, 2012).

Transiency

The transient nature of military personnel often creates a negative perception of the military to civilian church members. Many church members dislike the idea of constant challenges and changes to relationships and church life. Leadership must adopt a positive attitude toward the constant change and shift within the church community.

Politics

Churches often fear that politics and church will become entwined. According to a May 2012 poll, 66 percent of Americans oppose the war efforts in Afghanistan (Gearan, 2012). This negative association with war, combined with many pastors' desire to separate church from politics, discourages many pastors and churches from appropriately serving Veterans and their families. Bill Graham, a rector at St. Mary's Holly-Rushville Episcopal Church in Nebraska, says that churches should offer full support for the military despite differences of opinion regarding the war itself. He said that Jesus's ministry to the Centurion and other soldiers is an example of loving individuals even when opinions could differ on combat or war itself.

Veterans Affairs

Escalating Numbers

The VA is already struggling to serve the current Veterans population, but will be dealing with 1 million new Veterans over the next five years (Kristof, 2012). As of July 2012, the U.S. Department of Veterans Affairs reported 3.47 million Veterans receiving disability compensation. New claims are up 48 percent over the last four years as a flood of Iraq and Afghanistan Veterans return home and file disability claims seeking compensation for wounds suffered in service.

Lack of Information

In 2009, only 8.4 million of the 23.4 million Veterans received VA benefits and services. Of those 8.4 million, 32 percent received service from more than one VA program. Only 26 percent of Veterans had enrolled in VA healthcare and only 28 percent had used VA healthcare. Only 21 percent had applied for Veterans disability and only 8 percent were covered by VA life insurance. The main reason Veterans cited for not applying for most of these services was a lack of knowledge (National Center for Veterans Analysis and Statistics, 2010).

In a 2011 survey of Veterans and their families, only 60 percent of Veterans serving after 2001 understood their available VA benefits (National Center for Veterans Analysis and Statistics, 2012).

Physical Access

Many of the most advanced VA services are available in urban settings, which are difficult for rural residents to access. The American Legion expressed concern for amputees from rural areas seeking access to services. It is a grave disservice to these Veterans if they have to bear the

burden of travelling long distances to receive healthcare, in addition to enduring their debilitating conditions (The American Legion, 2012).

Staffing and Funding Shortages

The federal expenditures for Veterans are steadily rising. In the year 2000, there were more than 26 million Veterans and the United States spent approximately \$45 billion Veteran services. In 2009, there were fewer than 23 million Veterans, but the U.S. spent nearly \$100 billion on similar services.

Some facilities that treat veterans with multiple traumas reported staffing shortages in certain specialty areas. The shortage was attributed to the competitive salaries being offered for these positions in the private sector (The American Legion, 2012). This shortage is a critical need, because studies show that where staffing levels improve, suicide rates decrease (Kramer, 2011).

Bureaucracy

The official procedures for accessing Veteran services form barriers to many people who need immediate care. There are currently 870,000 Veterans nationwide awaiting a decision on a disability claim from the VA (Glantz, 2012).

Stigma

Stigma regarding psychological illness or any type of weakness provides a serious barrier to Veterans services working effectively. On the whole, the warrior culture does not embrace psychological injury. This often results in prolonged personal suffering, high divorce rates and suicide (Rudd, 2012).

Chaplains

Limited Staffing

There are approximately 900 Veteran chaplains in the United States, according to the 2012 National Chaplain directory. That averages one chaplain for every 25,000 Veterans.

Limited Access

Chaplains are limited in their exposure and time with Veterans. Most chaplains only have access to Veterans who are enrolled in a VA healthcare program or spend time in a VA hospital. Chaplains to the active duty military on base chapels actually have a great bit of exposure to Veterans. Many Veterans never find a church, choosing instead to attend the base chapel. But there are limits on what services the base chapel can provide for Veterans, since it does not have broader community and ministries like a church.

Conclusion

Military officials in the United States understand that the nation is going to need the Church's help as the many Veterans reintegrate into American society. It is important for the Church to overcome barriers and reach out in service to Veterans. The Christian Church has a unique opportunity to present God to Veterans through the provision and exposition of his Word, services and community offered by his people, and a consistent encouragement to find help and hope through salvation in Jesus.

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