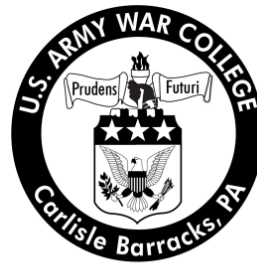


Strategy Research Project

Keeping Faith with our War-Torn: Rebuilding Broken Spirits

by

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United States Army War College
Class of 2012

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USAWC STRATEGY RESEARCH PROJECT

KEEPING FAITH WITH OUR WAR-TORN: REBUILDING BROKEN SPIRITS

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ABSTRACT

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The Wars in Iraq and Afghanistan have taken a tremendous toll on the bodies of our wounded warriors over the last decade. The wars have taken an even bigger toll on the spirits of our warriors. These broken spirits make it nearly impossible to come home and transition to successful lives in or out of uniform.

Many of our national leaders have made “keeping faith” with our wounded, ill, and injured service members a high priority. President Barack Obama, Secretary of Defense Leon Panetta, Army Chief of Staff Martin Dempsey, and Commandant of the Marine Corps James Amos have all used the term as a catch-phrase. Our national leadership should enact major comprehensive legislation focused on keeping faith with our warriors and their families. The Keeping Faith with Warriors Act should make a long term commitment to ensuring that our broken spirited warriors have the best chance for success in the future. The nation must bind together now to keep faith with our war-torn. If this is not done, the costs in terms of the nation’s treasure and human lives will be much higher over the long term.

**KEEPING FAITH WITH OUR WAR-TORN:
REBUILDING BROKEN SPIRITS**

... let us strive on to finish the work we are in; to bind up the nation's wounds; to care for him who shall have borne the battle.

– Abraham Lincoln¹

The Wars in Iraq and Afghanistan have taken a tremendous toll on the bodies of our wounded warriors over the last decade. The wars have taken an even bigger toll on the spirits of our warriors. These broken spirits make it very difficult to come home and transition to successful lives in or out of uniform. Treatment for these broken spirits is complicated, varied, and often ineffective. Our nation must bind together to heal the spiritual wounds of our warriors or they will not reach their potential and many will remain forever broken, dependent on the government or their communities for the rest of their lives. At the very least, many of them will display patterns of behavior that will alienate them from their communities or even their own loved ones.

This paper attempts to answer the question: How can we as a nation rebuild the broken spirits of our warriors so that they thrive in their futures and do not become effective wards of society? The problem of broken spirits is beyond the capacity of the medical community to solve. For any solutions to work, we must get beyond simply the diagnosis and treatment for Post Traumatic Stress Disorder.

This approach falls short, is often ineffective, and abrogates the nation's responsibility to a few medical professionals. Many national leaders have made

“keeping faith” with the wounded, ill, and injured service members a high priority. President Barack Obama, Michelle Obama, Former Secretary of Defense Robert Gates, Current Secretary Leon Panetta, Chairman of the Joint Chiefs Martin Dempsey, Army Chief of Staff Raymond Odierno, and Commandant of the Marine Corps James Amos have all made “keeping faith” with our service members and families a catch-phrase. A large part of keeping faith with them is to remain committed to them for a lifetime if that is what it takes to rebuild their spirits.

Spirit Defined

The word spirit conjures up many meanings to many different people. For the purpose of this paper, spirit is the non-physical part of a person that is the seat of emotions and character; the soul. There are many definitions for this word but the one above best describes what is so damaged in our wounded warriors. In *Achilles in Vietnam: Combat Trauma and the undoing of Character*, Jonathan Shay compares the experience of warriors in Homer’s classic, the Iliad, with the experiences of Vietnam Veterans he has treated as a psychiatrist.

Shay points out that Homer used the ancient Greek word *themis* to define moral order, convention, expectations, ethics, and commonly understood social values. There is no English word that translates *themis* well but wounded warriors’ understanding and belief in *themis* explains some of what is broken in them. Another author, Edward Tick writes extensively about warriors’ broken spirits in *War and the Soul*.² Like Shay, he relies on classic literature to describe the spirit and the soul and how it is damaged by combat trauma. He quotes Aristotle, Shakespeare, and Heraclites.

The Soul is at the center of human consciousness and experience. Yet we cannot see or measure soul directly. Rather we “see it feelingly” to use

Shakespeare's words from King Lear, we know soul through our experiences of its functions and traits. It is "the vaporization of which everything drives," said Heraclitus. It is not the body, explained Aristotle, but its originative principle. It is through the? soul that we experience our human uniqueness and spiritual depth.³

This unseen non-physical part of a person that is the seat of emotions and character is broken in many warriors. If the spirit is not repaired, there will be long term, even perhaps generational repercussions for our warriors, their families, and the nation.

Post-Traumatic Stress and Spirit

Post Traumatic Stress Disorder (PTSD) is commonly known as one of the signature wounds of the current wars. Along with traumatic brain injuries and severe depression, PTSD is the most commonly diagnosed wound of the last decade. It is estimated that as many as one in five have either symptoms of PTSD or major depression.⁴ This translates to well over three-hundred thousand veterans who may have broken spirits or spiritual wounds. Everybody who experiences combat, experiences combat operational stress.⁵ Most will have some issues with adjusting but will be fine after an adjustment period and go on to normal lives without significant issues related to their combat operational stress.

PTSD is a diagnosed medical condition. The standard reference for psychiatric professionals to use in diagnosing PTSD is the *American Psychiatric Association's, Diagnostic Manual for Mental Disorders*.⁶ Diagnostic criteria from the manual for PTSD include a history of exposure to a traumatic event meeting two criteria and symptoms from each of three symptom clusters. They are intrusive recollections, avoidant/numbing symptoms, and hyper-arousal symptoms. An additional criterion concerns duration of symptoms and another assesses functioning.

There are a variety of accepted treatments for PTSD including psychotherapy, medication, exposure therapy, and individual and group therapy. PTSD is very closely associated with the warrior's broken spirit. It is difficult to assess the effectiveness of the mental health treatment of wounded warriors. A mental health provider cannot x-ray the mind and spirit the way that an orthopedic surgeon can x-ray a broken bone. Although, one does not have to be diagnosed with PTSD to have a broken spirit, there is a growing realization among those that care for the wounded, that treatment must go beyond just the medical field and the whole person must be treated. The truth of the matter is that there is no cure for PTSD. There are only things that can help someone rebuild his or her spirit and manage the trauma experienced for the rest of their lives.

Post Traumatic Stress, Suicide, and Bad Behavior

The problems our country faces as a result of large numbers of veterans with unresolved post traumatic stress and broken spirits are alarming. A good indicator of the size of this problem is the very high number of service members and veterans that commit suicide or who are involved in violent crime including homicide. The statistics are scary. The Department of Veterans Affairs (VA) estimates that a veteran commits suicide every eighty minutes,⁷ while for active duty service members the rate is every thirty-six hours. .⁸

The total numbers are difficult to count as there is very limited data available after our warriors leave active duty.⁹ City and State governments do not necessarily report whether their suicide deaths are veterans. Compounding the problem of identifying the breadth of this problem is that there is no national system for keeping track of veterans who have mental health problems. Neither the Department of Defense (DOD) nor the

VA has much visibility on veterans after they leave the service unless they are registered with the VA. The Army and Marine Corps have had the most dramatic suicide numbers. This is no surprise as these two services have borne the brunt of the most extreme combat over the last decade. Army and Marine Corps suicide numbers rose sharply between 2006 and 2009 when some of the fiercest fighting was taking place in Iraq.¹⁰

Although evidence of a direct causal relationship between deployments and suicides is sometimes lacking, we cannot ignore the fact that suicide is a major problem and that more needs to be done to help warriors in need. Another potential related problem is that the actual health of the overall defense force could be affected by it. If suicide is associated with military service, we may ultimately experience recruiting problems as those who seek to serve turn elsewhere. Veterans are killing themselves at alarming and unprecedented rates and this problem will likely grow worse. As force structure continues to draw down after a decade of conflict, many more with combat trauma will leave active duty. Many will suffer mental health issues and perhaps commit suicide. As they leave the very institutions that give them a sense of belonging and meaning, the chances of them making the ultimate fatal choice is greatly increased.

One theory of why people commit suicide is the interpersonal psychological theory of suicide. The theory holds that there are three things that keep an individual from killing himself. They are belongingness, usefulness, and an aversion to pain or death.¹¹ The third factor is not much of an issue for many separating service members. They have experienced pain since they underwent entry level training in the services and many have gotten over their fear of death as they experienced combat. The first

two factors, belongingness and usefulness are often taken from them as they leave service and become unemployed or find themselves in pursuits that do not compare to the feelings of usefulness and belongingness that they experienced as part of the world's best and most relevant military.

Another major problem in our society related to our warriors' broken spirits is the rate at which crime in general and homicide in particular has risen among combat veterans. *The New York Times* ran a series of investigative reports on this issue in the winter of 2008. The series concluded that homicides by veterans of the wars in Iraq and Afghanistan had increased by 89 percent from 184 to 349 during the six years of war from 2001 to 2007.¹² Murders committed by combat veterans have made headlines over the last several years. The connection is almost always drawn to stress from combat deployments.

The relation of bad behavior to combat trauma is not new. According to Dr. Jonathan Shay, "The first thing that Odysseus did after he left Troy was to launch a pirate raid on Ismarus. Ending up in trouble with the law has always been a final common pathway for some portion of psychologically injured veterans."¹³ Warriors' broken spirits result in some very serious problems in society and we must find ways to mitigate them.

Existing Programs

There are a myriad of efforts to help the wounded heal their broken spirits. These efforts range from programs within the individual services to efforts that the medical community and non-profit organizations have originated. There are Veterans' Courts set up in several parts of the country to help ensure that the criminal justice

system understands some of the unique problems that combat veterans face. A recent Reuters' article, said that 46 veterans' courts have sprung up since 2008 in 20 states. There is what our former Chairman of the Joint Chiefs called a "Sea of Goodwill" throughout America. He released a white paper that reads:

Local, state, and federal governmental agencies, and hundreds of non-governmental organizations, institutions of higher learning, local community based organizations, and local businesses already provide many veterans and their families the inspiration, mentorship, resources, and focus to ensure success in post-Service life. Tying together the support offered by these organizations is the key concept of the Sea of Goodwill.¹⁴

In 2007 and 2008 respectively, the Marine Corps and Army began their own substantial efforts to ensure that wounded warriors were being cared for better than at any time in the Nation's history. The 2007 Walter Reed scandal may have been a motivating factor behind the services' great efforts although the Marine Corps' program had already started when the story broke. *The Washington Post* ran a series of articles beginning in February, 2007 that highlighted stories of wounded warriors being neglected at Walter Reed.¹⁵ The other services and United States Special Operations Command also began their own wounded warrior care programs. I will briefly discuss the Marine Corps and Army programs here as they are the two services with the greatest number of wounded.

The Marine Corps Program

The Marine Corps program grew from grass roots efforts at Camp Lejeune, NC and Camp Pendleton, CA. In 2006, then Commandant of the Marine Corps, General James Conway highlighted his vision for taking care of Marine wounded in his Commandant's planning guidance. The Wounded Warrior Regiment would stand up in

2007 with one Battalion in the East and one Battalion in the West to realize General Conway's vision of providing the absolute best support to the wounded. He would hand-pick post command commanders for each unit to "track and assist wounded Marines and Sailors."¹⁶

The Marine Corps effort evolved into a large organization with a myriad of staff, support, and facilities to support wounded Marines and Sailors wounded while attached to Marine units. The Marine Corps' Wounded Warrior Regiment now includes detachments at nearly every Marine Corps base and major Naval Medical Treatment Facility as well as at select VA Hospitals. The units boast great successes in getting wounded, ill, and injured the support they need. The Marine Corps approach has been to provide an atmosphere of cohesiveness where the wounded warriors live, work, and play together and provide common support. The Marine Corps' approach to holistic care aims to improve warriors' lives across five lines of operation: medical, mind, body, spirit, and family.¹⁷

Many of the wounded, ill, and injured Marines and Sailors are in these units for two years or longer.¹⁸ While getting treated medically, the Marines and Sailors spend the rest of their time working on their other lines of operation. They work towards goals that they have set for themselves mentally, physically, spiritually, and for their families. Many of these warriors are taking college courses or are in internships with federal agencies. Major Gary Zegley, Commanding Officer of the unit's Camp Pendleton Company of over 200 Marines and Sailors stated that the Battalion had 14 Marines in an internship with the Federal Bureau of Investigations. "These internships along with good physical fitness (within their limitations) and work on their other lines of operations

give our Marines a sense of meaning in their lives and hope for the future.”¹⁹

According to the Commanders of Marine Wounded Warrior units, their Marines are involved in several endeavors that help rebuild their damaged spirits. Adaptive sports programs focused on “abilities rather than disabilities,”²⁰ horseback riding, surfing, cycling, art, music, writing, fishing, hunting, yoga, meditation, and church activities are just a partial list of activities available to warriors in these units. There are also several programs in these units that are geared towards successful transition into careers outside of the military.

Programs involving animals get positive feedback from the Marines. Horses and dogs seem to be particularly good at helping rebuild trust and reduce the stress related to serving in combat. Several companion dog organizations, including Canine Companions International, have paired dogs with the wounded including PTSD diagnosed warriors. This has resulted in a warrior having a friend that he can count on to help him deal with his issues on a daily basis. Ivey Ranch in Oceanside, CA and the non-profit Semper Fi Fund have run programs in which warriors experiencing post traumatic stress have been helped by being around horses. Colonel John Mayer who commands the Marine Corps entire wounded warrior effort through Wounded Warrior Regiment is fond of saying that “the best thing for the inside of a person is the outside of a horse.”

The U.S. Army’s Program

The U.S. Army also has well developed programs for their wounded warriors that have grown tremendously since being established in 2008. The Army began with The Warrior Care and Transition Programs (WCTP) and now has included a Warrior

Transition Command to develop policy and provide oversight.²¹ The Army has cared for more than 36,000 Soldiers in these units in the last four years.²² 4,400 employees are dedicated to the effort. The Army estimates that approximately 50 percent of the warriors that are helped in these units will return to the operational forces. As of May, 2011, 9,973 recovering soldiers were assigned to 38 Warrior Transition Units (WTU) across the Army. This compares to 771 for the Marine Corps which uses different criteria for assignment to their wounded warrior units and also has smaller numbers of overall casualties.²³

Oversight and Assessment

The Marine Corps and Army wounded warrior programs have been in place for a few years and are getting increasing oversight from DOD and Congress to assess their effectiveness. In 2009, Congress directed the DOD to establish a task force called the Task Force on the Care, Management, and Transition of Recovering Wounded, Ill, and Injured Members of the Armed Forces.²⁴ The purpose was to assess the policies and programs set up by the DOD and services to assist wounded warriors. After conducting a thorough review of the programs (particularly of the Army and Marine Corps) including numerous site visits and interviews with recovering warriors, the first report of the Task Force was submitted to Congress in September, 2011. According to the report the Recovering Warrior Task Force (RWTF):

...found many excellent practices emerging from every level serving Recovering Warriors (RWs) from individual staff at installations to Service-level and Department-level Offices. The RWTF also noted several challenges, barriers, and opportunities for improvement of programs and policies and formulated recommendations to address them.²⁵

The DOD has continued to do a lot of work to improve care to the wounded. The RWTF

report and testimony of wounded warriors, indicate that these programs are of paramount importance (although they can stand improvement). The services continue to expand and improve their programs.

One major shortcoming in service programs is warrior access to mental health care. Despite superb programs to help warriors rebuild their spirits, timely mental health care is a concern. The RWTF report found that in some places it can take many weeks to be seen for Post Traumatic Stress issues, even for those in the specialized wounded warrior units. Those in line units who do not have all of the dedicated advocates available in wounded warrior units may have a hard time accessing mental health care. While there is no cure for PTSD, early identification and treatment gives the wounded warrior the best chance of managing his combat operational stress.

Despite the many great programs in place within the DOD, the needs of many are still simply not being met and they are leaving active duty by the thousands without the benefit of a diagnosis or any treatment. The services have done much to address the problem including implementing post deployment health surveys, suicide awareness campaigns, and efforts to rid their service of the stigma of seeking mental health. They have also hired more mental health providers. They have sought to attack the problem of broken spirits in a holistic manner in the wounded warrior units as discussed earlier in this paper. All of these efforts help but still fall well short of what is needed.

The US Department of Veterans Affairs Program

The VA is a huge organization charged with a very big mission. The sheer size of its customer and potential customer base is daunting. There are over twenty-five million veterans alive today and most have served during a time of war. Some 7.2 million of

those veterans are enrolled in the VA and about 5.5 million of them have received health care. 3.4 million of them receive other benefits. Since October 2001, about 1.6 million have served in Afghanistan or Iraq.²⁶ If the statistics for PTSD cited earlier in this paper are accurate, there are easily over three-hundred thousand veterans from current and recent wars suffering from Post Traumatic Stress.

Obstacles

Within the services, there are many obstacles that those with broken spirits face due to combat service. The services' cultures are part of the problem. Service members are trained to be mentally and physically tough and to withstand the rigors of the battlefield. Strength is revered and weakness abhorred. For active duty service members, there are obstacles in the administration of post deployment health assessments, the stigma of seeking care, ease of access to mental health care, access to wounded warrior units, medication management, and availability of mental health providers. The services should be lauded for their efforts in these areas, many of which have been noteworthy. Two reports cited earlier in this paper detail these obstacles well and my own experience commanding one of the Marine Corps' two wounded warrior battalions from 2008 to 2011 is generally consistent with the findings of the reports. *The DOD Recovering Warrior Task Force (RWTF) report*²⁷ of September 2011 and *the Center for New American Security report*²⁸ do a commendable job of highlighting the challenges that our wounded warriors face.

The military services make valiant attempts to ensure that warriors returning from combat are assessed for mental and physical health issues. The common tool used is the Post Deployment Health Assessment (PDHA). This assessment is given to warriors

upon returning from a combat theater and is re-administered within six months. It is common for a warrior to answer the questions dishonestly for various reasons. In some cases, the warrior is concerned that if he is identified as having mental health issues, he will be prevented from returning home to see his family. Career concerns and personal embarrassment are factors in this as well. In one study conducted with Army warriors in 2008, the respondents in an anonymous survey were four times more likely to report depression, PTSD, suicidal thoughts, and a desire for treatment than on the PDHA.²⁹

Senior leaders have put an emphasis on reducing the stigma associated with seeking and receiving mental health. Admiral Mullen³⁰ and the service chiefs have all put an emphasis on ridding the services of this stigma and creating service cultures that encourage seeking help for combat operational stress issues. Some still see it as a weakness when one seeks mental health treatment. The great warrior mentality that exists in the fighting forces is ironically contributing to this adverse effect.

Access to wounded warrior units is another issue. The considerable resources focused on those in the Marine Corps Wounded Warrior Battalions and the Army's Warrior Transition Units are far above what is available to those in regular line units. The Marine Corps has generally been more selective about who is allowed entry into these special units and much discretion is left to the Commanders of the Wounded Warrior Battalions.³¹ In one site visit the RWTF indicated that only about 10 percent of those qualified were actually transferred from their line units to the Wounded Warrior Battalion.³² Although the Army has many more wounded warrior units and many more members of those units than does the Marine Corps, entry into the units is inconsistent.³³ This is a critical issue because relatively good access to care exists in the

Marine Corps and Army wounded warrior units; however, many who need the care are not fortunate enough to be assigned to those units.

Treatment for Post Traumatic Stress often includes the prescription of heavy medications. This is generally helpful but sometimes disastrous. Medications are often not managed well and warriors often have access to too many of them. The problem is exacerbated when a warrior “self medicates with alcohol”. The CNAS report cited earlier indicates that about 14 percent of the Army is on a prescription opiate; almost half of accidental or undetermined Army deaths from 2006 to 2009 were caused by alcohol or drug toxicity; and almost a third of Army suicides from 2005 and 2010 included drug or alcohol use.³⁴ An additional problem in this area is that substance abuse and alcohol dependency are not often treated simultaneously with post traumatic stress and very little professional literature even exists on the topic.³⁵ Too many medications and the widespread abuse of alcohol are significant barriers to the pursuit of good mental health by warriors suffering from combat operational stress issues.

The final barrier that I will mention is the nation-wide shortage of mental health providers. Although, I have argued that a broken spirit must be treated with a holistic mind, body, and spirit approach, our warriors and veterans need access to good mental care. There is a significant shortage of those who can provide them quality care. The Army is short on mental health professionals and its positions are only filled at 80 percent for psychiatrists and 88 percent for behavioral health nurses and social workers. The Navy which provides the medical care for the Marine Corps has similar shortages. The VA has opened 232 Veterans Centers³⁶ around the country that have helped tremendously with the Veteran population. This is a nice start but falls well short of the

need.

The majority of the barriers listed above are for active-duty service members. After departing the services, many veterans face even larger barriers. Post traumatic stress issues often have a late onset and when combined with the stress of transition, possible unemployment, readjusting to family, and loss of belonging and purpose result in a veteran who has been cast adrift in a confusing world. It is difficult to locate and help these veterans.

Responsibility

The Departments of Defense and Veterans Affairs are responsible for caring for warriors on active duty and afterwards respectively. The problem of broken spirits however is too big for the government to handle alone. Therefore, the entire country must take responsibility. Tying together the Sea of Goodwill that Admiral Mullen advocated is just what is needed.³⁷ This problem will take a long-term commitment and national acceptance of both the responsibility and the reality that the problem will never be totally resolved. Taking care of our broken spirited warriors is a national responsibility.

Involved Citizens

The Sea of Goodwill that Admiral Mullen described includes an involved and committed nation. This Sea of Goodwill is indeed there and will be necessary to give our broken spirited warriors a chance at success. All of the components of this sea should be part of the holistic approach to healing their spirits. There are a multitude of individuals and organizations that are willing and able to help. I have personally witnessed several grass roots or organizational efforts that have been outstanding at

helping to heal the spirits of our warriors. I will highlight a few of them here.

Major General Tom Jones, USMC (retired) runs a weeklong camp in the mountains of Pennsylvania for transitioning wounded warriors. The camp is called Outdoor Odyssey and when the camp is in session specifically for wounded warriors, it is referred to as Semper Fi Odyssey.³⁸ During the course of this camp, which has increasingly focused on warriors with post-traumatic stress, the attendees are challenged to set life goals in mental, emotional, physical, and emotional areas.³⁹

They are challenged to continue to serve in some way and to be “givers rather than takers.” Each four person group is assigned a mentor who promises to keep in touch with each warrior and monitor their progress for the foreseeable future. The focus on the total person, accountability, and being a giver resonates well with the warriors. It is difficult to measure the success of such an effort. However, the author has heard many positive testimonies from attendees who entered the week-long program with poor attitudes towards their futures and left with a new attitude towards bright futures. Efforts like this administered with “genuine concern” by those who serve our wounded are very promising.

Other programs that show tremendous potential in helping to heal broken spirited warriors involve getting them back into physical fitness and recreational activity. There is a growing body of evidence on the connection between physical activity and sound mental health.⁴⁰ Adaptive sports programs have grown tremendously and greatly aided in the healing and positive outlook of our wounded. In August of 2012, the Army, Marine Corps, Navy, Air Force, and a few allied countries will send representatives to Colorado Springs for the Third Warrior Games. Recovering warriors will compete in 10

sports at the U.S. Olympic Training Center and the U.S. Air Force Academy. The environment at this competition was absolutely electric for the first two years. Participants' injuries range from double amputations to PTSD. Many of these warriors have had their spirits broken. When one observes these games, there is little sign of any broken spirits as warriors challenge themselves and each other to be their best in an atmosphere of unprecedented sportsmanship and motivation.⁴¹

Sports such as surfing, fly-fishing, hunting, cycling, triathlon, competitive sports, and just good physical fitness programs can all contribute to warriors' healing and success. One surfing program in Southern California has done particularly well in helping heal our warriors. Jim and Nancy Miller founded the Jimmy Miller Foundation in honor of their late son Jimmy who received tremendous healing for his mental health issues through surfing before ultimately dying at his own hands.⁴² The foundation holds surfing sessions coupled with group therapy discussions for wounded Marines at Camp Pendleton and for Veterans from the Los Angeles Veterans Hospital. Professional surfers such as perennial world champion Kelly Slater have been known to show up at the sessions. The compassion and professional attitudes of the professional surfers and lifeguards who mentor the participants is inspiring and the program gets rave reviews from those who attend regularly.

Eastern Sierra Disabled Sports is another noteworthy community effort that helps warriors in the area of adaptive sports.⁴³ The organization brings much of the community of Mammoth Lakes, California together to host wounded warriors and their families for a week of fun adventure in a mountain environment. Both summer and winter events are held and broken spirited warriors often begin rebuilding their spirits by

getting a sense of the possibilities in their futures as they participate in sports such as skiing, snow-boarding, riding snow-mobiles horse-back riding, and fly-fishing. The focus on abilities vice disabilities of these and many other great organizations are great for the spirits of warriors. The problem is that a relatively small portion of our recovering warrior population has access to them.

Conclusions and Recommendations

If the nation is serious about keeping faith with its war-torn, it must put its resources and efforts where its priorities are. The nation must renew its commitments to its warriors and veterans.

The national leadership should enact major comprehensive legislation focused on keeping faith with warriors and their families. The Keeping Faith with Warriors Act should make a long term commitment to ensuring that broken spirited warriors have the best chance for success in the future. This legislation should be large and lasting and be on par with the National Security Act of 1947 and the Goldwater Nichols Act of 1986 in terms of significance. The comprehensive act should ensure that areas of employment, health care, education, care-giver support, and recreation and fitness are organized and well resourced. Rather than just a federal government effort, the legislation should include provisions to encourage community support such as grants for adaptive sports organizations and veterans' service organizations that meet criteria that the legislation established.

The VA should be the primary administrator of the legislation, but instead of growing the organization, it should focus on empowering community organizations, non-profits, and veterans' service organizations. The VA should use modern business

practices to ensure efficiency and should continue to raise the reputation of the organization as the executive agent for keeping the faith with the nation's warriors. The VA's 239 Veteran's Centers should be the conduits for organizing the existing "Sea of Goodwill" that already exists.

The VA and DOD should work together immediately to continue to ensure that there is a "warm handoff" from active duty to veteran status and that our combat warriors are all followed up with annually for ten years after leaving active duty. The purpose of this would be to ensure that those who did not need care when they left but required it later are identified and given the help that they need. The Keeping Faith with Warriors Act should mandate the holistic treatment of our warriors. The services would lead this effort for active duty members and the VA would lead for veterans. Quality energetic leaders must be appointed to our VA veterans' centers. They must be capable of organizing and leading the change required to incorporate the Sea of Goodwill.

Any new jobs arising from the legislation should go to veterans. This paper did not address the very high unemployment among veterans but this would help with that problem too. *Veterans Helping Veterans* should be a catch-phrase. A program similar to Troops to Teachers or Troops to Truckers should be started to fill the ranks of the mental health community and resolve the shortage of mental health professionals.

The service chiefs must continue their effort to ensure access to care for the wounded and particularly those with combat operational stress issues. They must continue efforts to take the stigma out of seeking help and improve suicide prevention, medication management, access to wounded warrior units, and the shortage of mental health professionals. Veterans trust veterans and trust is paramount when helping one

to heal a broken spirit.

Veterans' courts should be established across the country to ensure that veterans who commit crimes are treated with understanding and if appropriate vectored towards help rather than incarceration.

The nation must bind together now to keep faith with its war-torn. If this is not done the costs in terms of the nation's treasure and human lives will be much higher over the long term.

Endnotes

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³⁸ Semper Fi or Semper Fidelis is Latin for ever faithful and is the motto of the United States Marine Corps. The non-profit Semper Fi Fund provides funding for wounded warriors to attend the transition camp near Boswell, PA. This is information known to by the author due to personal first- hand experience.

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