

Veterans' Families United Foundation

Resources for
Friends & Families
of Veterans



The REST House
(Readjustment Environment and Service Transition)

**A Veterans' Families United Foundation
Service Project Proposal
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Submitted By:

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The REST House
(Readjustment Environment and Service Transition)
VFU Service Project Proposal

Introduction

For three years, my son has spent most of his life hidden in the darkness of a corner bedroom in our home. He came out of his room for doctor appointments, food and sometimes, to go out with friends but only when it is dark outside.

It took a commanding Army officer to go to the house Joe purchased with money he saved from his year-long duty in Iraq, to get him to begin seeking the help he needed. Unbeknownst to us, Joe was so deeply depressed that he had become immobilized and bedridden. He would crawl to the bathroom, where he would lay on the floor, listening to the water run to calm the static and memories he could not keep from invading his every thought. He was only 21.

Since that time, our journey and Joe's willingness to share it, has yielded Veterans' Families United Foundation (VFU), a non-profit organization whose vision it is to empower Veterans and their families in the healing process. Since that time, our family and others, have come to understand at the deepest level the impact of war when the serviceman returns home. Parades, songs, and flags bring precious little comfort when the celebration of return has worn off and the disjointed memories and fragmented lives of our service men and women attempt to rebuild without a foundation of healing.

The REST House (Readjustment Environment and Service Transition) is a project designed to lay a strong foundation and serve as a model for transition from the traumatic experience of war and readjustment assistance for those who have paid the highest price and to their families that love them.

“Come to me, all you who are weary and burdened, and I will give you rest. Take my yoke upon you and learn from me, for I am gentle and humble in heart, and you will find rest for your souls.” Matthew 11:28-29

In hope and gratitude,
Cynde Collins-Clark, LPC, NCC
Executive Director, Veterans' Families United Foundation
2006 Oklahoma Mother of the Year
Joe's Proud mom

The REST House Proposal

Purpose

Since the end of the Vietnam War, it is estimated that the number of suicides by the veterans AND their children now exceeds those who were killed in action. This number also does not include the wives, children, mothers and fathers of those who were left behind and who witnessed the devastating effect of “the war brought home” to their loved ones.

To date, nearly two million servicemen and women have been deployed for active duty in Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF). Current statistics indicate that anywhere from 30 to 49 percent are returning with significant mental health issues. Since 2001 there has been speculation that the terrorist fighting tactics, traumatic brain injury, mandated inoculations for malaria and anthrax, effects from exposure to depleted uranium, an unprepared/under-equipped military, are the culprits of the skyrocketing level of mental health and behavioral problems. Whatever the cause, the result is the same.

For every serviceman that returns with problems, there are a minimum of two significant family members who are directly affected. Emotional, financial, legal and relationship deterioration are but a few of the challenges that can domino into positions of hopelessness for all involved.

The REST House (Readjustment Environment and Service Transition) is designed as a test/model that operates on the premise that PREVENTION and INTERVENTION for service members who present with Post Traumatic Stress Disorder (PTSD) and other related mental health problems after they return from active duty, is more honoring, hope filled and ultimately more cost effective than a lifetime of disability.

The REST House Location

It seems fitting that the pilot for the REST House be located in Oklahoma City, the crossroads of America. Over the past decade, OKC has experienced the Murrah Federal Building bombing, a devastating F5 tornado and by January, 2008, over 3000 of our National Guard will be deployed. All of this we endure with courage, strength and faith exemplified in the recent Gallup Poll that listed us in the top ten cities for volunteerism. We have a major medical school, a VA regional hospital, 3 outstanding universities, and a progressive city government that believes in building a better tomorrow as is evidenced by our MAPS and MAPS for Kids successes. The capacity for innovation, creativity and resourcefulness in this great city and state are unmatched.

The REST House Structure

Shelter

Meals and Nutritional Guidance

Case Management

Treatment and Readjustment Training

Medical and Dental Care

Transition Life Plan

Spiritual Guidance/12 Step Programs and Pastoral Counseling

Recreation

Family Support and Reintegration

Research, Documentation and Publication

Evaluation

Shelter

Homogeneous grouping of a maximum of ten males in a home-like environment is proposed, with an option for a second REST house for a maximum of 10 females. The only requirement for acceptance is an Assessment of Need, availability of space, and the willingness of the REST House client to follow a protocol of behavior and expectations for wellness. A predicted average stay is 6 months.

Meals and Nutritional Guidance

Balanced nutritional meals will be served “home style”. Planning will be contracted to a Licensed Dietitian who will also serve provide applied training/nutritional education to clients.

One phase of wellness transition for clients will include them in the planning, preparation and cleaning of the meal service.

Case Management

A Lead Case Manager will be hired and a minimum of two interns at the masters or doctoral level in appropriate fields will be placed under his/her supervision. This team, in partnership with a Treatment Coordinator, will develop a detailed treatment plan for each client. The Treatment Coordinator will assure interface occurs between all the individuals participating in a client’s process.

Case Management includes individual plans for the use of treatment modalities along with:

- Family Transition
- Financial Counseling and Planning
- VA Benefit Procurement (including educational and rehabilitation services)
- Implementation of VA Benefits
- Successful Transition to Civilian Life Plan

Whenever children are involved, appropriate pediatric therapies will be recommended, referred or provided. Therapists with pediatric skills will be contracted to serve the children whenever possible. The children's needs will be incorporated into all family planning and family activities.

Treatment and Readjustment Training

This will include a broad spectrum of non-invasive healing modalities suited to the diverse needs of veterans and their families. These modalities will include but not be restricted to: manual physical therapy, energy medicine/energy psychology, massage, yoga, cognitive-behavioral therapy, guided imagery, eye movement desensitization reprocessing (EMDR), psychodrama, art therapy and other mind-body approaches that have been proven beneficial in serving survivors of overwhelming experience.

Medical and Dental Care – Designated staff will assist and accompany clients to maximize their VA medical and dental benefits.

Transition Life Plan – Staff members will construct and follow-through on a Transition Plan for each client, including obtaining VA educational and vocational rehabilitation training, VA disability benefit procurement whenever applicable. This will include financial planning for independent living, transportation planning and family life planning.

Spiritual Guidance/12 Step Program and Pastoral Counseling – All clients will participate in the 12-step program and be assigned a Veteran Mentor/Sponsor to assist them through the steps. Clients will attend meetings at the REST House and then transition into meeting attendance in the community.

Recreation – Teaching balanced living is the goal of The REST house. This includes an exercise and recreation component incorporating family members and group gatherings.

Family Support and Reintegration - Relationship communications may include the Oklahoma Marriage Initiative (OMI) PREP materials that have been developed and researched extensively at the University of Denver Center for Family Studies.

A “**Family House**” will be annexed to The REST House. This smaller facility will serve as the environment for education and individual and group therapeutic intervention for spouses and children of veterans. It will also serve as a comfortable “reintegration” setting for family members.

Evaluation, Documentation and Publication – The evaluation process will be a significant component of this innovative program. Statistics will be carefully maintained on number of residents, who completes each program phase and when, exit interview results and follow-up (all residents will be followed for a minimum of five years).

Statistics will also be maintained for the after-care process, noting successes, drop out rates, and progress of each client. Residents and family members will provide detailed evaluation of all program components. This feedback will be reviewed regularly by the staff at their weekly meetings. Needed changes will be implemented and tracked. Cost analysis will be developed and updated consistently.

Evaluation from staff will also be collected and reviewed with regularity. Comparisons of residents, family members and staff evaluations will be done on a consistent basis and this data will be prepared for the development of The REST House services and also for publication.

The REST House Program Phases

Phase One – Assessment and initial treatment plan. Our intention is to allow the client to receive services with minimal stress, but reasonable expectations of cleanliness, grooming, participation in community life and the maintenance of the REST House facilities and grounds are required. The client also begins to apply for VA services and benefits.

Phase Two – The client has maintained commitment to expectations of The Rest House, including attendance, participation, healthcare, shared responsibilities, and development. At this juncture, the client is ready to take graduated steps toward independence. A specific transition to independent living is developed and in place. VA services/benefits are being received. Education, support and integration of family members becomes a vital component of this phase.

Phase Three – The client has completed transition to specific independent living plan and develops a plan for aftercare. Transportation, education, job and family support are in place. Client has a veterans' mentor and a community safety net.

After Care – The client will have a specific plan that includes regular contact with The REST House staff to support the transition and follow up with needed services.

Duration of Project

Requested Project operating budget:	A Proposed Annual Budget follows, but the request for this project is THREE Years from date of first client admission, then review for possible continued funding.
Length of Study:	All Clients and their families will be followed for five years after leaving the REST House. The research component would require continued funding.
Purpose:	To prepare and collect data for feasibility of future efforts.

Summary

The REST House will allow a unique opportunity for the private sector to support Servicemen and women returning from active duty with readjustment and transition options. It is the belief of Veterans' Families United, that this type of facility can be an "incubator" for other such entities and serve as a new model for prevention and intervention of war related trauma and the impact on the individual, family and community.

If ten Veterans spend one year at The Rest House at a cost of a half a million dollars (not including property), but were better able to readjust and transition back into civilian life, the return on the investment could include, but not be limited to, the following:

- Reductions in VA disability allocations as the Veteran heals
- Reductions in medical needs for both the Veteran and family related to and exacerbated by the stress of PTSD
- Successful workplace employment
- Enhanced quality of life for the spouse and particularly the children of the Veteran
- Potential reduction of abuse of substances
- Decreased incidents of domestic violence for military families. "The rates of domestic violence within military families are consistently higher than rates of domestic violence in civilian life. The Department of Defense reports twenty-five cases of domestic violence for every 1,000 military families and there are many reasons to suspect this figure is low. In 2000, over 12,000 cases of spousal abuse were reported to the military's Family Advocacy Program. Eight women died that year, killed by their military husbands." (Stephanie Mines, Ph.D., writing in the Encyclopedia of Domestic Violence, published in 2007 by Purdue University.)
- Decreased intergenerational trauma repetition.
- Decreased exposure to abuse, witnessing domestic violence, experiences of abandonment and loss for children of military families.

Long-term studies could provide important data that is currently not being measured and could potentially change the way we receive our Veterans back from war and into society.

The legacy of war, untreated, continues to perpetuate dis-ease in our homes, our communities and our country. Untreated trauma is pervasive and debilitating. Data from previous wars is only one small indicator of the devastating impact. The development and implementation of The REST House can provide research that may propel us into a deeper understanding of the true cost of war and help create accessible, gentle and unbiased options for healing to our wounded warriors and their families.

