

Breaking Barriers

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On a Journey toward Wholeness

by a former RCA pastor living with PTSD*

My Vietnam War experience was something I spent 40 years trying to forget. Since returning from Vietnam, I experienced mental and emotional issues but did not recognize them as problems that needed to be dealt with. However, the older I got the more pressing were the nightmares, flashbacks, sleepless nights, and struggles to maintain a normal, productive life. When I would reach a breaking point and submerge myself in destructive behavior, I felt I was just a weak person.

A few years after my return, I had felt a strong call to the ministry and thought becoming a pastor would give me strength to overcome those failings, assuming that surely God would provide what was needed to do his work. With God's guidance, I worked extremely hard at being God's servant to his people, the church, and the communities where I served.

As a Vietnam veteran, I did not talk about my war experiences until, as we say in our support group, I "crashed and burned." I had been an RCA minister for 18 years when I was forced to leave my pastoral position

because of inappropriate behavior. That was a most devastating experience for me, my family, and all involved.

My wife and I now attend another RCA church family that has received us with love and understanding. At first I could hardly step foot inside of a church due to the experience and my feelings of shame. When we found our current church family, we knew this was the place and the people God had prepared for our healing. It is not a congregation that has a program for veterans, but its people provide the care and compassion that brings healing.

I also am grateful for weekly group therapy, every-other-week individual counseling, a visit with a psychiatrist every 6-8 weeks, and medications—all through the Veterans Affairs hospital nearby. In our hospital alone, there are 16 support groups for individuals with PTSD, and a large percentage of these individuals are Vietnam veterans. For many in my group of 12, coping mechanisms no longer worked as they neared the age of retirement, causing them to lose jobs, marriages, and other relationships. Because alcoholism, drug addiction, and inappropriate sexual behavior are some typical coping mechanisms, PTSD tends to be a very private issue.

Today I give thanks to God for hearing our cry, and for the ways that his sons and daughters, our church family, are helping us to become whole again.

*Name withheld by request.

Themes

Fall 2013—Disabled veterans. This issue explores ways churches welcome, minister to, and engage the gifts of disabled veterans. More information and resources can be found online (www.rca.org/disability and www.crcna.org/disability).

Winter 2014—Mental health. How has your church welcomed, supported, or engaged people who live with issues of mental health or mental illness? Submit your story (up to 400 words) by November 22.

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Equipped for Ministry to Veterans

by Mark Stephenson

CRC Disability Concerns

Military personnel, veterans, and their families face challenges, including relationship stress, reentering civilian life, spiritual struggles, recovering from injuries including amputations and traumatic brain injury, and healing from post-traumatic stress disorder (PTSD). For some veterans, wounds linger for years, even decades, after discharge. With their emphasis on relationships—with God and other people—churches could bring healing and restoration if they were equipped to do so.

Working primarily through churches, the Michigan Veterans Task Force (VTF), founded and led by Captain

Gary Beelen, provides care and support to returning veterans, including help dealing with the spiritual impacts of war and violence. Beelen explained, “By identifying the six dimensions of health, we can have a great impact on the reintegration of a veteran’s total wellness.” These dimensions include physical, psychological, emotional, social, family, and spiritual health.

Beelen, a former Christian Reformed Church member who is working on a seminary degree for military chaplaincy, started VTF two years ago as an internship and formed a non-profit organization in Michigan. VTF is the only “Partners in Care” program started by the U.S. National Guard in 2012 and provides ministry support to more than 200 churches in Michigan, northern Indiana, and northern Ohio.

Churches have many options to engage in what Beelen calls “warrior ministry,” and VTF provides resources to support them in their work. Chaplains and others will go to churches to train members in ways to do warrior ministry that ranges from simple acts of kindness to military families who have a parent, spouse, or child who is deployed, to running support groups for PTSD or brain injury recovery. Churches are encouraged to provide care from within the church and to refer veterans to resources that are outside the church.

Many military personnel and veterans deal with “moral injury,” struggling to reconcile the actions they took when deployed with their Christian ethics. When church

volunteers receive proper training, they can provide assistance with people who need healing from moral injuries.

VTF has a partnership with Camp Liberty located in southeast lower Michigan, where churches can refer couples and families for enrichment weekends and outdoor events. Counselors, medical personnel, and chaplains are available as needed to assist participants at these events.

VTF works as a mediator with the military services to help coordinate training in churches and care for veterans and their families. The VTF website (www.mivettaskforce.com) outlines a four-step process for churches interested in doing warrior ministry.

“I believe that if we work together we will make more of an impact in spiritual care and also we can work in coordination of direct support with the military now serving,” Beelen says.

Idaho Church Offers Lifeline

by Patricia Glenn

RCA regional disability advocate

As a volunteer caseworker at a homeless veteran facility in Idaho, I witness on a daily basis the plight of homeless veterans.

Often these veterans experience post-traumatic stress disorder. Because they may act out as afraid, and because I notice that noise and dogs often are a trigger, we provide quiet rooms and I move any dogs away from our area. One of my frequent duties is to quickly rustle up hot food for a veteran who has not eaten for a few days.

A church nearby, Real Life Ministries in Post Falls, hosts a ministry that provides everything that the veterans who come to our facility might need, including food, clothing, personal items, transportation, money, and love. In August the church collects back-to-school supplies, including backpacks, for the veterans' children. This is a tremendous community outreach. The church hosts a meeting for veterans each Sunday morning.

According to Real Life's Veterans Ministry brochure: "The reality of war is that everyone gets wounded. Some wounds heal rapidly, but some last for a lifetime...Whether for the veteran who has lived in the lonely isolation of combat memories for decades, or young warriors just returning from their first horrors of combat, the power of God, the power of God's written Word, and the community of God's people around our church can become powerful resources in the veteran's healing process. This healing can certainly extend to the veteran's family and many others impacted by the veteran's mental wounds of war."

One veteran, Roy, told me that if it weren't for this church's ministry, his resource for food, clothing, and shelter would

be to commit a crime—and likely go to jail, where at least these resources would be available.

Letter More than ‘Concern,’ Please

Thank you for your publication’s interest in disabled veterans. I hope what you do will generate something besides “concern” in the church regarding disabled veterans.

In 1978 I wrote an article for the Church Herald that addressed some of the spiritual and emotional consequences of combat, trying to sensitize our churches regarding the needs of veterans in spite of a very unpopular war. Hardly anybody in those days was talking about post-traumatic stress disorder (PTSD), which has become something of a “household diagnosis” today.

Most veterans’ disabilities are not visible, but are more often spiritual and emotional. This view was reinforced through my ten years of service as staff chaplain at a Veterans Affairs hospital and then with my continued activity in the Vietnam Veterans of America.

With repeated deployment of some Reserve and National Guard units, as well as “regulars,” the casualty/disability toll mounts by the day. The last estimate I heard is that there are approximately 22 combat-related suicides per day, more than actual combat-zone deaths. Veterans

make up 7 percent of our population but they comprise 20 percent of all suicides.

With less than 1 percent of our population currently serving, Americans are quite insulated from the military and the consequences of combat—and veterans are often “hidden” in our churches. I’m told that approximately 75 percent of returning combat veterans suffer with enough damage to their conscience to seek help from some religious body.

Donald Jansen, retired RCA chaplain, Holland, MI

A Challenging Transition

by Emily Enders Odom*

Men and women in today’s military are returning home carrying painful memories of their experiences in the wars in Iraq and Afghanistan. A significant number are suffering from post-traumatic stress disorder (PTSD).

“When you’re in a combat situation, the alarm bells are always going off and the fight-flight-freeze response is in overdrive,” says Laura Atwood, a clinical case manager at the Robley Rex Veterans Affairs Medical Center in Louisville, Kentucky. “Then you get back home and the problem is your nervous system hasn’t calmed down yet. The alarms are still going off, but there’s no fire.”

Atwood explains that post-traumatic stress is “a normal response to abnormal events and only becomes an issue

or disorder if, after a period of time, with or without treatment, the symptoms or ways of coping become inappropriate in a soldier's current context."

"Every veteran will have post-traumatic stress," says Kevin Wainwright, a U.S. Army chaplain stationed at Fort Wainwright in Alaska, "but not everybody will have post-traumatic stress disorder."

The recent drawdown of U.S. forces, Wainwright says, means that a lot of soldiers are exiting all branches of the military and are returning home to their local communities, seeking not only work but also a sense of meaning and belonging.

"In the military, these men and women had a purpose and a mission; they had camaraderie. Now they're coming into a civilian environment that is different: less regimented, less predictable, and where they have more autonomy. And they might be looking for help at churches."

*Excerpt reprinted with permission from September 2013 Presbyterians Today magazine (www.presbyterianmission.org/ministries/today/The-wounds-of-war-0913/ or pcusa.org/today)

Editor's Note

Times Are Changing

I don't know how military personnel were treated in Canada in the 1960s and early '70s, but in the U.S. they were often treated shamefully. For example, those flying home from their tour of duty in Germany or Vietnam were

told to change into civilian clothes before boarding the plane. If they walked into a U.S. airport wearing their military uniforms, they risked being shouted at, cursed, even spat upon.

It wasn't just baby boomers with long hair and sandals who mistreated veterans. Older generations joined the chorus sometimes, though in a different way. When Disability Concerns sent a request to churches concerning ministries to veterans, I received this comment (published here by permission):

Reading about this ministry kind of caught me off guard. My dad was a disabled veteran. He passed away in 1975. An elder from our church came and talked to my folks that he thought that it was wrong for my dad to get VA [Veterans Affairs] benefits. My brother talks about how he was teased at the Christian school because of my dad's disability and VA support. My mom talks about the jealousy of some of the women. It is good to see how times and the church are changing. The disabled veteran does need encouragement, respect, and support.

I think we are doing better today than when we cursed military personnel as war-mongers or condemned them for receiving veterans' benefits. But healthy ministry means more than not doing bad stuff; it means doing good stuff too. We had hoped this issue could tell stories of churches engaged in ministry with disabled veterans, but our requests for information about Christian Reformed and Reformed churches that engage in any sort of ministry

with veterans did not yield results. We aren't sure what to make of this silence.

I hope that your church will consider ministry with veterans as a significant way to serve men, women, and families who gave so much for their country.

—Mark Stephenson

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