

Framing Services for Empowerment and Destigmatization

A Colorado-based organization called ONE Freedom has been offering some innovative services to returning veterans and service members preparing for deployment, all designed to empower and reduce stigmatization. ONE Freedom offers returning veterans and their families “meaningful education and training on prolonged stress, trauma and personal, self-managed skill-sets for maintaining *strength after service*.” Their education and training programs “re-frame the way warriors and family members experience stress, and provide a normalizing look at why and how we are changed by our experiences and what we can do to positively move forward” (www.onefreedom.org).

In an interview, ONE Freedom Consultant (and veteran) Steve Robinson offered a number of the organization’s ideas and options for framing and shaping the therapeutic process:

- Frame and speak of ideas and practices in terms of training rather than therapy. Service Members “train up” before deployment, so now it is time to “train down” to function effectively in civilian life. This immediately normalizes and destigmatizes both their presenting conditions and the therapeutic process.
- Use a performance optimization model, like the model used in the military. The veteran seeking therapy may be admitting what the military culture defines as a weakness. But the veteran seeking training is becoming a better representative of the Armed Forces by optimizing performance in the home environment, and the peace environment.
- Frame the skills and insights gained as “resources,” a term compatible with the military culture. Help the veteran identify and gain access to resources, within him/herself, within the family, within the community, within the military and veterans’ community, and within the nation.
- ONE Freedom uses the terms “combat brain” or “survival brain” to identify the amygdala’s action in triggering the sympathetic and parasympathetic stress chemicals. The task of “training down,” then, is to down-regulate the combat brain. You are also providing post-combat stress-management training.
- Speak in terms of understanding the brain and the body. Speak of regulating the autonomic nervous system, helping restore it to balance, homeostasis, resiliency, and normal functioning.
- Rather than speaking of the trauma that veterans have experienced, frame these as “intense life experiences.” You are helping them learn better ways of negotiating their present and past experiences—and better ways of identifying and maintaining the boundary between the two.
- The word “balance” is a non-stigmatizing one that has many uses, including a balanced stress system, balanced energy levels, balanced emotional energy, balance in terms of habits (e.g., drugs, alcohol), and balance in sleep cycles
- You may already use the metaphor of becoming an observer of one’s own thoughts and emotions. This is particularly crucial with veterans who have post-deployment stress effects, because of the suddenness and savagery with which the amygdala’s unconscious feelings and memories will intrude on the present and distort people’s thoughts, words, and actions.
- Avoiding all judgmental words is a good idea. If, for example, a veteran describes an outburst with a family member, it is better to avoid the question of whether his or her words or actions were “good” or “bad.” Instead, the question might be, “Was this choice helpful or not helpful?”
- When a client becomes more comfortable with trauma terminology, it can be gradually introduced. But you will still want to take care to help reframe it from the “defective soldier” model to something that reflects both the realities of the human stress system and the honor of the individual veteran.
- In this collaborative educational process, it is important to remember that the clinician does not “hand the solution to the veteran.” Instead, you negotiate together to work toward a solution, once you both understand the options.

ONE Freedom has developed these approaches based on work with large numbers of returning veterans and pre-deployment Service Members. According to Robinson, they have found that these approaches fit in well with the military culture and promote greater engagement even among people who would be inclined to avoid anything that looks or sounds like “therapy.”