The mission of AIS is to improve the health of the community and the world by setting the standard of excellence of stress management in education, research, clinical care and the workplace. Diverse and inclusive, The American Institute of Stress educates medical practitioners, scientists, health care professionals and the public; conducts research; and provides information, training and techniques to prevent human illness related to stress.

AIS provides a diverse and inclusive environment that fosters intellectual discovery, creates and transmits innovative knowledge, improves human health, and provides leadership to the world on stress related topics.
Your source for science-based stress management information

COMBAT STRESS

We value opinions of our readers.

Please feel free to contact us with any comments, suggestions or inquiries.

Email: editor@stress.org

Editor In Chief
Daniel L. Kirsch, PhD, DAAPM, FAIS
AIS President

Associate Editor
Christiane C. O’Hara, Ph.D., FAIS

Editor
Kathy Platoni, PsyD, DAAPM, FAIS
COL (RET), US Army

Creative Director
Krissa Brewer

Combat Stress is a quarterly newsletter published in February, May, August and November with news and advertising designed with Service Members, Veterans and their families in mind. It appeals to all those interested in the myriad and complex interrelationships between combat stress because technical jargon is avoided and it is easy to understand. Combat Stress is archived online at stress.org. Information in this publication is carefully compiled to ensure accuracy.

Copyright © 2017 the American Institute of Stress (AIS). All rights reserved. All materials on AIS’ website and in AIS’ newsletters are the property of AIS and may not be copied, reproduced, sold, or distributed without permission. For permission, contact editor@stress.org. Liberal use of AIS fact sheets and news releases is allowable with attribution. Please use the following: “Reproduced from the American Institute of Stress website [or magazine], © AIS [year].”

AIS Combat Stress Board

Chaired by Colonel Platoni, the role of this board is to develop initiatives and communications to serve the stress management needs of Service Members and Veterans.

Kathy Platoni, PsyD, DAAPM, FAIS
Clinical Psychologist
COL (RET), US Army
COL/Ohio Military Reserve
4th Civil Support and Sustainment Brigade

COL Richard P. Petri, Jr., MD, FAIS
Chief, Interdisciplinary Pain Management Center Director, The Center for Integrative Medicine
William Beaumont Army Medical Center, El Paso, Texas

Stephen Barchet, MD, FACOG, CPE, FACP, FAIS
Rear Admiral/MC/US Navy Retired

Melanie Berry, MS, BCB, OMC, FAIS

Raymond Scurfield, DSW, LCSW, FAIS

Christiane C. O’Hara, Ph.D., FAIS

Daniel L. Kirsch, PhD, DAAPM, FAIS

Cover photo credit: Dana Hill Brennan, Operation Purple National Military Family Association Retreat, 2017
Introduction to Military and Veteran Retreats: Part 2

Christiane O’Hara PhD, FAIS
Issue Editor

Welcome to the second of our 2-part series on Military and Veteran Retreats, a topic previously unaddressed in publications as a body of evidence-based interventions. Prior to our Spring 2017 issue of Combat Stress, the entirely of which contains Part 1 of this series, there appear to have been no articles on Veteran Retreats published in any Military and Veteran-related journals, only one in any peer-reviewed journal (Journal of Couple and Relationship Therapy, Monk, Ogolsky, & Bruner, 2016), and only one other article in Combat Stress (Bruner, 2014).

Considering that retreats have been offered to Veterans for well over two decades, this is a serious omission in the literature, which we invite others to fill with us going forward.

As we began in Part 1, this issue continues to present descriptions of several retreat models, including research studies undertaken within these models. We also present an overview (O’Hara and Vicars) of recreational versus healing retreats, including a guide for Veterans to find the “best match” for their needs and a list of indicators for best practices.

The body of research presented in these two issues supports the power of these brief, immersive, integrative retreats in which Veteran and clinician leaders create safe, sacred spaces for Service Members and Veterans to reconnect, heal, bond, and move forward in reclaiming their places in our communities. In some of these models, primary support persons and families attend as well, allowing for connections between partners, within family units, and among partners, children, and families.

These retreat models have emerged in parallel, some for over the past two decades. Military and Veteran Chaplains recognized the need for couples to reconnect over twenty years ago, responding with Strong Bonds Retreats that have been offered to more than 13,000 couples. Since then, civilian leaders impacted personally by international wars (Healing of Memories) and clinicians serving combat Veterans and Veterans of military sexual assault have identified the benefits of immersive safe spaces within small communities to begin or continue the path to healing from trauma-related military service.

These retreats serve as both an alternative and complement to Service Members and Veterans already involved in “traditional” treatment for military-related issues, and an initial step by others whom may have dropped out of treatment or never sought help after their military service. Some models serve Veterans from any era, reinforcing the intergenerational connections among Veterans (e.g. National Veterans Wellness and Healing Center/Angel Fire; Bridging the Gap Intensive Integrative Retreats,
both described in Part 1; and Healing of Memories, in this issue), while others serve specific populations, including post 9/11 Veterans (e.g., Gratitude-America) or women Veterans (Women Veteran Social Justice Network-WVSJ retreats, some Healing of Memories retreats), described in this issue. Retreat models also differ in participants: some are designed for Veterans only (e.g., Walking with St. Francis, described in this issue). Others include Veteran partners (Veterans plus spouse/partner/support person/buddy), and fewer include families (e.g., Gratitude-America, WVSJ). The rationale, selection process, staffing, program content, and outcomes are described within each model included in our 2 issue series.

As we noted in Part 1, several key programmatic elements and themes are shared among all models, despite their having been developed with minimal or no contact among retreat directors and staff members. All programs presented here:

- recognize the need for clinical staff trained in military issues, and/or incorporate Veterans trained in the model into staffing
- screen applicants and hold the size to manage large, small, and individual/couple/family groups and needs
- select retreat sites that enhance a quieting response and that can establish safe and nurturing spaces
- incorporate metaphor and ritual in processing history, trauma, relationships, and military experiences (often through the expressive arts, storytelling, and warrior rituals)
- acknowledge the impact of spiritual and moral injuries upon Veterans and their communities and the magnitude of losses that war (and military sexual trauma, for those suffering from this additional loss) imposes
- include sessions that introduce participants to a variety of healing interventions, including quieting responses (breathing, meditation, yoga, etc.), education about brain/body/mind/heart wounds that affect warriors during and after military service and healing of these wounds; skill building in self-awareness, behavioral patterns, and communication; equine therapy; expressive arts; etc
- rapidly build small communities, emphasizing that “that you are not alone”
- offer follow up: referrals, resources, and continuing opportunities for participants to remain connected within their retreat community groups
- offer retreats at low or no cost

Equally as remarkable is the fact that most of these retreats operate as non-profits: working with small budgets, many volunteers, and financed for the most part through private donations and small grants from various foundations. These limited resources compromise their capacity to conduct extensive quantitative and qualitative research within and across models. Such data is imperative for demonstration of their efficacy to the Department of Defense and Veterans Administration to sign on for research and program expansion.
Yet the retreat models included in these two issues of *Combat Stress* have undertaken research (of varying rigor, again limited by resources) while gradually increasing the number of retreats. We encourage these efforts, as well as commend the New Mexico Department of Behavioral Health for awarding a four year contract in 2014 to the National Veterans Wellness and Healing Center/Angel Fire to deliver retreats to its resident Veteran families. This precedent speaks to the need for all civilian communities to step up in partnering with Veteran nonprofits offering programs, such as retreats that demonstrate positive outcome measures and strong positive responses from participant Veterans.

In this Summer issue (August 2017), we continue our series with an overview of Military and Veteran Recreational Programs, Camps and Retreats (O’Hara & Vicars), which includes brief descriptions of several retreat models and an outline of best practices; articles describing several additional Retreat Models: Healing of Memories (Wold); Walking with St. Francis (MacLeish); and GratitudeAmerica (Hejmanowski & Brown); and Veteran respondent articles by 2 retreat participants: one (Jones) who participated in two WVSJ retreats for women, and another (Briggs), who participated with his children in a GratitudeAmerica family retreat. Each of these Veterans weighs in on the personal impact of their having attending retreats.

In our Spring Issue (May 2017), three retreat models and their research were presented: Closing the Gap Intensive Integrative Retreats (Bruner & Shoots), a four day model for dyads (Veteran and support person); Lone Survivor Foundation Intensive Integrative Retreats (Brown; Kip et al.), a three to five day model; and the National Veterans Wellness and Healing Center/Angel Fire Retreats (Ford), a seven day model. Voices from a clinician who staffed a retreat for the first time after working with Veterans for 25 years (Mundt), in addition to a couple who attended a retreat and are now peer leaders for retreats (Marcus & Theresa Coomer), were also featured. Such voices represent the potential for qualitative research to study the individual impact of these experiences, a research element yet to be undertaken.

The descriptions of the retreat process, data, and outcomes bear witness to the impact of programs and the need to standardize, expand, and fund additional programs and research. The geographic locations and variations on intensive integrative retreat models allow applicants to select one (or more) that meet specific needs and accommodate financial constraints, but the demand outpaces available spaces, and an expansion of retreat programs is desperately needed.

We at *Combat Stress* could not include all of the retreat models currently available across the country, of which there are many more, nor can we endorse any one of them. We encourage clinicians working with Service Members and Veterans, as well as Veterans themselves, to educate themselves about these
opportunities and to share this information with others. We also strongly encourage Service Members and Veterans to select a “best match” before applying. We welcome feedback from readers, the opportunity to hear from retreat models not included in these two issues, and encourage dialogue among Retreat Program Directors and researchers to move this powerful intervention forward and to hold themselves to best practices, to include ongoing evaluation and research.

Retreats offer an important paradigm shift: from hourly therapy sessions “inside the walls” that may continue for years, to a complementary immersive, intensive, short-term group bonding experience “outside the walls” that can lead to significant rapid shifts in restoring confidence, relationships, and hope. We encourage the Veterans Administration and Department of Defense as well as Foundations, to closely examine and support funding for this intervention and additional research.

References


About the Author

Christiane O’Hara, PhD serves as a volunteer Psychologist through the Red Cross at the Functional Recovery Program, TBI Clinic, Dwight David Eisenhower Army Medical Center, Fort Gordon, as an Advisor and Retreat Leader for Gratitude America, a national nonprofit providing retreats for military and Veteran couples, and as an Advisor and Retreat Coordinator for Women Veteran Social Justice Network (WVSJ), a nonprofit network for women service members and Veterans. She has served as a Retreat leader for individual, couples, and family retreats through Fort Gordon Warrior Transition Battalion, Gratitude America, and WVSJ. She is co-author of Rehabilitation with Brain Injury Survivors: An Empowerment Approach (1991); “ArtReach Project America and other Innovative Civilian-Military Partnering” chapter in War Trauma and its Wake: Expanding the Circle of Healing (2012); and “Veterans and the Arts as Healing Interventions” (2014) and “Sleep Assessment and Interventions for Service Members and Veterans” (2017) in Combat Stress. She received her PhD in Clinical Psychology from the University of Georgia and completed postdoctoral training in Neuropsychology and Rehabilitation Medicine at the Atlanta Veterans Administration Medical Center and Emory University Center for Rehabilitation. She is a military daughter and mother of a Soldier.
Military/Veteran and Family Retreats:  
An Overview of Veteran Immersive Community Reintegration Experiences

Christiane O’Hara PhD and Chaplain (LTC) Cliff Vicars, D.Min

This article serves as an introduction to the many variations of recreation programs and healing retreats available throughout the United States to Service Members and Veterans, with a particular focus on therapeutic or healing retreat models. It also serves as a guide for Service Members, Veterans and families to identify a retreat that best matches their needs, geography, and readiness to participate in recreational versus “healing” retreat models. The authors do not endorse any model described in this article, but do endorse Service Member/Veteran/partner/family participation in retreats that can add fun, restore hope, introduce recreational and communication skills, strengthen relationships, and reduce stress. Very few articles have been published describing military and Veteran retreats (see
O’Hara 2017 for a list of references and reasons for this dearth in the literature), and of these, only one retreat model and its research is described in each article. The present article provides descriptions of recreational and healing retreat models, contact information to pursue more information, and a guide to help Service Members and Veterans compare programs and retreats.

**Program Definitions and Due Diligence**

For this article:

- **Recreation programs** include time-limited activities offering relaxation, time outdoors, exercise, fun, and skills in specific sports-related activities. These programs typically have recreation and/or Veteran peer staff without designated “clinical” (mental health) components or staff. Recreational programs may be adapted for those with special needs, have first aid available, and are open to any Veteran applicant or Veteran family members. Goals include fun, outdoor challenge/sports instruction and activities, team building, and building self-confidence in participatory recreation. **Operation We Are Here** is an online resource that offers a compendium of many military family recreation programs and vacations (including a few camps and retreats described in this article): http://www.operationwearehere.com/Veterans-FamiliesRecreation.html.

Photo Credit: Dana Hill Brennan, Operation Purple National Military Family Association Retreat, 2017
• **Camps** offer the same programs and goals as recreation, but are typically overnight or longer, may require more in-depth screening for medical and mental health conditions, and should offer on-site nurse/medic assistance. Such camps (sometimes referred to as retreats) are typically offered to Service Members, Veterans, Veteran families, and children of Veterans.

Examples of camps for military and Veteran family children include **Operation Purple Military Kids Camps**, sponsored by the National Military Family Association, which have served over 60,000 military children since 2004 (http://www.militaryfamily.org/kids-operation-purple/camps/), and **Operation Purple Family Retreats**, which are offered throughout the United States at no cost to military families (http://www.militaryfamily.org/kids-operation-purple/family-retreats/). The latter include resiliency activities developed by the American Red Cross, and outdoor experiences including hiking and canoeing. Another regional example is **Camp Twin Lakes (Georgia) Kids Serve II** camps; the latter location of which also sponsors **Family Warrior Weekends** (http://camptwinlakes.org/veterans/).

These camps and retreats are staffed by therapeutic recreation leaders trained in military culture, offering enjoyable activities to connect military children and military families with others who have/had parents deployed or have been affected by military service. The implicit message of “you are not alone” allows children and families time to bond with others in safe outdoor spaces and to try new, pleasurable activities to carry forward.

**Therapeutic or healing retreats** are typically staffed by both clinically trained mental health and recreational personnel (often Veteran or military family member clinicians). Mental health staff (which may include chaplains) lead some retreat sessions that provide information and skill-building to better manage service-related trauma, build trust, and improve relationships (e.g., relaxation, meditation, communication, re-integration). However, the “therapeutic” or “healing retreat” descriptor is used in programs and models that may or may not include best practices in clinical staffing and programs, therapeutic recreation programs, and outcome measures.

**Selecting a Retreat**

Veterans looking for a retreat that will offer well-established and effective interventions should be aware of indicators/protocols of effective retreat models, to include:

- standardized therapeutic protocols
- staff trained in working with the specific retreat population (e.g., combat Veterans, survivors of military sexual assault, couples, families)
- pre-screening of all applicants for the safety of the group
- understanding of Command and Control, and medical management issues (C2/M2) specific to active duty Service Members
- a demonstrated history of program effectiveness/evaluation
- continuity of staffing
- follow up measures and contacts to assure successful transition back to the community
- provision of resources and referrals for post-retreat support
It is therefore important for potential applicants to be diligent in selecting a program that best serves their needs. While some Service Members or Veterans may prefer a summer camp for their children or a family recreational retreat to build on already healthy relationships, others may need a retreat targeting wounded warriors (and partners, families) that provide healing, education, reconnections, and additional resources. Still, others may prefer a retreat specific to faith, gender, or simply restricted to Veterans. Rule: do your homework.

Examples included in this article are representative rather than exhaustive; Veterans and families should therefore search not only among those illustrated here, but also seek additional retreat models and locations. We encourage all to ask questions pertaining to:

- dates and locations
- staff and costs
- methods of screening participants
- availability of adaptive accommodations and on-site medical/nursing support
- level of physical activity required
- free time allowed
- whether participation is limited to Veterans of a particular era or age, gender, combat service, etc
- how each model evaluates the success of their retreat programs
- whether there is follow up of participants and if regional community resources and referrals are provided

Such due diligence will maximize a successful “match” between Veteran/partner, Veteran family, and the selected retreat model.

It is important to select a retreat that will not only teach skills and explore options for healing, but will also provide an atmosphere of enjoyment. If available, examine the retreat schedule to see how much time is allotted for fun activities and rest/free time that ties into the overall program. When possible, free-time and planned fun activities should be tied to therapeutic goals of building trust, resiliency, and community. Entertaining activities and free time provide retreat participants the space to decompress and digest new information.

Retreat programs that include healing and stress-reduction elements (i.e., Meditation, Reframing, Equine Therapy, Yoga, Tai Chi, Massage/Healing Touch, Storytelling/Journaling, Expressive Arts Therapies, etc.) have a much better chance of connecting their participants with the overall message their model is attempting to convey. They may also introduce participants to activities that can be continued post-retreat for continued healing and personal growth.

History and Emergence of Military Retreats

Prior to 9/11, military retreats were offered primarily through the unit chaplain, with funding that had been allocated as part of their commanders’ training program budget. It was very often used within a unit for Service Members returning from a deployment. Deployments ranged from hazardous duty/combat zones to peacekeeping missions, with varying months away from home station. Chaplains would work with the unit’s Training and Plans Officer/NCO in making plans for the retreat, typically as a pre-deployment or post-deployment opportunity.
for Service Members and families or single Service Members. The primary focus was deployment readiness and/or reintegration.

Post-9/11 saw the emergence of a much better funded and organized retreat program. Primary funding was no longer part of unit training dollars, but was managed through the various Chief of Chaplains offices for each branch of the service. The best known retreat program at the time was, and still is, Strong Bonds.

**Strong Bonds Model**

Therapeutic (healing) retreats for active duty couples emerged within the Chaplain Corps’ *Strong Bonds* model, developed in recognition of the high cost to marriages/high rate of divorces that emerged during the Iraq and Afghanistan cycles of deployments. These retreats, funded by the Department of Defense through the Chaplain Corps, focus on couples, families and single Service Members, and are often grounded in faith-based principles. Group sessions target improving communication, reconnecting to basic principles of military and spouse service, acknowledging losses and changes by each member of the couple or family member, and recommitting to marriage vows and the family unit. Each retreat includes required attendance for a specific number of training modules selected by the retreat leader (a chaplain trained in Strong Bonds) from a set of materials developed and provided by Strong Bonds. Recreational/outdoor programming is not the primary or secondary focus of this model. To date, over 13,000 couples have participated in Strong Bonds retreats, by far the largest single provider of couples retreats. There is typically no cost to the couples to attend. These are also offered internationally (i.e., generally anywhere redeploying troops are assigned). Local retreat dates are listed on a national website: [https://www.strongbonds.org/skins/strongbonds/display.aspx?moduleid=702a5bf0-3144-49e4-8579-08bd68ee1d23&action=usr_conference_list](https://www.strongbonds.org/skins/strongbonds/display.aspx?moduleid=702a5bf0-3144-49e4-8579-08bd68ee1d23&action=usr_conference_list).

**Additional Active Duty Unit Retreat Options**

Current funding trends have seen a decrease of available dollars set aside for retreats. While some funding still exists for retreats, unit Commanders and chaplains can plan their own unit retreats and/or look to community based programs, including those described below, to augment Service Member/family needs for retreats. Commanders who identify a need can set aside funding, identify a retreat leader and location, and develop a retreat program specific to the unit’s needs. This may include a one day on-site or off-site retreat, an overnight or weekend retreat, or a longer family retreat. Any of these options can be conducted at a local/regional retreat site that has the capacity, flexibility, and understanding of C2/M2 needs of the unit to accommodate active duty Service Members. While it is ideal to host a retreat at a location incorporating outdoor recreation, a site such as a resort or conference center that can provide quiet, safe spaces separate from other guests can suffice, given adequate control and accountability. (For additional information regarding individualized unit retreat
planning/leadership/execution, and for community-based retreats, please feel free to contact the authors of this article).

History and Emergence of Veteran Couple Retreats: W2SM Model

In parallel to the active duty Strong Bonds model, the Veterans Administration Medical Centers (VAMCs) have developed a retreat model to strengthen Veteran marriages based on the nonprofit PAIRS Foundation’s “From Warrior to Soul Mate” (W2SM) model and training material. This retreat model certifies clinicians and chaplains as trainers to conduct retreats throughout the United States. W2SM retreats usually take place over a weekend, and are couple-centric. Content includes communication skills building and strengthening relationships. A history and program guide can be found at http://vasdhs.pairs.com/docs/w2sm_psg.pdf. The Veterans Administration is expanding certification training to clinicians and chaplains working and volunteering in Veterans Administration Medical Centers to offer retreats to more Veteran couples. As with Strong Bonds, this program does not incorporate recreational/outdoor activities as a healing element of its model. For information regarding available W2SM Retreats, contact your nearest VA Medical Center.

Emergence of Veteran Outdoor Therapeutic Recreation Programs

Although therapeutic recreational activities have been incorporated into VA programs since after the Civil War (Veterans Health Administration, 2016), the emergence of recreational and therapeutic retreat programs has exploded during the last two decades. In 2015 alone, there were over 300,000 recreational activities for Veterans (Ibid.), among which are 6 national events held yearly by the Veterans Administration Adaptive Sports Program. This hosts local, regional, and national competitions, as well as providing grants to non-government organizations to increase and expand adaptive sports activities for Veterans at the local and regional community level (https://www.va.gov/适应性运动/). Such grants include adaptive sports associations for skiing, archery, basketball,
hockey, badminton, etc. (https://www.va.gov/adaptivesports/docs/2016_Adaptive_Sports_Grant_Recipients.pdf). In addition, nonprofit organizations and individual sports organizations, which in prior decades had provided adaptive recreational and outdoor experiences for “disabled” populations, have developed programs for Veterans that can accommodate their chronic pain and other military-related physical limitations. These include adaptive golf (e.g., Adaptive Golf Association, www.adaptivegolf.org), paddling and kayaking (e.g., Team River Runner now has over 50 chapters, www.teamriverrunner.org), and adaptive skiing.

**Challenge Aspen Military Opportunities (CAMO),** for example, offers year-round retreats in Aspen and Snowmass, Colorado for injured military members and Veterans with cognitive and or physical disabilities and their families. CAMO retreats provide adaptive and therapeutic recreation and wellness and cultural experiences. They are free for those who qualify, but Veterans cover their clothing expenses and transportation to Colorado. CAMO retreats typically are for four to five nights in duration. Summer retreats include fly fishing, horses for heroes, and “Aspen Fall Colors” programs. Winter retreats include learning to ski and snowboard, women’s mountain retreats, Nordic skiing and snowshoeing, SnowFest for the visually impaired, and retreats for couples. This is an example of a **recreational retreat**; i.e. while it may provide therapeutic bonding among retreat participants, its primary purpose is to provide instruction in outdoor sports (adaptive as needed) for Veterans. Contact information: https://challengeaspen.org/military/.

In parallel, therapeutic equine programs have also expanded nationally. These programs encourage 1:1 experiences between a Veteran and a horse, including EAGALA (https://www.eagala.org/), Saratoga War Horse (http://www.saratogawarhorse.com/), Horses for Heroes (https://www.horsesforheroes.org/), and other programs. Each offers Veterans, in particular those with service-related trauma, ways to relate to horses, including riding, currying, painting, and reconnecting experiences.

**Healing Retreat Models**

While adaptive sports and recreation programs provide individuals and groups of Veterans opportunities for competitive and long-term participation, and Strong Bond/W2SM healing retreats offer couples an indoor healing weekend retreat experience, healing retreat models combine recreational and therapeutic interventions in a holistic, integrative, intensive experience guided by clinicians, chaplains and recreational staff. This experience includes healing interventions for mind, body, heart, and spirit; acknowledging the wounds of military service that can compromise personal integrity/self-worth, beliefs, and relationships. For Veterans struggling with these issues, and their partners/families, the option of a healing retreat may be of critical need to “jump start” trust, resumption of activities outside of the home, and connect to other Veterans and family in a safe, leader-supportive environment.
Healing Retreats: Examples

**Bouldercrest Retreats**, located in Blue-mont, Virginia, are held at a privately funded and owned wellness retreat center dedicated exclusively to our nation’s combat Veterans and their families. Retreats are free of charge and range in length from 3 to 15 days. Their mission is “to provide free, world-class, short duration, high impact retreats for combat Veterans and their families”, integrating evidence-based therapies in a safe, peaceful space. Activities include archery, equine therapy, a labyrinth, walking trails, fishing, and outdoor exercise, all of which are integrated into their 5 PATHH (Progressive and Alternative Therapies for Healing Heroes) programs. These programs include one, three, five, and seven-day stress recovery retreats for warriors, caregivers, and families. Contact information: www.bouldercrestretreat.org.

**GratitudeAmerica Retreats** are held year round over long weekends in natural settings in Florida and Georgia for post-9/11 Veterans/couples/partners/"dyads" (second person can be a friend, support person, or family member of a single Veteran). Staffed primarily by Veteran clinicians and Veterans, these retreats are free with the exception of travel and are typically held at retreat centers or camp settings in mountain and beach locations. Programs include large and small group therapeutic and educational sessions, equine and arts programs, and recreational and physical challenge/team building activities. In 2017, Gratitude-America hosted its first Veteran family retreats in Georgia, partnering with a year-round retreat facility with staff experienced in adaptive recreation and camping for children.

Resources and referrals are provided during and after retreats. Group reunions are also held regionally. Couples who have completed this retreat are eligible for consideration as lead couples for future retreats.

An article with more detailed information including research and evaluation by GratitudeAmerica (Hejmanowski & Brown, 2017), as well as a Veteran re-

*Family Canoes storytelling and activity. Photo Credit: Christiane O’Hara*
treat participant’s response to his experience at a GratitudeAmerica Family Retreat (Briggs, 2017) can be found within this issue of Combat Stress. Contact information: www.gratitudeamerica.org.

Healing of Memories Retreats, North America, are offered in Minnesota and Arizona to male and female Veterans of any era. Founded by an Anglican missionary priest who was severely injured by a letter bomb while serving in apartheid South Africa, the Healing of Memories retreat model offers Veterans a weekend retreat in which to reflect on their life journeys, to share experiences in a safe space, and to heal from their spiritual and emotional wounds of war and military service. Staff are trained facilitators in this process, but not therapists. Caretakers/partners are offered the opportunity to participate in retreats. More detailed information, theoretical foundations, and research on this model can be found in this issue of Combat Stress (Wold, 2017). Contact information: www.healing-memories.org or Michael_w_wold@msn.com.

Intensive Re-Integrative Retreats/”Bridging the Gap” Retreats (IRR) are intensive community-based retreats for Service Members and Veterans and their primary social support person. Retreats are held throughout the United States, typically in wilderness retreat centers, but have also included a retreat held in downtown Chicago. Goals include establishing a responsive environment using empirically supported therapeutic interventions that focus on wellness and integration of mind, body, and spirit, improvement of communication, and skills-training to empower and destigmatize Veterans who are managing post-deployment stress. IRR retreats include activities that connect participants, reduce autonomic nervous system reactivity, incorporate Native American and Warrior rituals and outdoor and wilderness activities. Retreats are free to participants (other than transportation), and have been funded through an initial grant from the Walter Reed Foundation. Program and outcome research is ongoing; additional information on programs and research is available in Part One of this 2-part retreat special issue in Combat Stress (Bruner & Shoots, 2017). Contact information: vbruner@hotmail.com.

Lone Survivor Foundation Retreats are scheduled over five day weekends throughout the year, primarily in Texas. The retreats focus on wellness and therapeutic support, allowing time for the healing effects of nature and relaxation. Their retreats are offered to all military branches, individual Service Members, couples, and families, and to survivors of military sexual trauma. Their goal is to take individuals and families out of their normal environments and provide tools to move forward successfully. Interventions include psychoeducational groups, Equine Assisted Learning (EAL) using the EAGALA method, and individual sessions focusing on stress reduction. A more complete description of the LSF Model and research conducted on this model is available in part one of this two-part retreat issue (Brown, 2017). Contact information: http://lonesurvivorfoundation.org/healing-retreats/#sthash.mft2V86S.dpuf.
National Veterans Wellness and Healing Center, Angel Fire, Inc., is a retreat center in the Sangre de Cristo mountains of New Mexico. Angel Fire retreats bring Veteran couples to a place in nature where healing is optimal. Couples experience Native American ceremonies, storytelling of the warrior culture, and therapeutic individual, couple, and group sessions with Veteran and civilian clinicians for a week-long program. Angel Fire retreats initially were offered to Vietnam Veterans, but now includes intergenerational Veteran retreats.

The State of New Mexico, New Mexico Department of Veterans Services, Angel Fire Resort, Cardinal Retreats, Balance Out Mind-Body Adventure Retreats, Road Runner Tours, and the Native American community have teamed to create the programming included in these retreats. A more detailed description is available in the first of this double issue on retreats in Combat Stress (Ford, 2017). Contact information: info@veteranswellnessand-healing.org.

Operation Heal Our Patriots, Alaska, is a ministry project of Samaritan’s Purse, which focuses on bringing spiritual and physical renewal and marriage enrichment to Service Members and their spouses. Samaritan Lodge Alaska sits on several acres of lakefront property on the shores of Hardenberg, a bay in the southwest portion of Lake Clarke National Park and Preserve. Retreat activities include fishing, kayaking, hiking, bear watching, and boating, as well as spiritual renewal in biblically-based seminars to strengthen couples. A military chaplain and onsite staff select specific activities tailored to each group. Retreats are offered from June through mid-September and are one week long, including travel time. All expenses including travel are paid by Samaritan’s Purse. Aftercare includes referrals to military chaplains and local churches for follow up and additional resources for spiritual growth, with an optional annual reunion in Asheville, North Carolina. Contact information: http://www.samaritanspurse.org/what-we-do/about-operation-heal-our-patriots.

Walking with St. Francis Retreats, based out of Scottsdale, Arizona, are held on weekends and are open to Veterans of any era. St. Francis of Assisi was a Soldier and Prisoner of War. Injured and transformed by his war experiences, he later lived his life on principles of peace, compassion for all of Creation, and love, the guiding principles of this retreat model. Retreats are led by clergy and clinicians with years of military service, who guide participants in examining and reframing their own military experiences within a spiritually grounded perspective, reclaim and forgive self and others, and invite them to consider servant leadership. A more detailed description of the Walking with St. Francis Retreats, including theoretical foundations, research, and participant comments is included in this issue (MacLeish, 2017). Contact information: lindalmacleish@cox.net.

Women Veteran Social Justice Network (WVSJ) Retreats are offered to women Service Members and Veterans of all eras and are staffed by women Veteran clinicians and women clinicians. Based out of Atlanta Georgia, WVSJ has a number of programs that connect and
empower women Veterans, among which are 1, 3, and 5 day retreats. The first two are healing retreats with women Veteran and Veteran-family clinicians providing structured interventions, while the third is a recreational retreat.

One day “Away in the City” retreats are offered in natural settings to access nature walks, meditation time, equine therapy, expressive arts, and “fun” time out for women Veterans who can only afford to take a day away (due to work, family obligations, etc.). Long weekend retreats are held in natural settings in the Southeast United States (e.g., South Carolina beaches, Georgia mountains). These are funded through private donors, held on private resort properties in donated condominiums, and participants share rooms/lodging and family-style meals. Programs include structured group therapeutic and educational indoor and outdoor sessions (depending on staffing and participants), free time, and rest.

Long weekend and week-long “time out” retreats for women Veterans and their children allow single women and Veteran mothers and children to get away, typically over school holidays, at a beach resort. The cost of such a vacation experience is often out of reach for single Veteran parents. The camaraderie and shared experiences with other families allow single parents to share the work of parenting responsibilities with other participants. A small fee is requested per person, with scholarships available.

WVSJ has not conducted standardized research on these retreats due to severely restricted funding. This limitation in program evaluation is illustrative of many (particularly those smaller and with limited funding) retreat programs that offer Veterans opportunities for time and safe space to connect with a small community of other Veterans. Many such retreat programs are Veteran-led, without (or with inadequate) research staffing and protocols, with variable program content that is dependent on shifting availability of volunteer clinical and Veteran staff. Still, they continue to operate, based on high demand by Veterans, word of mouth advertising, and written and oral participant feedback. The latter often reflects gratitude, and at times dramatic and even life-changing shifts within Veterans, between dyads, and bonding with the group during and following retreats. Contact information: www.wvsjnetwork.org.

Photo Credit: WVSJ
An example of such perceived changes is described by a woman Veteran participant at both a WVSJ weekend mountain retreat and WVSJ week-long beach retreat for women only, follows this article (Jones, 2017).

Summary and Future Directions

Again, these are examples of retreats offered across the United States (and in the case of Strong Bonds, in other countries within U.S. military bases and posts). Many other retreat models and programs are available, some operating on a small, local level and others, with a national base. Readers are referred to the national nonprofit collaborative group, R4 Alliance, to search for more programs that fit adaptive recreational, geographic, financial, and intergenerational, needs (www. R4alliance.org). R4 Alliance currently has 80 screened/approved member organizations, conducts regional and national networking meetings among these organizations, has initiated a process of setting program standards, and encourages collaborative research to document evidence-based outcomes.

Veterans should also initiate discussions with other Service Members, Veterans, and clinicians about whether they have awareness of/attended any recreational and retreat programs, and which of their experiences have been fruitful. Word of mouth among retreat participants often leads others to apply and attend (or avoid in some cases).

It is clear that many recreational and healing retreats remain invisible to the great majority of Service Members and Veterans. This is unfortunate, based on the benefits demonstrated in research conducted within individual retreat models, the great need of our Veterans for more resources, and the short commitment of Veterans’/support persons’ time to participate in an immersive community based retreat. Clearly, more access to information on these programs is needed. In addition, expanded funding both through public and private resources would benefit all of these programs and allow for more research to demonstrate their efficacy. Finally, collaborative alliances and cross-training among retreat models (including research alliances, joint grants, and shared use of retreat facilities) would benefit all models in long term strategic planning, budgeting, service delivery, and research to demonstrate their efficacy.

To contact authors: cliffvicars@yahoo.com; christianeohara@gmail.com

References


About the Authors

Chaplain (LTC) Cliff Vicars serves as the Deputy Command Chaplain for the 108th Training Command (IET) headquartered in Charlotte, North Carolina. In his civilian life, Dr. Vicars serves as the Chief, Chaplain Services with the Mountain Home VA Health Care Services located in Johnson City, Tennessee. His specialized training includes Mental Health Integration for Chaplain Services, a joint training established by the Department of Defense and the Veteran’s Health Administration. Throughout his military career, he has worked to develop and facilitate retreats among Service Members, Veterans and their Families as part of deployment reintegration and healing from wounds received in combat. He has served as Retreat Director for Active Duty military and their families while stationed at Fort Gordon, Georgia, and Retreat Leader for Veteran couples and families for Gratitude America, a national non-profit serving the Military and Veteran population.

Christiane O’Hara, PhD serves as a volunteer Psychologist through the Red Cross at the Functional Recovery Program, TBI Clinic, Dwight David Eisenhower Army Medical Center, Fort Gordon, as an Advisor and Retreat Leader for Gratitude America, a national nonprofit providing retreats for military and Veteran couples, and as an Advisor and Retreats Coordinator for Women Veteran Social Justice Network (WVSJ), a nonprofit network for women service members and Veterans. She has served as a Retreat leader for individual, couples, and family retreats through Fort Gordon Warrior Transition Battalion, Gratitude America, and WVSJ. She is co-author of Rehabilitation with Brain Injury Survivors: An Empowerment Approach (1991); “ArtReach Project America and other Innovative Civilian-Military Partnering” chapter in War Trauma and its Wake: Expanding the Circle of Healing (2012); and “Veterans and the Arts as Healing Interventions” (2014) and “Sleep Assessment and Interventions for Service Members and Veterans” (2017) in Combat Stress. She received her PhD in Clinical Psychology from the University of Georgia and completed postdoctoral training in Neuropsychology and Rehabilitation Medicine at the Atlanta Veterans Administration Medical Center and Emory University Center for Rehabilitation. She is a military daughter and mother of a Soldier.
When military traumas happen, Women Warriors are often ill-equipped to respond effectively or to find resources specifically addressing our needs. Feeling connected to others is one of the most fundamental needs of human beings. Yet, these connections for women Veterans often are difficult to achieve and maintain. Why?

Far too often, military experiences of sexual discrimination, harassment, and assaults diminish Women Veterans’ capacity and trust to deeply connect with others in a healthy, empowering way. Safe harbor with others is often hard to find. Cyclical lackluster relationships ending in disconnections can slowly drain the Power source out of us, just as the last drops of gas are emptied from a car’s tank, leaving the vehicle unable to operate.

Being in a heavily male-dominated environment for prolonged periods of time is a common thread woven throughout Women Veterans’ military experiences. This was also my experience. Little did I know that the impact of military sexual traumas would come back decades later to haunt me. When I finally identified what these “problems” were, I began looking for solutions to help me re-establish my ability to heal and to once again deeply connect with others. I began a desperate search to return to my true, powerful self that seemed to be buried deep within me.

This is where Women Veteran Social Justice Network (WVSJ) came into the picture. WVSJ is an educational technology nonprofit organization for Women Veterans based out of Atlanta, Georgia.

Photo Credit: WVSJ
As my search began to identify healing solutions for myself, my path crossed with the Founder and CEO of WVSJ Network, BriGette McCoy. She told me of an upcoming “long weekend” retreat for Women Veterans who were actively engaged in moving forward on their paths of mental, emotional, social, and physical wellness. I signed up and was accepted into their Self-Care Retreat at the beach.

The WVSJ Retreat was held at a remote South Carolina beachfront resort in space donated by a generous parent of Veterans. There were 10 Women Veterans who met to share time rejuvenating, bonding, and engaging in group sessions. I only knew Ms. McCoy, yet quickly found myself in a car with 3 other Women Veterans as we traveled from Atlanta for the 5-hour trek to the retreat site. Knowing that I was with other women who were also having difficulty coping with traumatic military experiences fueled my willingness to tear down some of the self-protecting bricks I had used to build a wall around my heart. Slowly, surely, and safely, I found it easier and easier to just --- BREATHE.

Activities at the venue were well-planned and led by Women Veteran clinicians and Ms. McCoy. They included time for personal goal setting, creative and artistic expressions, networking and connecting with other transitioning Women Veterans, leadership building, self-care, as well as alone time to share in meal preparations and dining, and to sit quietly with one’s thoughts.

My favorite retreat experiences included a beachside creative art exercise where we used sea shells and paint to create our own unique masterpieces; preparing homemade group meals offered from the heart; the beach ceremony of drumming, singing, dancing, and wading in the water; and a night out for dinner at a local restaurant. We stayed up into the early morning hours sharing personal stories, bringing tears to our eyes from both hearty laughter and saddened hearts. We talked confidentially of our personal traumas and the misconduct and grave offenses of others, including our military comrades whom had inflicted harm on us. We genuinely connected with each other, knowing we were in a safe place, thereby feeling empowered to find viable solutions to help make our lives better. We clearly understood each other.

During my second WVSJ retreat in North Georgia, I had yet another kind of soul-soothing experience. Instead of ocean breezes and activities at the beach, this retreat group stayed in donated cabins in a heavily wooded lakeside environment. We Warrior Women were nestled in the mountains of Georgia, where the air was clean, crisp, cool, and filled with scents of pine cones. The beautiful fall foliage of the Big Canoe community complemented the spa and fitness facility, which offered an indoor pool, sauna and optional massages. I was touched by the easy, welcoming conversations with community residents whom offered us a celebratory embrace of us Warrior Women when we chose to share our mission as we met while hiking or swimming.

Another Big Canoe retreat treasure I hold dear to this day is sacred meal-sharing times. Our food was prepared and
cooked by our retreat facilitators, and our hearts were filled by their kindness expressed through the meals they served. This space was truly calming and safe. Not even signs on cabin doors warning us not to leave food in outdoor trash containers to deter bears disrupted my peace. (After all, a possible bear sighting in the mountains is just what to expect when one retreats in bear country!)

By the end of each retreat, I felt an inner shift of a deeper gratitude for my life. WVSJ offered us Warrior Women Veterans time to unplug, unwind, and take care of ourselves. It invited us to continue self-care by attending more than one retreat, and by staying in touch through its electronic networks. And for these experiences and connections, I am most grateful for the rich rewards I gained and continue to use even today.

(ED Note: WVSJ Network also offers Women Veteran Family Winter Holidays Retreats (recreational) and Women Veteran Leadership Retreats. A small fee is charged to cover meals, and scholarships are available. WVSJ also partners with and refers Women Veterans and their children to Camp Twin Lakes (GA) Military/Veteran Family and Veteran children camps. More information on retreat dates and locations is available through the www.wvsjnetwork.org website and WVSJ FB.)

About the Author

D.(enise) Olivia Jones is a native of Selma, Alabama, born during the onset of the civil rights movement. She attended Alabama State University in Montgomery, Alabama, receiving a Bachelors of Science in Computer Information Systems. She enrolled in Air Force ROTC and was commissioned as an Air Force Second Lieutenant upon graduation.

Her nearly 7-year Air Force service commitment during the Desert Storm era includes project management at Headquarters Strategic Air Command (SAC), and serving as one of the first African-American female officers second-in-command of the 200 personnel communications and computers systems squadron at Royal Air Force Lakenheath. She earned the rank of Captain and received a Masters of Public Administration.

Her post-military career includes having managed a human resource department, served as an executive administrator, worked as Company Manager for a national-touring entertainment company, and self-employment.

Ms. Jones is passionate in serving women and promoting wellness through natural remedies and the arts. She is a noted African dancer in her community, and makes unique customized designer-art greeting cards. She also volunteers as an Ambassador for WVSJ.

“You are not alone” song written and sung by BriGette McCoy at a women Veteran retreat and later recorded, courtesy of Warrior Songs
“Perhaps the greatest wound is missing the war you got it in.”

Most civilians would misinterpret the irony of this phrase in Sebastian Jung­er’s contemporary book, “War” (2010), as it is most poignant to those who have seen the damage of combat. This phrase does not suggest that veterans long for the hellish place where they fought and suffered, but rather that they yearn for the place where they felt determined, accomplished, protected, and loved within their warrior clan. It is the unrelenting intensity of war that fortifies bonds among warriors, and it is these connections that they crave long after
deployment. These bonds transcend all other relationships and mitigate displacement upon re-entry into their home communities. However, the sanctity of the warrior clan outside of the parameters of war cannot easily persist. And when this bond degrades with distance and time, isolation from one’s warrior clan can ultimately threaten the very survival of the veteran.

To Relate is to Survive.

Maslow (1954) posited that individuals are motivated to achieve certain intrapersonal and interpersonal needs, and that these needs exist in a hierarchy of precedence. The first and most basic of needs relates to physiological survival—the need for food, drink, shelter, sleep, and oxygen. Once this need is fulfilled, higher order needs, such as safety, love and belonging, self-esteem, and self-actualization will be sought. William Glasser, in his work “Choice Theory Basic Needs” (1998), addressed survival as a physiological need that becomes part of our genetic structure. However, he too, recognized the importance of relationships, social connectedness, the exchange of affection, and group identification.

When trauma is inflicted, there is an inherent effort by the traumatized individual to stabilize self-identity and rebuild safety. When a traumatic experience occurs away from one’s tribe, such as in a war zone, stabilization of identity, rebuilding trust, and reintegration upon returning to the tribe, becomes a complex set of hurdles for the traumatized warrior.

Coping after critical incidents indicates a healthier trajectory of healing when traumatized individuals are able to keep company with those who have a shared experience of trauma. Likewise, peer support initiatives aim to improved empathy and not simply sympathy.

In warfighting, Service Members can witness atrocities and other circumstances that profoundly affect their sense of morality and mortality. A result of injury to one’s assumptions about justice, fairness, and existential meaning disrupts a Service Member’s connection to society upon return from war. Feelings of disgust and despair, deriving from guilt, regret, or shame, hinder warriors from connecting with civilian community members— as horrifying secrets that may haunt them cannot or will not be revealed. Jonathan Shay (2002) and Brett Litz and colleagues (2009), among others, have elucidated how traumatic events that elicit moral injury can create an invisible barrier that prevents the veteran from experiencing emotionally corrective experiences within his or her community. This often unnoticed breakdown in re-engagement can potentiate suicidality among veterans. As such, the community is called to acknowledge and heal its veterans’ wounds of war.

Self-forgiveness, release from hate, and a reconstituted sense of humanity is inherently a social process. This requires a willingness from society to bear witness to the narratives of war in order to allow for healing through a restoration of faith in humanity. It is best achieved through a combination of both communal and tribal camaraderie.
For military veterans, building and renewing relationships after trauma is difficult, in part due to issues with mistrust, anxiety, grief, and anger. However, when veterans are able to engage with those who have walked the same path of warriorhood, an essential vetting process allows veterans to own their shared tribal knowledge of warfighting. This recognition of fellow comrades’ struggles and strengths borne from extraordinary trials reaffirms their emotional connection with one another and encourages them to reconnect with their families and home communities.

Veterans often have little tolerance for sympathy, yet diminished expectation for empathy. As Service Members retire from the military, the opportunities for empathic social connectedness wane as group identification and purpose are lost.

Wounds Unknown

The ‘invisible wounds of war’ refers to a composite of intangible and profound injuries to veterans’ ways of thinking and feeling. It is not the military machine, but the human who experiences the evils of war, which invades the mind, body, heart, and soul. For those who have been exposed to the moral ambiguities and imperative actions of war, a profound shift in the veteran’s self-identity can lead to intense stress for both the veteran and family members.

Path to Healing

Traumatic events can result in a sense of powerlessness and lack of control, a sense of physical harm and self-blame or guilt. It is an important tenet of military trauma that psychological and emotional sequelae from operational experiences can have both a negative and positive valence. The latter of these include the potential for post-traumatic growth and the perseverance of psychological fortitude despite adversity. The possibility of good deriving from suffering has been documented in writings from ancient religious texts to contemporary theorists (Calhoun et al. 1999). Post-traumatic growth can foster renewed purpose that can guide veterans along unanticipated yet meaningful paths. Such growth can be evidenced across three major domains: improved relationships with others, a more examined sense of self, and a shift in life philosophy. Growth from adversity can be readily cultivated in settings where an atmosphere of universality and empathy exist both within the warrior clan and among its community members. Veterans are able to witness
in each other examples of deepened faith, increased commitment to family, desire for renewed purpose, and dedication to impacting one’s community.

**But First, Relationships: the GratitudeAmerica Model**

In 2012, GratitudeAmerica, a 501(c)3 non-profit organization, was created by Lewis Jordan, a retired airline executive, and his wife, Joni – both of whom were seeking to provide support for the military community. Their vision has remained centered around the notion that it is the community that needs to heal its military warriors through acts of service and support. The Jordans believe that “America’s heroes are owed a debt we can never fully repay,” hence their passion for making a significant difference in veterans’ lives.

GratitudeAmerica’s signature mission is to provide and conduct healing retreats in nature-centric environments for post-9/11 deployed war veterans, active duty members transitioning from active service, and citizen-Service Members (e.g., Reservists, National Guardsmen). These retreats invite each participant to bring an adult partner or support person to serve as a “dyad” in rebuilding relationships in the safe retreat environment.

GratitudeAmerica retreats strive to: 1) rebuild self-identity and personal regard through emotionally-validating therapeutic educational sessions and complementary therapeutic modalities such as expressive arts and outdoor recreation; 2) identify shared perspectives and encourage social engagement via dyads, small and large groups, and teams; 3) create a safe community in which veterans can engage with others and build hope that such engagement is possible going forward in other communities; and 4) connect veterans with local community resources and providers to gain critical coping skills and strategies.

GratitudeAmerica has committed to serve several locations in Georgia and Florida that have large veteran and active duty populations. Veteran and military-trained civilian facilitators with extensive military experience and training lead each retreat. Social media connectivity, reunion events, and post-retreat telephonic follow up services augment the ongoing engagement of participants.

Data collection conducted in partnership with Kansas State University between 2012 and 2015 demonstrated positive trends in reducing post-traumatic stress-related transition and other reintegration challenges and in improving relationships between veterans and their primary support persons (Monk et al., 2016).

**Connection as the Mechanism**

GratitudeAmerica retreats are scheduled for 3 1/2 day weekends. Locations afford unique outdoor recreation, from dolphin encounters to kayaking adventures and equine therapy. On the first day of GratitudeAmerica retreats, participants are welcomed into a friendly and relaxing environment where they participate in ice breaker activities and introductions. Facilitators emphasize the commonalities held by the participants in an effort to build fellowship.
and group identity. Shirts are distributed to form a visual collective identity. Meals throughout the retreat are provided as community touchpoints and served by retreat staff in a spirit of stewardship. All recreational activities involve pairings of dyads and small groups, with an emphasis on relaxation, interdependence, and emotional connection. Activities are kinetic and hands-on, whether they are feeding dolphins, grooming horses, or traversing ropes courses, among other activities.

Problem solving and mission-oriented exercises are interjected throughout the retreat for building a sense of cooperation and teamwork. Participants are encouraged to share other resources, programs, and events they are connected with to encourage fellow participants to join new and engaging activities outside of the home.

Therapeutic educational presentations are held in a single large group, with discussions in smaller break-out groups. In the latter setting, conversation becomes more intimate and participants share goals and commitments to improve themselves and their relationship with their support person. Sessions involving creative arts are conducted. Veterans join as a clan in one group session, while their supportive persons find shared experiences with their fellow caregivers in a parallel group session. An activity that focuses on evolving self-identity is conducted to help participants understand the role they play in social pairings and group dynamics. The referencing of quotes and song lyrics during group sessions serves as a thread to connect each other. Live guitar music played around a campfire creates a reconnection to the military tribe. Closing ceremonies involve sacred veteran rituals surrounding healing, resilience, positivity, and future vision. Participants write supportive letters to themselves that are mailed one month later. They may also write an anonymous letter of encouragement which is received by a random participant during the closing ceremony. Private social media access for each cohort is set up during the retreat, and reunions are planned to mitigate potential post-retreat disconnection or regression.
Through a generous grant from the Marcus Foundation, GratitudeAmerica now hosts retreats on a monthly basis, to serve both conventional forces and specialized populations, such as Special Operations, female veterans, and families. With the hiring of an Operation Iraqi Freedom veteran and activated Reservist, MAJ Michael Anthony, as Executive Director, GratitudeAmerica is now a veteran-led and staffed organization. Partnerships and collaborations with civilian, corporate, university, and other non-profit entities assist with raising funds to offer the best possible retreat programming. We welcome additional partners, collaborators, and sponsors. As GratitudeAmerica continues to grow to meet the needs of its returning warriors, the emphasis on relationships, camaraderie, and community will remain essential to healing.

For post 9/11 deployed military and veterans interested in attending one of our GratitudeAmerica retreats, please go to www.gratitudeamerica.org for upcoming retreats and application.

For clinicians interested in working with us, contact Ann Johnson, Clinical Director, at ajohnson@gratitudeamerica.org.

For potential partners, collaborators, and donors/sponsors, contact Michael Anthony, Executive Director, GratitudeAmerica, at Michael@gratitudeamerica.org.
References


About the Authors

Dr. Tracy Hejmanowski’s clinical experience began at the VA, followed by her work with repatriated prisoners of war. She served overseas and stateside as an active duty Naval officer and remained on reserve status while working as a civilian military psychologist. Areas of expertise include treating chronic operator fatigue, post-traumatic stress, depression, anger and rage, anxiety, sleep dysfunction, substance abuse, and relationship strain. During her nine years as Program Manager at the Naval Hospital Jacksonville Deployment Health Center, she has provided individual, group, and couples therapy, as well as various complementary treatment modalities to military members from all service branches and components. She has been invited to speak as a subject matter expert since 2007 and participated as an invited speaker for Naval Special Warfare reintegration programs since 2010. Dr. Hejmanowski has received numerous military, civilian, and national awards for her behavioral health initiatives and exceptional contributions while providing innovative care for wounded warriors. She joined the GratitudeAmerica staff in 2013 and is a lead facilitator in their monthly retreats. She lives with her husband (an Iraq War Navy veteran) and their four children in Jacksonville, Florida.

Ann McCulliss Johnson, LCSW is an innovative behavioral healthcare leader and educator with extensive clinical and professional training experience. She is a retired United States Army Colonel and Operation Iraqi Freedom veteran with over 30 years of military social work and trauma informed practice experience. Since her retirement, she has served as the military consultant for the University of Central Florida RESTORES PTS treatment program and continues to serve the veteran communities of NE Florida. In 2016, she joined the Gratitude America team as the Clinical Director. GratitudeAmerica runs military support retreats for deployed post 9/11 military, veterans and their families throughout Georgia and Florida. She resides in St Augustine, Florida.
GET INSIDE OUR HEAD

It’s Not Our Credentials
That Make AIS So Impressive,
It’s the Fellows That Go with Them.

The American Institute of Stress is a non-profit organization established in 1978 at the request of Dr. Hans Selye (the Founder of the Stress Concept) to serve as a clearinghouse for information on all stress related subjects. AIS Founding Fellows include:

Paul Rosch  Linus Pauling  Alvin Toffler  Bob Hope  Michael DeBakey  Herbert Benson  Charles Spielberger

Join our prominent psychologists, physicians, other health care practitioners and health conscious individuals who are interested in exploring the multitudinous and varied effects of stress on our health and quality of life.

The American Institute of Stress invites YOU to enhance your credentials with FAIS and add your name to our Gallery of Distinguished Fellows.

Over the last 35 years, we’ve expanded our services and broadened our reach, but our dedication to science hasn’t changed a bit.

Our four focus areas include:

We produce three e-magazines focused on different stress related topics...

Join us in our mission to
Engage, Educate and Empower
the global community with science based stress management information, tools and techniques so people can live happier, healthier and longer lives!

Visit stress.org to download your FAIS or DAIS application

The American Institute of Stress

This is to certify that

Imagine YOUR Name Here

Having satisfied the requirements for education, training and reference, is duly qualified and has been elected to the status of Fellow of the American Institute of Stress

and is entitled to all of the benefits deriving therefrom

American Institute of Stress
9112 Camp Bowie West Blvd. #228  Fort Worth, TX 76116

www.stress.org

USA Main: (682) 239-6823  Fax: (817) 394-0593  Email: info@stress.org
In 2006, I returned home midway through my last deployment to Iraq. I was injured and required care I could only get in the States. I underwent 6 surgeries and spent time in the Fort Bragg NC Pain Management Center and Traumatic Brain Injury (TBI) clinic. I found that while we excel at preparing for, engaging in, and winning wars, we fail at preparing our men and women for the return home. My family was a casualty of this lack of preparation.

I know firsthand the stressors that are put on both our military and our families during deployments and the added stress for those who come home injured. And I know firsthand how unprepared my family and I were upon my return. During my six years of reconstructive surgery, my wife and I struggled with reconnecting and communicating. Neither of us was prepared for the man who came back. I felt empty and hollow; I could not focus; and I had trouble connecting emotionally with anyone around me. Where I was once in top physical shape, I now required help with some of the smallest tasks. Where I was once a skilled communicator, I struggled to find words and communicate feelings. I became frustrated with myself and with my best friend, my wife, who was incapable of helping or understanding me because I did not know how to understand “me.”
We became increasingly more distant. We began to argue over minor issues and spent more and more time apart. The things we once enjoyed we no long participated in together. All of this created an even bigger gap, as well as more frustration and tension. Eventually we looked for help but there was none in our local area. We did seek and receive counseling from a civilian provider. However, when providers have no reference point of military deployments and the unique strains on military families, they cannot truly serve us or other military families in our situation. Our marriage ended in divorce.

In March 2017, I had the privilege of attending the first joint venture Family Retreat weekend sponsored by Gratitude-America and held at Camp Twin Lakes, Georgia. From the initial application and phone call interview prior to the 3 day weekend retreat, to the very last goodbye, the staff and team of volunteers made my two kids and me feel welcomed and cared for. We were greeted as soon as we got out of the car: not just with a generic “hello,” but actually by name. Even before we checked in, they knew my name and each of my kids’ names. And it was like this the whole weekend.

There were only 15 families included in this weekend retreat, but it was the perfect size. I felt as if my kids and I were the focus. We were not rushed from event to event, but rather had a perfect combination of individual family time, separate sessions for adults and for children, and activities for all families. There were meetings and activities of all kinds for adults while kids had indoor and outdoor recreational activities. The adult sessions were led by veterans, veteran clinicians, and clinicians with veteran family members, so it felt as if they understood what we were going through because many of them had also gone through it. All the sessions seemed to focus on reconnecting with each other. The kids did arts and crafts, played games, prepared and put on a play, and had their sessions also led by a clinician and by camp staff trained to work with military families. I still have several of my children’s drawings hanging up in our house.

Eli and Eden Briggs. Photo Credit: Bren Briggs
helper quickly came up with a plan and took my daughter to do crafts while my son and I went to shoot archery. I saw the other families having similar experiences.

On Saturday afternoon, my physical condition worsened and I was unable to walk; my pain had gotten so bad that I was nauseous. I had to go back to my cabin for medicine and rest. The camp executive director came to look for me at the cabin, as he noticed that I had missed one of the group sessions. Yes, the executive director actually noticed I was missing. After I explained what was going on, he was on the radio and had several staff members develop a plan to help me recover while ensuring that my kids did not miss a single event. I was given time to recover, some additional medical care, and they even provided a golf cart for us to ride in so we could continue with the family events that required a lot of walking. My kids were unaware of what had happened, and felt special riding in the golf cart.

This was the first time my kids and I had the opportunity to bond and interact with other military families, and their first time at a camp with other kids; it will be a memory we will cherish for a very long time.

I went into this weekend with high expectations and standards. I can’t express how absolutely grateful I am to GratitudeAmerica for its Family Retreat Model, which is an expansion of its Veteran Dyad Model, and to Camp Twin Lakes, where the retreat was held. The staff and volunteers made this a weekend we will never forget. They exceeded my expectations in every way! I hope they continue to provide events such as this for other veterans and their families. If you are a veteran or spouse of one, I urge you to consider attending one of the many retreats offered by GratitudeAmerica (www.gratitudeamerica.org). These retreats can change your life, strengthen your relationships, and give you lifelong memories as they did for my kids and me.

About the Author

Bren Briggs is a retired Army officer with 28 years of service. He spent 8 years as an enlisted Marine, following which he accepted a direct commission as a medical officer in the Army. Bren had several assignments and tours that took him away from his family for long periods of time, and understands on a very personal level the strain on families from long separations. He was injured on his last deployment and underwent 6 major surgeries to reconstruct his face. It is out of this experience and working with others who were injured that he founded The Eden Project (www.eden-project.com), a 501(c)3 in Fayetteville Georgia, whose mission is to provide world class, community-based, reintegration programs for the warrior and his or her support group. Previously, Bren served on an Alzheimers Group Board of Directors for several years, during which he raised over $50,000 by running a 153 mile ultra-marathon across the Sahara. He brings this same dedication and commitment to the Eden Project and the community in which it supports. Bren is a PMI certified Project Management Professional (PMP) with an MA in Leadership from Shorter University, and is currently working on his PhD in Organizational Psychology, focusing on veterans in the work force.
Healing of Memory (HOM) Retreats, offered in Minnesota and Arizona at no cost to male and female veterans of any era, have grown out of an identified need to provide more options to military service personnel who are reintegrating into their communities. These retreats grew out of a need identified during a presentation in December 2007, by Dennis Donovan, Director of the Warrior to Citizen Program at the Humphrey Institute at the University of Minnesota that was set up to support Veterans returning from deployments. He described what was happening to Minnesota Service Members who returned from Iraq and Afghanistan. This was not a pretty story.

When the talk ended, two of us sat in silence as the room emptied. My friend, a non-veteran, looked at me and said, “I think we have to do something about these returning vets”. I was thinking the same thing. As a former US Navy officer on a ship that made two cruises with the 7th Fleet to Vietnam in 1968 and 1969, I remembered what it was like to return to a country that was deeply divided about the war and how poorly those who had been injured physically, emotionally, and spiritually were treated (or not treated) when they returned. Bob Brezinski and I vowed that we would do what we could to ensure that the “Vietnam experience” was not repeated with the Veterans returning from Iraq and Afghanistan. We formed a Veteran ministry in our church, which eventually served about 40 deployed Service Members and the families that were left behind. We prayed for these Veterans, assisting them with their reintegration into the community. We also adopted two deployed chaplains and supported their families during their deployments.

In 2008, Episcopal Pastor Margaret Fell served with me on a statewide Veteran Services Working Group. Margaret had just returned from a conference in South Africa and had met Father Michael Lapsley, an Anglican missionary priest from New Zealand who had worked with Nelson Mandela and Bishop Desmond Tutu in the healing of South Africa after the end of apartheid. Father Lapsley suffered the loss of his hands and the sight in one eye from a letter bomb that was sent to him in Zimbabwe by a supporter of the pro-apartheid government in South Africa. After a long recovery, Father Lapsley decided to dedicate his life to helping victims of emotional, psychological, and spiritual wounds inflicted by war, human rights abuses, and other traumatic life events. In 1998, Father Michael formed the Institute for Healing of Memories (www.healing-memories.org), creating a powerful healing retreat called the Healing of Memories Retreat. Margaret convinced the Statewide Veteran Services Working Group to support a pilot pro-
program involving the Healing of Memories Retreat for Veterans. In 2009 the first retreat was held primarily for homeless veterans from the Minneapolis-Saint Paul area.

**Retreat Overview**

The Healing of Memories Retreat is a two-and-a-half-day retreat, typically conducted on a weekend at a retreat center. It provides a safe, experiential, and interactive way for Veterans to address anger, loss, grief, and guilt. More importantly, the experience offers a step forward (often a life-changing step) in healing from psychological and spiritual wounds. The key retreat characteristic is the safe environment provided for Veterans to share their stories. It is common for Veterans to bury their war experience stories deep inside, creating a challenging barrier to healing. As retreat participants tell their stories and listen to those told by others, they recognize the common human bond of having been wounded in some way by their war experiences. In addition, the retreat experience allows Veterans an opportunity to purge traumatic memories and address feelings of guilt and shame associated with times that they acted against their fundamental beliefs; the latter also referred to as “moral injury.”

In each retreat, up to 20 veterans are provided lodging (typically two to a room) and meals at a retreat center for a weekend. The retreat begins on a Friday evening with a welcome dinner, after which the opening session introduces retreat concepts and provides an opportunity for participants to meet one another.

Participants are asked to reflect on three questions:

- What has been done to you?
- What have you done?
- What did you not do?

Day two is dedicated to life mapping and storytelling. Participants are given time to reflect on their life journey, the events that have caused them emotional pain, and to create a “life map” that captures these events. Participants are then divided into groups of 4 to 6 to share their painful stories. Group sessions are facilitated by individuals who have been trained by Father Michael Lapsley. When Father Michael is not able to lead the facilitator team, there is an experienced lead facilitator who takes his place.

Facilitator training includes at least three co-facilitated retreats under the supervision of an experienced facilitator, during which trainees receive detailed feedback on their performance as facilitators. Lead facilitators are selected for training from the group of facilitators and undergo additional training from Father Michael. Although many of our facilitators are certified in areas such as counseling and spiritual direction, the facilitator role is not that of a therapist, but rather an expert in coaching Veterans in telling their stories and describing the feelings associated with these stories. The facilitator role is designed not to “fly above the Veterans” but rather to model peer-to-peer. They emphasize that facilitators, participants, and indeed, all of us, are involved in a continuous healing process. To reinforce connections with Veteran participants, facilitators share their own personal
stories in an atmosphere of safety, respect, and confidentiality.

These retreats also offer time for quiet personal reflection and integration. On the evening of the second day, participants spend time relaxing together or alone. On the third/final day, the group shares experiences, common themes, and lessons learned. “Retreatants” also create a clay model that relates in some way to their healing journey. Each retreat closes after lunch with activities designed to help participants release their painful experiences and to celebrate the future. The first step has been taken towards the remainder of their journeys so that the time has come to look to the future.

Retreats are open to Veterans of any era and include combat and non-combat veterans. Each applicant is interviewed prior to being accepted for registration to determine whether he or she has reached a stage in their healing to benefit from the retreat. If a Veteran is involved in therapy, he or she is requested to verify with their therapist that the retreat will be of benefit to them in the process of their healing.

The 2009 pilot retreat in Minnesota was found to be very successful and retreats have now been provided to more than 130 men and women Veterans in Minnesota and more than 160 Veterans in Arizona. In response to requests from spouses and significant others who are the primary sources of support to Veter-
Theoretical Foundations

Although the HOM retreat model is unique in its process and application, its efficacy is substantiated by storytelling research on its impact on both physical and psychological healing. Exploratory research in Northern Ireland (Hacket and Rolston, 2009), and Germany (Rosenthal, 2003) identified the positive impact that storytelling may have with individuals and groups who have suffered physical or psychological trauma from events and cultural conflicts beyond their control. Employing a practice of personal narrative, the Healing of Memories Retreat provides the psychological environment of safety, community, and reflection so that participants are able to explore and come to terms with debilitating psychological issues, including moral injury caused when a person violates or is forced to violate their moral code of conduct. As Dyer (2001) observed, there are many benefits to storytelling including, translating memories into a more concrete form that can be handed down, either verbally or in written form: helping to preserve culture; helping us explain the way of the world; making sense of the insensible; coping with loss; providing the mechanism by which healthcare providers and patients communicate, looking for the meaning of their wounds, and discovering ways of coping with them.

Research on the Retreat Model

The initial work of the Healing of Memories Retreat model was conducted by anthropologist Undine Kayser (2000), who examined the Healing of Memories process and its use as an intervention in addressing healing and reconciliation. Kayser examined the long-term impact of key variables believed to be operative in the retreat’s format: forgiveness, reconciliation, ubuntu (humanity to others), and anger. Based on participant observation followed by 10 qualitative interviews, Kayser identified the following themes that emerged: opening, telling one’s story and listening to one another, rediscovering a common humanity, meeting across physical boundaries, bridging separate realities, experiencing a sense of belonging, healing, getting the “poison out,” expressing both anger and forgiveness, and exploring the role of religion and spirituality. Kayser also considered the differential impact of a single session encounter versus long-term engagement. Her study was the first to undertake an empirical exploration of the HOM process to identify its impact on participant experiences, thoughts, emotions, and beliefs. Kayser recognized the potential such retreats could have in a “once-off weekend experience,” and encouraged further exploration into the effects of such initiatives.

A second study of the impact of HOM Retreats was undertaken by Nathan (2009), who investigated the effects and interaction between forgiveness and empathy in relation to collective trauma treatment. Nathan examined the impact of an HOM Retreat on changes in forgiveness and empathy in a sample of 17 retreat participants. Her research...
tested two related hypotheses: whether participation in an HOM retreat could enhance one’s capacity to forgive and whether such participation could also enhance one’s capacity for empathy. The participants in Nathan’s study demonstrated significant increases in the ability to forgive within immediate post-retreat measures as compared to pre-retreat measurements. Similar significant results were obtained when a 2-month follow-up measure was compared with the pre-retreat measure, suggesting a sustained effect over time. Nathan’s research also demonstrated a decrease in pathological symptoms in both the post- and 2-month follow-up measures. These findings suggest improvement in one’s sense of self and beliefs about others (a positive relational shift), as well as a decrease in pathological symptoms related to trauma. Finally, Nathan found significant increases in levels of reported empathy in participants following reflection on their experience of listening to another participant’s story. Overall, Nathan’s results demonstrated the efficacy of the HOM retreat model as a treatment modality in relation to forgiveness, empathy, and trauma recovery.

In a third study, Niyodusenga and Karakashian (2009) conducted a program evaluation of a series of HOM Retreats conducted over time in South Africa. Using questionnaires and in-depth interviews, these researchers analyzed narratives from retreat participants and retreat facilitators to identify and examine common themes in the participants’ experiences. The researchers were interested in the following questions: 1) how participants experienced the retreat, 2) the extent to which participants could let go of painful feelings from the past, 3) what changes in the perception of other participants took place, and 4) whether the effects of the retreat endured over time. Their findings supported the retreat’s basic assumptions: that having one’s pain acknowledged is a healing experience that fosters empathy for the experience of others and reduces feelings of isolation. The researchers found that the effects of the retreat were still present at 2-month follow-up interviews. Overall, participants reported that the retreats were positive, life-affirming experiences that both empowered them and in various degrees, freed them from painful pasts. Participants further felt that one retreat was not adequate and that additional retreats would likely be beneficial. Niuodusenga and Karakashian offered a caveat: more fragile participants may not be prepared for the emotional intensity of this retreat model and these individuals may experience varying degrees of re-traumatization during the retreat. It was suggested that pre-screening of participants for mental health issues and histories be carried out whenever possible.

In a fourth study, Tabak (2011) examined the experience of participants in an HOM Retreat to assess its efficacy as an intervention for facilitating healing from traumatic experiences. The HOM Retreat was initially designed as a parallel process to South Africa’s Truth and Reconciliation Commission for the facilitation of social and individual healing in the wake of apartheid. It has since been used internationally and with a variety of different contexts to promote healing and reconciliation. Eleven participants from a recent HOM retreat participated in semi-structured interviews that asked them to
enumerate their experiences in relation to various aspects of the retreat’s structure and process. Findings indicated that participants chose to enroll in the HOM retreat for a variety of reasons. The research method of content analysis was used to derive relevant themes across subjects. In describing the components of the model, participants reported that expressive arts activities, rituals, and storytelling helped facilitate the release of negative emotions by encouraging a deepening of emotional experience, creating a context for individual experiences, and supporting reflection about the individual’s life. Participants also identified the following processes as particularly therapeutic: the formation of intimate connections, the facilitation of empathy for the experiences of others, and the validation of one’s own experiences through the process of mutual witnessing. All study participants reported positive feelings about their experience in the HOM retreat, and described the subtle, yet profound nature of the shifts and/or changes they believed took place as a result of their participation. In general, participants expressed an appreciation for the simplicity and accessibility of the HOM retreat model and a curiosity about how its interventions could be applied in other contexts.

In summary, though few in number, these empirically sound psychological studies of the process and outcome of the Healing of Memories retreat as an intervention and healing strategy in working with a broad range of individuals suffering from trauma are positive, hopeful, and deserving of further exploration with a variety of client populations.

**Research with Veterans in Arizona**

The retreat model has also been shown to benefit Veterans and spouses/significant others. The Arizona assessment of change/outcomes has shown that telling painful stories in a confidential, small group setting has helped participants to confront remorse, shame, anger, and destructive perceptions of themselves. Oftentimes, our participants suffer from moral injuries (violations of their most deeply held moral codes). This retreat model helps participants deal with this in a constructive manner, often helping them become “unstuck” and to move on with their lives.

The following quotes are typical of those received from participants:

“It definitely gave me hope and identified and gave me awareness of where to go from here and where I should focus.”

“I have such a new insight and new perception on life.” (The benefit was) “To have been able to release myself from my personal prison I had put myself into.”

During retreats, close bonds are formed and Veterans emerge from isolation. Program leadership and facilitators stay connected with them after the retreats end, sending them information and resources. We also sponsor “reunions” once or twice a year where the Veterans and their families are invited to socialize together. Many lifelong friendships have been formed. Several past participants volunteer to assist with retreats and find other ways to “give back” to Veterans.

We are in the very early stages of developing quantitative data to measure the
short and long term impact of the Arizona Veteran retreats, collecting data using two instruments. The first is the (unpublished) Institute for Healing of Memories evaluation instrument, which is used worldwide in all Healing of Memories Retreats. We administer this questionnaire during the final retreat meeting. It is anonymous, unless the participant chooses to provide their name. Nearly all participants complete the survey. In addition to obtaining open-ended feedback and responses about those aspects of the retreat experience that they preferred and which were in need of improvement, the participants are asked the following two questions (average results are shown in parentheses):

Were your expectations met?
- Yes (Over 80%)
- Partly (Between 10% and 20%)
- Hardly at all (Less Than 2%)
- In no way (Very Seldom)
- Did not answer this question (Average Less Than 1%)

How useful was this weekend as a process towards healing?
- Excellent (Over 80%)
- Good (Between 10% and 20%)
- Fair (Less Than 2%)
- Did not answer this question (Average Less Than 1%)

We recently began to use the (unpublished) Healing of Memories Quantitative Assessment Instrument, developed by Dr. Jerry Diller, PhD, a retired professor of psychology, who is also an experienced lead facilitator for the Healing of Memories Retreats. This assessment tool attempts to measure change in participants’ feelings immediately before, immediately after, and 60 days after participating in a retreat. This process measures the outcomes of the retreat in 14 key areas. The process measures are listed below, with their desired outcomes following in parentheses:

- Hopefulness (more)
- Anxiety (less)
- Forgiveness (more able)
- Empathy (more)
- Anger (less)
- Guilt (less)
- Sleeplessness (less)
- Fearful dreams (less)
- Depression (less)
- Openness (more)
- Trust (more)
- Sense of belonging (greater)
- Painful memories (more ability to let go)
- Resentfulness (less)

The assessment tool uses 14 statements that are directly related to the 14 desired outcomes. A standard Likert scale (1 to 5) indicates the degree to which the respondent agrees with the statement: strongly agree, agree, neither agree nor disagree, disagree, and strongly disagree. The statements are structured so that change over time is measured by degree of agreement with each statement. This assessment questionnaire design requires the participant to reflect deeply within about the statement before answering it. Although we understand
that this affects the quality of the assessment data, because of our great concern for triggering this population on the opening night of the retreat, we administer the “pre-workshop assessment” at the end of the retreat by asking the participants to compare the feelings they had when they arrived at the retreat and immediately following the last retreat meeting. This is done anonymously and we typically have a 90% response rate. We then ask them to return a 60-day questionnaire with the same questions with a 30% response rate.

Since 2015, we have computed average changes from pre- to post-retreat ratings on Likert scale scores for each of the 14 areas on more than 150 participants from ten retreats. All ratings showed an improvement in 10 or more of the areas assessed. We often find improvements in 12 or more areas. Although our average return rate on the 60-day questionnaire is small (about 30%), scores are holding across areas rated. We are undertaking data analyses to determine how to improve the percentage of responses at the 60-day assessment and to identify which of the 14 measures may consistently lag behind in demonstrating improvement. Such data may suggest modifications needed in the model content and process.

**One Life Impact: Example**

A transformative retreat experience example is illustrated by the significant change in the life of an Army veteran who served as a combat engineer during Operation Desert Storm. A bomb they were trying to disarm had killed his entire team. He spent 20 years self-medicating with alcohol, struggling through several jobs, and dealing with intense bouts of anger. Since participating in a 2014 retreat, he has dedicated his life to helping Veterans who are also hurting. He has become our retreat team’s “first call” when they are dealing with a Veteran who is “in the valley”, always coming through for that particular Veteran. He has developed a strong spiritual life, is now married, and has a strong relationship with his wife. He claims that the retreat he attended was a major factor in his turnabout.

**Funding Retreats**

All retreats are provided free of charge. Many people have recommended that Veterans be charged for the retreats, but we have so far resisted this suggestion. Providing free retreats requires fundraising, which is always a challenge.
The Arizona Healing of Memories Program has been able to form collaborative partnerships with two outstanding Veteran supportive retreat centers: the Franciscan Renewal Center in Scottsdale, AZ and the Spirit in the Desert Retreat Center in Carefree, AZ. Each has been instrumental in raising funds to make attendance at these retreats possible. Through their efforts, funds have been made available for the provision of four retreats per year. Additional funding has come from the Arizona Department of Veterans Services, faith communities, corporations, and individual donors.

The Future

A “beachhead” for Healing of Memories Retreats in Minnesota and Arizona has been established. The need for this type of healing retreat extends to Veterans across the entire country. Expansion beyond Minnesota and Arizona will require not only a significant amount of funding, but also the development of partners throughout the nation to make this retreat available to any Veteran in the country at a convenient location.

Spirit in the Desert Retreat Center - site of many Healing of Memories Workshops in Carefree, Arizona. Photo Credit: Mike Wold
For more information please contact Mike Wold, US Navy Veteran, at Michael_w_wold@msn.com or view the Healing of Memories website at http://na.healing-memories.org.

References


About the Author

Mike Wold is the volunteer Arizona Regional Coordinator for the Institute for Healing of Memories, an organization that conducts Healing of Memories Retreats throughout the world for people suffering psychologically or spiritually from painful memories. HOM Arizona brings this retreat free of charge to service personnel and veterans of all eras, providing participants with a safe, confidential environment to share and heal. He is a US Navy veteran who is involved in organizations serving veterans and their families, including the Franciscan Renewal Center Veterans Ministry in Scottsdale, Arizona. Mike was a successful organizational development consultant, coach, teacher and facilitator for 15 years, plus 25 years in project management in private and public sectors. He is a former Financial Director and Assistant Commissioner for the Minnesota Department of Economic Security, and former Engineering and Program Management Director at Lockheed Martin Corporation where he led large engineering organizations and business units with over $100 million in annual revenue. He was a graduate level adjunct instructor at the University of Minnesota and Saint Mary’s University of Minnesota. He holds an MS Degree in Mathematics from the University of Iowa and an MBA from the Carlson School of the University of Minnesota.
The American Institute of Stress is an executive producer of *Body Electric: Electroceuticals and the Future of Medicine*, a documentary film aimed to revolutionize the way we think about health and the human body. This 68 minute movie, by British producer/director/writer Justin Smith, is now available online, and the DVD will soon be available for purchase through AIS.

**Rent for $4.99 - 48-hour streaming or Buy for $14.49 - Streaming and digital download**

The American Institute of Stress helps people learn to manage their stress every single day. We help veterans returning from war find a sense of normalcy again. We help students who are stressed about exams, busy schedules and bullies reach their fullest potential. And we help people like you deal with whatever life throws at you! With your ongoing support, we will continue to be there providing people with relief for today and hope for tomorrow.

Call (682) 239-6823 or email info@stress.org to discuss your gift.
Walking with St. Francis: Journey of a Wounded Warrior Retreat

Meditation chapel on the grounds of the Casa: ‘Give me a Quiet Place - Healing Occurs in Community’

Photo Credit: St. Francis Retreats

Linda MacLeish, LPC, E-RYT

Background

The Walking with St. Francis retreat model was conceived out of the Franciscan Pilgrimage Programs, Franklin, Wisconsin (http://www.franciscanpilgrimages.com). The yearly Veteran’s Pilgrimage to Assisi and Rome is based on Franciscan Spirituality. St. Francis of Assisi was a soldier, a prisoner of war, and a veteran. Born wealthy and privileged, he was injured, humbled and transformed by his military experience. Upon returning home to heal, he renounced his former life and built a new one based on compassion for all creatures- the lepers, the rich, the poor, the bad and the good. Franciscan spirituality expresses itself in acts of peace, love, and compassion for all creation. It is Christ-centered, but embraces all peoples, whether Hindu, Buddhist, Muslim, Jew, Christian or those who do not identify with a faith background; and rich or poor, sick or well.
The retreat leadership team, Fr. Conrad Targonski, and Greg Masiello, Ph.D., met with the Casa (AZ) Veterans Military Ministry leadership in 2014 to explore the possibility of creating a mini-Pilgrimage for veterans at the Casa. The result was the development of a retreat model that has been conducted yearly since 2015. A level II retreat will be conducted in late 2017 based on the requests of prior participants. This will guide participants deeper into the exploration of their wounds and promote healing through integrative complementary and alternative therapies.

Retreat Overview

The Walking with St. Francis: Journey of a Wounded Warrior is a two and a half-day retreat conducted on a weekend for combat veterans of any era. It provides a safe, experiential and interactive experience for the participants to examine their “wounds of war” from various perspectives, in the light of a saint who rose out of the ashes of combat to become an icon of peace. The story of St. Francis (Short, 2013), the historical context of war during his time and parallels to today’s military campaigns, Joseph Campbell’s Hero’s Journey (1949), and Ralph R. Moody’s Five Stages of the Soul (1997) frame the examination and exploration of the participant’s military experience during the retreat.

Campbell’s and Moody’s models allow participants to see how St. Francis moved through The Call, Responding to the Call, The Struggle, The Breakthrough or Transformation, and the Return. Participants are encouraged to explore this process in light of their personal experiences in each area. The retreat leadership team share their personal stories and experiences in each of these areas, and provide guidance to participants through the lens of St. Francis.

The retreat leadership team includes Fr. Conrad Targonski, a Franciscan Friar of the Assumption Province (Wisconsin), who served 22 years with the U.S. Navy and Marine Corps including 7th Marine Regiment as supervisory chaplain in OPERATION PHANTOM FURY (OIF:2.1-2.2) Fallujah, Iraq, 2004-2005. He retired with the rank of Navy Captain from the Marine Corps Combat Center in 29 Palms, CA in 2010. Greg Masiello, Ph.D., is a retired psychologist who has assisted combat veterans with their reintegration to civilian life. Greg served with the 42nd Aviation Brigade as a Liaison Officer in Iraq and as a pilot, training officer and psychologist in the New York Army National Guard for 23 years. Rev. Dr. Bill Reese is Chair of the Religious Studies/Philosophy Department at Viterbo University, La Crosse, WI and a decorated Vietnam Conflict veteran.

These three veterans connect with participants through educational presentations and small and large group process. The leadership team is supported by a licensed mental health therapist, a spiritual director, a music therapist, and an onsite host.

The Franciscan Renewal Center is nestled in the lush desert valley at the base of the Camelback Mountains in Scottsdale, AZ. The Center, also known as “the Casa”, includes sleeping accommodations, meeting spaces, meals, and beautiful outdoor spaces including
a meditation chapel, labyrinth, ramada, fire pit, healing garden, and seating and walking areas. The Casa retreat experience lends itself to the concept of spirituality of Creation and place. Spirituality of Creation is a key concept in St. Francis’s Journey as a wounded warrior. He found peace in creation, nature, animals, and places to reflect and find peace. The other component at the Casa retreat is to provide a mini-pilgrimage experience; typically, two to three participants continue with the full Veteran’s Pilgrimage to Assisi and Rome offered by the Franciscan Pilgrimage Programs.

Throughout the weekend, participants are able to take advantage of both the content provided in sessions as well as the context of the Casa. They participate in a Tau ceremony in the meditation chapel on Saturday morning. That afternoon they walk the labyrinth, where they drop their “baggage” into a vessel which is symbolically burned in a fire pit, and join in a drumming circle led by a licensed music therapist. On Sunday morning, participants make their way to the outdoor ramada where a service is conducted to honor their path. Participants are invited to give back: What is one thing they might do to commit to servant leadership? The concept of servant leaders brings a Christian spiritual perspective to the retreat while tapping the service and leader ethics and histories of each veteran. Participants represent many faith backgrounds as well as those who do not participate in a formal or informal faith, but servant leadership resonates among participants regardless of faith.
Participant Feedback

“This retreat gave me a deeper understanding of St. Francis and how my life directly relates to his.”

“I learned how to put the past behind me and allow forgiveness of myself and others.”

“This retreat reversed my thinking about going to Vietnam for payback for my friend’s death in combat over there to realizing I need to love life more and Pay it Forward in service to others.”

“For me, I found a reason to keep on my healing journey. There has been so much holding me back and I feel a resurgence of my old self coming to the surface.”

“I am a good person and have a lot to contribute through servant leadership in my community.”

Theoretical Foundations

Current research in the area of spirituality and healing among our military and veteran populations is in its infancy. We have had the privilege of working with Timothy Usset (Harris et al., in press), who under the direction of Dr. Irene Harris (in press) and other colleagues is conducting research on a Building Spiritual Strength group model at the Minneapolis Veterans Research Institute. We will also host Dr. Rita Brock, Director of the Soul Repair Center, Brite Divinity University in Texas and author on soul repair (2012). It is our intention to collaborate with these and other programs to develop shared tools and research on moral injury.

Recent storytelling research and its impact on both physical and psychological healing support the St. Francis Retreat Model’s efficacy. Research in Northern Ireland (Hacket & Rolston, 2009), and Germany (Rosenthal, 2003) identified

Poems courtesy of Barbara Lee, written while a participant in a Walking with St. Francis Retreat.

Click to Hear Poem #1

Click to Hear Poem #2
the positive impact that story telling can have in healing individuals and groups of individuals who suffered physical or psychological trauma in social and historical events. The sharing of St. Francis’s life story and the retreat leadership team’s personal stories encourage participants to explore their stories in a safe environment.

As Kristi Dyer (2001) observes, there are many benefits to storytelling. These include: translating memories into a more concrete manner that can be handed down verbally or in written form; helping preserve culture; helping us explain the world; making sense of the insensible; coping with loss; and providing the mechanism by which physicians and patients communicate, look for the meaning of their illness, and discover ways of coping with it.

**Results with Veterans in Arizona**

We are in the early stages of developing measurements for the short and long term impact of the retreat on our Arizona Veterans. We have used a questionnaire/survey (see Exhibit A) administered at the end of each retreat to capture participants’ experiences: what worked, what was most difficult, what were significant takeaways, and recommendations for improvement.

Each retreat participant has completed this Evaluation, with ratings averaging good to excellent. The feedback provided has assisted in revising retreat content and process.

The 2017 retreat also administered the Flourishing Scale (Diener et al., 2009) prior to and following the retreat. The Flourishing Scale (see Exhibit B) is an 8-item summary measure of the respondent’s self-perceived success in areas such as relationships, self-esteem, purpose, and optimism. The Scale provides a single psychological well-being score, and was chosen as its language is neutral (non-religious). This Scale is copyrighted, but the authors have made it available at no cost to researchers and practitioners under condition of crediting authors using the citation listed in References on page 22.

Results of the 2017 retreat participant Flourishing Scale well-being scores demonstrate an average increase of
Franciscan Renewal Center
Retreat Evaluation Form

Program Title: St. Francis: Journey of a Wounded Warrior
Presenters: Fr. Conrad Targonski, Greg Masiello, Rev. Dr. Bill Reese
Support: Linda MacLeish, Joe Kelly, Marge Gregoric
Date: ________________ 2017

Please feel free to answer the following questions about the retreat. Your feedback and input will greatly assist us in planning future retreats for veterans, service members and military families.

1. How did you find out about this retreat (mark all that apply)?
   - Franciscan Renewal Center (program catalog, flyer, Sunday Bulletin, altar announcement, etc.)
   - Friend
   - Military Chaplain
   - Arizona Coalition for Military Families
   - Facebook/ Twitter
   - Catholic Sun
   - Other (specify) ____________________________________________________

2. Using the scale to the right, please rate the following:
   - Excellent
   - Good
   - Fair
   - Poor
   a. Friendliness and helpfulness of staff members/volunteers
   b. Quality of Casa grounds, conference room, hotel room, chapel, etc.
   c. Quality of meals and refreshments

Comments? _________________________________________________________________________________________________________
_______________________________________________________________________________________________________________________

3. How well did this retreat:
   - Excellent
   - Good
   - Fair
   - Poor
   a. Offer you a safe place to examine the wounds of your military service?
   b. Help you to understand the life of Saint Francis?
   c. Help you to see your military service as a Death to Re-Birth experience?
   d. Help you to examine your Return as one of servant leadership?

Comments? _________________________________________________________________________________________________________
_______________________________________________________________________________________________________________________

4. Which of the following elements of the retreat worked the best for you (mark all that apply)?
   - Personal time
   - Contemplative Time
   - Small Group Discussion/Large Group Exercise
   - Mass
   - Prayer Service/Tau Ceremony
   - Bond Fire/drumming
   - Counseling
   - Spiritual Direction
   - Exploring the Struggle Discussion
   - Death-to Rebirth/Letting Go/Picking Up Discussion
   - The Return Discussion
   - Other: ______________________________________________________

5. What elements did you find the most difficult (mark all that apply)?
   - Personal time
   - Contemplative Time
   - Small Group Discussion/Large Group Exercise
   - Mass
   - Prayer Service/Tau Ceremony
   - Bond Fire/drumming
   - Counseling
   - Spiritual Direction

Exhibit A. © Franciscan Renewal Center Retreat Evaluation Form, page 1
6. What contributed to the difficulty for you personally?

________________________________________________________________________________________
________________________________________________________________________________________

7. Did you utilize any of the following services?

☐ Counseling  ☐ Spiritual Direction  ☐ Consultation with a Priest

If so, did you find them helpful?  ☐ Yes  ☐ Mostly  ☐ Partly  ☐ Hardly at all  ☐ No

Comments? ____________________________________________________________
________________________________________________________________________________________

8. What was your most significant take-away from retreat? What will you walk away with as you return home?

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

9. How can we improve the retreat?

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

10. What additional services would be helpful to you?

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

THANK YOU FOR YOUR INPUT!
Fr. Conrad, Greg, Bill and the entire Retreat Team

Exhibit A Cont’d. © Franciscan Renewal Center Retreat Evaluation Form, page 2
8.15 from pre to post retreat scores. As this represents a very small sample size, data will be collected in future retreats to determine statistical significance across a larger pool of participants, and follow up data will be collected to determine if these scores hold over time.

**Funding Retreats**

Retreats are provided to veterans at the Casa cost of $180 per participant, for those able to pay. Partial and full scholarships are available and no veteran is turned away. The past two retreats included 95% scholarships, made possible through The Franciscan Renewal Centers’ fundraising outreach efforts with non-profit community based organizations, private donations and individual donors.

The retreat leadership team and supporting staff donate their time. Travel expenses are covered through funds raised. The Casa Veterans Ministry Members provide all support services including providing transportation for those participating, as many require this service.

---

**FLOURISHING SCALE**

©Copyright by Ed Diener and Robert Biswas-Diener, January 2009

Below are 8 statements with which you may agree or disagree. Using the 1–7 scale below, indicate your agreement with each item by indicating that response for each statement.

- 7 - Strongly agree
- 6 - Agree
- 5 - Slightly agree
- 4 - Neither agree nor disagree
- 3 - Slightly disagree
- 2 - Disagree
- 1 - Strongly disagree

____ I lead a purposeful and meaningful life
____ My social relationships are supportive and rewarding
____ I am engaged and interested in my daily activities
____ I actively contribute to the happiness and well-being of others
____ I am competent and capable in the activities that are important to me
____ I am a good person and live a good life
____ I am optimistic about my future
____ People respect me

**Scoring:**
Add the responses, varying from 1 to 7, for all eight items. The possible range of scores is from 8 (lowest possible) to 56 (highest PWB possible). A high score represents a person with many psychological resources and strengths.

*Exhibit B. Excerpted from Flourishing Scale*
The Future

A level II retreat has been developed, funded and will be delivered on Veterans Day weekend 2017. A Level I annual retreat is scheduled for March 2018. Future retreats will be scheduled pending funding and demand. The current evaluation format as well as the Flourishing Scale will continue to be used to evaluate participants’ outcomes.

Attendees at both the Healing of Memories Retreat and The Walking With St. Francis Retreat requested some type of follow up opportunity to continue their spiritual healing journey. Based on this request, a Spiritual Direction Group process has been developed. This Spiritual Direction Group will be piloted in late 2017. One group will be female veterans lead by a female Casa Spiritual Director and a female veteran; the other will be a male veterans group led by a male Casa spiritual director and a male veteran. Both groups will be limited to 5 veterans, with preference to those who have participated in the Casa’s Healing of Memories Retreats and the Walking with St. Francis Retreats.

The core work of spiritual healing in retreat models within the veteran community is relatively new, while the need for spiritual healing from traumatic war experiences is universal. We hope to collaborate with those who are doing research in healing from moral injury and spiritual growth to assist our efforts in providing and expanding our healing retreats, and in measuring our effectiveness and efficacy.

For further information, please contact lindalmacleish@cox.net.

References

About the Author

Linda MacLeish, LPC, E-RYT, is a licensed professional therapist and registered yoga teacher. Linda’s background includes working with fire, police and military personnel where she was involved in emergency medical systems, fire prevention and control, public fire safety and burn prevention education through the Delaware State Fire School. When she moved to Arizona in 1979, she founded LMJ Associates, a management and organizational business providing consultation and training to Fortune 500 companies, private sector businesses, governmental entities and nonprofit organizations. Linda holds a Master’s of Counseling degree from Arizona State University. She and others founded EAP Preferred in 1991, which is the second largest, locally based, employee assistance program in The Valley and Arizona. She has also served as adjunct faculty at the university and community college levels. Linda has a strong commitment to the integration of mind-body-spirit approaches into her trauma work. She has had extensive training and education in these areas. She is semi-retired and is a professional volunteer with the Franciscan Renewal Center, serving as a behavioral health resource for the Veterans Ministry and providing counseling through the Counseling Ministry.
Not a subscriber?

Have “Combat Stress” delivered to your inbox each quarter!

The American Institute of Stress
6387B Camp Bowie Blvd #334
Fort Worth, TX  76116
www.stress.org

info@stress.org
Main: (682)239-6823

The American Institute of Stress is a qualified 501(c)(3) tax-exempt organization.