

The American Institute of Stress

# COMBAT STRESS

*Harnessing Post-Traumatic Stress for Service Members, Veterans, and First Responders*

Volume 10 Number 4

Winter 2021-2022



## Music, Writing and Service Dogs *Comfort and Healing All Around US*

Inside: **Music & Traumatic Stress: Music Therapy Research and Treatment with Military Populations** *By Julie Garrison*

- **The Healing Process of Music Therapy: The Use of Therapeutic Song Writing with a Veteran** *By Sarah M. Miller*
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**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.**

# COMBAT STRESS

We value opinions of our readers.

Please feel free to contact us with any comments, suggestions or inquiries. Email: [editor@stress.org](mailto:editor@stress.org)

**C**ombat Stress magazine is written with our military Service Members, Veterans, first responders, and their families in mind. We want all of our members and guests to find contentment in their lives by learning about stress management and finding what works best for each of them. Stress is unavoidable and comes in many shapes and sizes. It can even be considered a part of who we are. Being in a state of peaceful happiness may seem like a lofty goal but harnessing your stress in a positive way makes it obtainable. Serving in the military or being a police officer, firefighter or paramedic brings unique challenges and some extraordinarily bad days. The American Institute of Stress is dedicated to helping you, our Heroes and their families, cope with and heal your mind and body from the stress associated with your careers and sacrifices.

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The American Institute of Stress is a 501c3 non-profit organization, headquartered in Weatherford, Texas. We serve the global community through both online and in-person programs and classes. The Institute is dedicated to advancing understanding of the role of stress in health and illness, the nature and importance of mind/body relationships and how to use our vast innate potential for self-healing. Our paramount goal at the AIS is to provide a clearinghouse of stress related information to the general public, physicians, health professionals and lay individuals interested in exploring the multitudinous and varied effects of stress on our health and quality of life.

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**T**his Winter 2021-2022 issue of *Combat Stress* has been in preparation during the tragic, chaotic pullout of American troops, United States' citizens and ambassadors, and Afghan citizens following the United States' twenty-year commitment in Afghanistan to root out al-Qaeda and the Taliban; this in order to build a nation of democracy and peace.

We cannot yet measure the mental health consequences on our Service Members and Veterans who valiantly sacrificed years of their lives in support of this mission, while watching the humiliation of our country and our military. Nor can we measure the consequences on U.S. and Afghan citizens who remain stranded in Afghanistan, in fear for their lives and livelihoods and abandoned by broken promises. The mental health community has already assisted millions of Veterans who struggle with post-traumatic stress, moral injury, and the physical injuries of their military service. We now face assisting not only our Service Members and Veterans, but the refugees airlifted and the troops who participated in and witnessed horrific conditions during the pullout.

This issue is dedicated to each of the Service Members still in uniform and all Veterans who served in Afghanistan and Iraq. It offers a message of hope for healing from trauma, be that from physical, spiritual, cognitive, and/or emotional wounds. In this issue, we focus on these avenues of support and healing:

- The expressive arts, with an emphasis on music therapy and songwriting; and
- The lifesaving and relationship saving impact of therapy dogs.

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### **Music therapy, music experiences, and the expressive arts.**

It has been several years since *Combat Stress* has featured the expressive arts as

healing interventions (see January 2016 issue). At that time, our issue, edited by Combat Veteran Travis Martin PhD and me, highlighted grassroots efforts by Veterans for Veterans. This included writing, movement/dance, drama, art, and music. Since then, and included in this issue, there has been an explosion of sorts in the Veteran community in the world of music. These fall into three categories:

**Music therapy for Veterans.** Music therapy requires formal academic and clinical training, as well as certification. Music therapists have worked with Veterans and other populations for decades, providing the balm of sound, rhythm, song, and individual and group music-making as a means to process and express their service-related traumas, reconnect with others, and move forward.

In this issue, we present three extraordinary contributions to the field of music therapy with Veterans, two by music therapists and a third by a combat Veteran who is studying to become a music therapist.

In our first article, **Julie Garrison**, Music Therapist, summarizes the neurological research findings on the impact of music therapy with traumatized research adults, demonstrating positive outcomes for Veterans at the National Intrepid Center, and recent expansion of Department of Defense programs integrating music therapy into treatment protocols.



Next, we move to music therapy offered within some Veterans Administration Medical Centers. **Sarah Miller**, Music Therapist, provides an overview of music therapy and a moving example of the healing power of songwriting and singing by a Veteran, 25 years after his war trauma.

This is followed by the remarkable journey of **Mark Sauza**, a Combat Marine Veteran who charts his story from military service to PTSD with suicidal ideation, to his initial experience as a music therapy patient, to his current pursuit of his music therapy degree, with the goal of serving other Veterans through music therapy. There cannot be a more powerful testament to the power of music therapy. These three articles stand as testimonials for the critical need for music therapists within every military medical center and Veterans Administration Medical Center, in addition to the absolute need to expand music therapy training programs to meet this need.

**Nonprofits offering musical experiences for Veterans.** These include national and local opportunities, including songwriting, guitar playing, singing, bands, and other musical genres. For the most part, these are offered to Veterans by Veterans. A comprehensive list of music engagement experiences for Veterans can be found on the nonprofit Operation We Are Here (<https://www.operationwearehere.com/musictherapy.html>), which offers a treasure trove of many resources for Veterans and their families, including the making of and listening to music.

I refer to these nonprofit organizations as grassroots efforts. They include 1:1 musical instruction, songwriting, choral groups and

bands, and retreats focusing on the healing power of music. These efforts have been largely driven by Combat Veterans for almost two decades, expanding nationally in the absence of Veterans' limited access to music therapy. Examples include:

- Guitars for Vets ([www.guitars4vets.org](http://www.guitars4vets.org)), which has provided more than 5000 guitars and lessons to Veterans, matching Veterans with instructors for local and online lessons in music-making.
- Operation Song ([www.operation-song.org](http://www.operation-song.org)), which matches professional musicians to work 1:1 and in groups with Veterans of all eras around the nation. This was founded in 2012 by musician Bob Regan in Tennessee.
- Combat Veteran Jason Moon's non-profit Warrior Songs ([www.warriorsongs.org](http://www.warriorsongs.org)) offers Veterans small group immersive experiences in workshops and retreats to write one's story in the presence of other Veterans, then putting it to music, and recording it.

Our article by **Connie Baptiste**, USAF Veteran, speaks to the power of her writing and recording her own song with Jason Moon's Warrior Songs nonprofit. Her article also poignantly illustrates the Moral Injuries inflicted on Non-Combat Veterans during their service, with an emphasis on women of color and their need for healing, along with those who have been traumatized in combat.

Veteran musicians working as professionals in the music industry across all genres of music. Some Veterans have used music as a healing intervention for themselves and now write and produce music specifically for other Veterans to heal. One example is "Doc" Todd, who found healing in his rap lyrics and music (beginning

with his first album *Combat Medicine*) and now encourages other Veterans to do the same. Professional Musician Veterans have expanded their music beyond reflecting on their military experiences to other themes/issues, and/or have embraced music for its entertainment value and as a source of income. Still others are Veterans with no military-related trauma, but have talent, passion, and skills to compete successfully in the music industry. United States Veterans Artists Alliance (USVAA), based in Los Angeles and led by Veteran Keith Jeffreys, is an example of a national network of professional Veteran artists representing and promoting all genres of the arts ([www.usvaa.org](http://www.usvaa.org)).

### ***The Expressive Arts: Writing and Art.***

Music is only one of the many expressive arts in which Veterans process their traumas. In our final article on healing through the expressive arts, **Michelle Dallocchio**, a Veteran and an accomplished expressive artist, as well as a clinical social worker, illustrates (literally and figuratively) the path on which every Veteran can begin his or her journey toward healing through the expressive arts. In a masterfully crafted integration of Joseph Campbell's *Heroes' Journey*, she guides readers through a stepwise process of identifying and writing (a part of) their story in three stages. Dallocchio's article not only gives us a template to initiate this process (with or without clinical assistance), but also provides us with beautiful visual illustrations using her own artwork.

Each of these articles illustrates the power in healing through music, writing, and the expressive arts. Across cultures and backgrounds, each of us has been exposed to the arts and can learn to access them for

our own healing, restoration, and creation of moments of joy and release.

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## **The Lifesaving Impact of Service Dogs for Veterans with PTSD.**

This issue also has the privilege of including two major voices. Vicki Topaz and Mary Cortani, who are making tremendous contributions in the field of service dogs for Veterans with PTSD and other service-related mental health issues

The first article by **Vicki Topaz** describes a soon to be released extraordinary documentary. *DOG WALK HOME*, which follows three Veterans who obtain service dogs for their respective military-related traumas. Each of these Veterans allowed Vicki and her filmmaking team to follow them through their journeys with their service dogs, to document the powerful relationship between Veteran and service dog, and to demonstrate the healing power of each dog in each Veteran's life and family relationships. This film will be released in early 2022, with the goal of sharing the possibility of service dog access to many Veterans who are in need, as well as informing the public of this valuable and powerful relationship. Of note, we mourn the passing of the film's Director and Cinematographer, Wynn Padula, who died unexpectedly during filming. *DOG WALK HOME* is thus a testament to his service on behalf of our Veterans and to the resilience of the film's team to continue the work to fruition. We at *Combat Stress* encourage readers not only to read about the film, but to request it in your local theaters in 2022.

The second article by **Mary Cortani**, Veteran and service dog provider/trainer, gives

readers an outstanding description of the process of training service dogs, matching each dog to a Veteran, and the rationale for service dogs for Veterans with mental health needs. Mary started Operation Freedom Paws over a decade ago and is one of the premier service dog trainers/providers in the United States.

The timing of our highlighting their voices coincides with the upcoming 2022 release of DOG WALK HOME, a major documentary produced by Topaz and her colleagues, and two major breakthroughs in Veteran access to service dogs:

- Funding by Congress of service dogs to Veterans with mental health issues- a long awaited expansion of services which has previously been limited to Veterans with physical injuries (<https://www.rollcall.com/2021/08/09/congress-unleashes-service-dogs-for-veterans-with-ptsd/>); and
- The Veteran Administration's recent completion of a long-term study of the differences between service dogs and support dogs, which concluded that service dogs offer significantly more assistance and reduction of mental health symptoms than support dogs (<https://www.prnewswire.com/news-releases/va-study-shows-service-dogs-impact-veterans-with-ptsd-canine-companions-applauds-expansion-of-va-insurance-benefits-for-veterans-301249154.html>).

Together, these finally pave the way for funding and access to service dogs for Veterans with mental health issues who have desperately needed support dogs to assist them in their daily functioning and recovery from traumatic stress, anxiety, depression, and other mental health issues. These have left

them isolated and fearful of community, and in many cases family interactions.

On behalf of the Editors of *Combat Stress* and AIS, we extend our blessings to all Service Members, Veterans, their families, our contributing authors, and our readers as we close out this year.

Guest Editor,  
Christiane O'Hara, PhD, FAIS

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# THE COST OF STRESS.

*The more we learn, the more vital our mission becomes.*

*The American Institute of Stress is the only organization in the world solely created and dedicated to study the science of stress and the advancement of innovative and scientifically based stress management techniques. AIS provides the latest evidence-based knowledge, research and management techniques for stress and stress-related disorders.*

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## Groundbreaking insights and approaches. World-changing mission.

Hans Selye, MD, PhD (1907-1982), is known as the father of stress research. In the 1920s, Selye coined the term “stress” in the context of explaining his pioneering research into



the signs and symptoms of disease curiously common in the majority of people who were ill, regardless of the diagnoses. Selye’s concept of stress was revolutionary then, and it has only grown in significance in the century since he

began his work. Founded in 1978 at Dr. Selye’s request, the American Institute of Stress (AIS) continues his legacy of advancing the understanding of stress and its enormous

impacts on health and well-being worldwide, both on an individual and societal level.

A forthcoming AIS initiative – called **Engage. Empower. Educate.** – will leverage the latest research, tools and best practices for managing stress to make a difference in a world increasingly impacted by the effects of stress out of control. We hope you will consider supporting this critical outreach campaign.



[Click to view The American Institute of Stress Case Statement](#)

# A campaign to Engage. Empower. Educate.

The AIS campaign will support three key initiatives:

## Engage communities through public outreach



Improve the health and well-being of our communities and the world by serving as a nonprofit clearinghouse for information on all stress-related subjects.

The American Institute of Stress produces and disseminates a significant amount of evidence-based information, but there is a need to share this material with a wider audience in the U.S. and around the world.

Support for this initiative will provide funding to expand the organization's public outreach for its website and social media, documentary films, magazines, podcasts, blogs and courses.

## Empower professionals through best practices



Establish credentials, best practices, and standards of excellence for stress management and fostering intellectual discovery among scientists, healthcare professionals, medical practitioners and others in related fields.

AIS provides DAIS (Diplomate, AIS) and FAIS (Fellow, AIS) credentials for qualified healthcare professionals.

The AIS seal means a practitioner has training and experience in stress management and access to the latest stress research and techniques. It designates their practices as advanced treatment centers for stress-related illnesses.

Support for this initiative will provide funding to continually update best practices in the field.

## Educate all through the development and dissemination of evidence-based information



Develop and provide information, training and techniques for use in education, research, clinical care and the workplace. Some of the research-based information AIS develops and disseminates includes:

- Productions – Mismatched: Your Brain Under Stress, a six-part documentary featuring some of the world's leading experts on stress. Released in March 2021.
- Publications – *Contentment* magazine and *Combat Stress* magazine for service members, veterans and first responders.
- Podcasts, webinars and website resources – The free podcast series Finding Contentment



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# Music & Traumatic Stress: *Music Therapy Research and Treatment with Military Populations*

By Julie Garrison, MA, MT-BC, Neurologic Music Therapy-Fellow

Since antiquity, music has been synonymous with healing. However, it was not until World War II that the efficacy of music used in clinical settings with United States (U.S.) Veterans showed promise. The U.S. Military Health care System acknowledged the value of music interventions with military populations rehabilitating from prolonged stress and trauma. The 1945 U.S. War War Technical Bulletin, "Music in Reconditioning in Army Service Forces

Convalescent and General Hospitals"<sup>1</sup> recognized that medical treatment alone was not enough to assist injured troops,<sup>2</sup> as music intervention caused "group cohesion, release of emotions, and esprit de corps."<sup>1</sup> Successful outcomes of music interventions with injured service members led to the development of the music therapy profession. Music therapy is the evidence-based use of music within a therapeutic relationship to help a client improve quality of life.<sup>3</sup>

Music therapists facilitate music interventions including improvising, recreating, composing, and active and receptive listening to music, within the therapeutic process. This can occur with or without verbal processing<sup>4</sup> and addresses the needs of individuals across the lifespan. Music therapists' practice with at least a bachelor's in music therapy<sup>5</sup> and accomplishment of the credential Music-Therapist, Board-Certified (MT-BC) through completion of an accredited internship and passing the National Certification Board exam.<sup>6</sup>

Prolonged stress can cause anger, anxiety, depression, withdrawal, avoidance, hypervigilance, negative thoughts about self and/or others, isolation, and grief among other symptoms interfering in daily functioning. Music therapists work towards non-musical treatment goals and outcomes of improving attention to the present, self, and sensations; building resilience, strengthening relationships, supporting community re-integration, nurturing

self-expression, improving emotional regulation, fostering identity, and promoting personal growth.<sup>34</sup>

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## Neurologic Based Music Therapy Models

Music therapists use a neurologic based approach that integrates trauma-informed music therapy within a neurologic music therapy (NMT) model with clients experiencing traumatic stress, including Veterans, Active-Duty Service Members (SMs), and First Responders.

The Trauma-Informed Music Therapy Model uses a body-centered "bottom-up" approach to address the trauma-recovery model in six stages.<sup>17</sup> Bottom-up approaches first focus on sensations, reflexes, and autonomic responses at the brainstem, then move upwards to access and modulate emotional expression within the limbic system, finally accessing cognitive processing tasks of speaking, thinking, and emotional and self-awareness in areas located in the prefrontal cortex.

"Top-down" approaches begin with cognitive processing then move towards autonomic responses. The NMT model of MT uses standardized, research-based clinical interventions grounded in brain-based rationale for how music elements drive changes in the brain and brain connections. These interventions address specific sensorimotor, cognitive, and speech, and





language presentations of neurological disease and impairment, including neurologic changes caused by prolonged stress.<sup>10</sup>

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## **Neurologic Implications of Posttraumatic Stress Disorder (PTSD) and Music Therapy Research**

**S**o how does music “heal”? Music characteristics can affect breath, arousal, and movement in the autonomic nervous system (ANS); modulate emotions, access memories in the limbic system; and influence cognitive functioning in the prefrontal cortex (PFC) by activating and deactivating regions of the brain.<sup>7,8,9,10</sup> These regions are those that are implicated in the trauma & stress response.<sup>11</sup> The brain stem mediates physiologic responses, which, during a trauma response, affect the ANS<sup>12</sup> through changes in heart-rate variability and hyper- and hypo-arousal and the startle reflex.

Element of music such as dynamics (e.g., volume, tempo) and timbre (e.g., tone) affect startle reflexes, which can alert impending danger. These responses are enhanced in clients diagnosed with PTSD and linked to trauma exposure due to connection with the amygdala.<sup>13</sup> Researchers found that group music therapy assists in auditory arousal reduction through building tolerance of musical instruments' sound qualities, and learning how to tolerate, communicate, and acknowledge the impact of their instruments on others, leading to a reduction of PTSD symptoms.<sup>14</sup> Music elements such as rhythm and tempo can regulate a dysregulated ANS caused by prolonged stress.<sup>15</sup> Rhythm can bypass higher cognitive functions such as cognitive processing or emotional regulation, which may be unavailable to those who have experienced complex trauma.<sup>16</sup>

Music therapists modulate dynamics, rhythm, and tempo, and choose instruments of specific timbres to create safety and stability,



promote self-regulation and grounding<sup>17</sup> to regulate arousal, and increase parasympathetic and decrease sympathetic tone in the ANS.

Researchers found sympathetic ANS deactivated within a single session of music improvisation<sup>18</sup> and music listening, noting improvements in symptoms of fatigue-sleep, anxiety & depression.<sup>19</sup> A critical interpretive synthesis of research by McFerran, et al.<sup>16</sup> found regular, repetitive rhythms positively influence ANS and have been found to reduce negative PTSD

symptoms. Research by Hakvoort<sup>20</sup> found that rhythm-based intervention, singing, and psychoeducation helped regulate arousal by decreasing PTSD symptoms of re-experiencing, activation, and avoidance within

a group NMT music therapy protocol. Music therapists incorporate rhythm-based interventions and singing, as part of a bottom-up approach and NMT approach to create safety and stabilization by fostering predictability, calm, and pleasure within the music, and self-regulation to improve symptom management.<sup>17</sup>

*The limbic system, which is responsible for emotional regulation, undergoes dysregulation when exposed to prolonged stress. However, music-based experiences can activate and deactivate limbic structures, influencing and changing activity in nearly all brain structures implicated in emotional control.<sup>7,9,21</sup> A systematic review on the neurologic effects of music*

*The limbic system, which is responsible for emotional regulation, undergoes dysregulation when exposed to prolonged stress.*

found that the amygdala activates in response to threat, including music that is unexpected or complex, yet deactivates when music is perceived to be pleasurable,<sup>7</sup> and during music improvisation.<sup>12,22</sup> Emotions evoked by music can be exceedingly intense.<sup>9</sup> Carr et al.<sup>14</sup> found that music improvisation, within group music therapy, significantly reduced PTSD symptoms of avoidance, hyperarousal, and re-experiencing. To access emotions and memories that are difficult to articulate, music therapists incorporate

improvisation and songwriting, with or without reference to specific events. This promotes the integration of emotional expression, identity, reconnection, restoration as part of a trauma-informed model in music therapy.<sup>17</sup> Additionally,

music therapists structure music interventions to promote reconnection, restoration, self-care & maintenance of learned coping skills, reconnection with others, and positive personal resources in music therapy through cognitive means.<sup>17</sup>

*The prefrontal cortex (PFC) region manages high cognitive functioning, including inhibitory control, attention, goal-directed behaviors, planning, and executive functioning, yet are compromised in PTSD.<sup>23</sup> Music improvisation deactivates the dorsolateral PFC (dlPFC), a region responsible for cognitive functions such as attention, working memory, maintaining abstract rules, and self-control,<sup>24</sup>*

problem solving, and goal-directed behavior. Yet, during music improvisation, the frontal polar portion of the medial prefrontal cortex (mPFC), the region responsible for internally motivated behavior, self-expression,<sup>12, 22, 25</sup> and retrieval of long-term memories<sup>25</sup> is activated.<sup>22</sup> By engaging in the creative process of music improvisation and composition/songwriting, focused attention and self-monitoring are deactivated (dlPFC) and pathways to access autobiographical memories and associated emotional content are activated (mPFC).<sup>22</sup>

Hakvoort et al.<sup>20</sup> found improvements in sustained attention in adults diagnosed with PTSD using an NMT intervention, Music Attention Control Training, to regulate arousal by changing the tempo activates or deactivates the stress response, which addressed self-regulation skills. The growing body of neurologic-informed music therapy research with traumatized adults supports the U.S. Army's recognition in 1945, even without the brain-based measures that are now available, that music therapy could help Veterans heal from war trauma.

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## Therapy in Music Therapy

**H**ow does music cause change? Music can be traumatizing if offered without intention,

purpose, and understanding.<sup>26, 27</sup> During trauma processing, the Broca's area of the brain, which is responsible for putting thoughts, feelings, and memories into words, shows a decrease in activity.<sup>28</sup> Music can bypass the verbal processing of the brain and provides direct access to emotions and memories stored in the limbic system. Therefore, it is not surprising that research suggests that people engaged

in a therapeutic relationship are more open to sharing their stressful symptoms.<sup>16, 18, 20, 29</sup>

For this reason, music therapists use the therapeutic process, practice within psychotherapeutic frameworks, and understand the neural mechanisms of music processing and production.

Moreover, the neurologic foundations of music production and perception aids in the clinical decision-making process of music therapists in selecting and implementing music-based experiences to address the clinical needs within music therapy sessions. This knowledge informs how music characteristics are delivered to activate specific neural regions to address needs within the moment. In addition, music therapists deliver music interventions within specific theoretical orientations, as this influence when music and verbal processing occur in the treatment of specific PTSD

*Music therapists use the therapeutic process, practice within psychotherapeutic frameworks, and understand the neural mechanisms of music processing and production.*



symptoms and associated needs of depression and anxiety.<sup>19,30</sup>

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## Music Therapy Research with Military Populations

**R**esearch on music therapy with military populations found drumming,<sup>31,32</sup> improvisation on multiple instruments, deep breathing, and singing,<sup>20,33,34</sup> provide grounding, safety, and stabilization at the onset of sessions to promote presence and prepare for emotional expression of uncomfortable feelings and/or processing of traumatic events<sup>26,33</sup> on self-selected instruments.<sup>17</sup>

Emotional expression through drumming allows for rage and release through the somatic experience of playing loud dynamics,<sup>26</sup>

regaining a sense of control through spontaneous creativity of more complex rhythms,<sup>26</sup> and improvising uncomfortable emotions that surface.<sup>33</sup> Songwriting provides space to voice fragmented aspects of self, identity, and unpack personal narratives within the songwriting process.<sup>35</sup> Music therapists assist songwriters to affirm or construct identity and integrate musical styles congruent with their musical identity to reconnect with their socio-cultural identity.<sup>36</sup> Performance of music allows for reconnections with the community as a mechanism of growth and agency within

the recovery process through the expression of personal narrative to others,<sup>16</sup> and validating expression of inner-self while feeling connected to the audience.<sup>37</sup>

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## Clinical Programs

### **Department of Veterans Affairs (VA)**

Music therapists function as part of interdisciplinary teams and delivery therapy in inpatient, outpatient, and home-based settings via telehealth settings.<sup>38,39</sup> In addition,

music therapists throughout the VA healthcare system implement evidence-based practices in the treatment of Veterans recovering from service-related injuries.<sup>38</sup> Treatment outcomes for Veterans receiving care at VA Medical Centers (VAMCs) indicate that music therapy

*Music therapists throughout the VA healthcare system implement evidence-based practices in the treatment of Veterans recovering from service-related injuries.<sup>38</sup>*

can enhance the quality of life and improve functioning,<sup>31</sup> decrease pain, anxiety, and depression,<sup>39</sup> improve self-regulation when faced with difficult emotions,<sup>33</sup> reduce symptom clusters of PTSD, and promote functional rehabilitation.<sup>30</sup>

The number of MT-BCs employed in VAMCs across the U.S is growing as programming continues to standardize. In 2019, the VA reported 73 music therapists working in 49 VA Medical Centers.<sup>31</sup> To request a music therapy referral, ask your primary care provider, case manager, or interdisciplinary team members.



If there is no music therapist on staff, obtain a music therapy referral and contact the Patient Advocate to identify an MT-BC through the Community Care Network of Providers.<sup>44</sup>

*The Creative Forces®: NEA Military Healing Arts Network* is an initiative of the National Endowment for the Arts in partnership with the U.S. Departments of Defense and Veterans Affairs. Creative Forces supports telehealth efforts that connect music therapists with Veterans in rural and remote places.<sup>43</sup> Veterans receiving care at the VAMCs listed below are eligible to seek a referral for music therapy services, many of which offer telehealth.

Creative Forces clinical sites offering telehealth to Veterans receiving care at these VA Medical Centers, in alphabetical order by state.

- James A. Haley Veterans' Hospital, Tampa, FL
- North Florida/South Georgia Veterans Health System, Gainesville, FL
- Richard L. Roudebush VA Medical Center, Indianapolis, IN
- Carl A. Nunziato VA Clinic, Youngstown, OH
- G.V. Sonny Montgomery VAMC, Jackson, MS

**Department of Defense (DoD)**

The DoD added music therapy to the four-week intensive outpatient program at the National Intrepid Center of Excellence (NICoE) at Walter Reed National Military Medical Center (WRNMMC)

for active duty Service Members (SMs) in 2012.<sup>34</sup> Music therapists at the NICoE assist in identifying existential and often internalized feelings/emotions, and in externalizing existential trauma to address goals of emotional regulation.<sup>40</sup> This interdisciplinary model of care combines traditional rehabilitation therapies with integrative medicine, including music therapy, art therapy, and dance/movement therapy. A study of Active-Duty SMs in this program confirmed statistically significant and clinically meaningful improvements in a range of symptoms.<sup>40</sup>

This model has expanded to Intrepid Spirit Centers (ISCs) within military treatment facilities throughout the U.S. Within each ISC, music therapy is positioned as a standard of care,<sup>41</sup> incorporating music therapy protocols within individual and group sessions<sup>34,42</sup> that address specific needs of SMs related to traumatic brain injury, psychological stress, and trauma.

Creative Forces supports music therapy services at ISCs and military treatment facilities, as listed below.<sup>43</sup>

- Joint Base Elmendorf-Richardson (JBER), Anchorage AK
- National Intrepid Center of Excellence (NICoE) at Walter Reed, Bethesda, MD
- Marine Corps Base Camp Lejeune, Jacksonville, NC

- Fort Hood, TX
- Fort Belvoir, VA
- Warrior Recovery Center, Fort Caron, CO

## Music Therapy Agencies and Nonprofits Serving Military Populations and First Responders

**S**M and Veterans who do not have access to DoD or VA music therapy programs have an alternative in community-based programs, often initiated by Veterans, that provide opportunities for music engagement. Since many Veterans now serve as First Responders, and many First Responders (Veteran or civilian) have similar trauma symptoms paralleling SMs

and Service Members, it is only fitting that these nonprofit services expand to meet both groups' needs. Music therapy nonprofits that provide treatment to Veterans, Active-Duty SMs, and First Responders, are listed below.

**Challenge America** (<https://www.challengeamerica.com/music-therapy>)

Challenge America offers weekend music therapy retreats, focusing on PTSD treatment with Active Duty SMs and Veterans throughout the country. Retreats are facilitated by a board-certified music therapist who partners with local songwriters so each participant can create an original song. Click the link for upcoming retreats.

Produced by The American Institute of Stress

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**Metro Music Therapy** (Atlanta, GA) <https://metromusictherapyga.com/atlanta/mt-with-veterans/>

Metro Music Therapy provides in-person and telehealth music therapy services for Active-Duty SMs and Veterans with PTSD, traumatic brain injury, military sexual trauma, and other military service-related traumas. Metro Music Therapy partners with local and national Veterans organizations to increase access to music therapy services to Veterans in Atlanta, GA.

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**Music Therapy of the Rockies** (<https://musictherapyoftherockies.org/programs/music-therapy-retreats/>)

Music Therapy of the Rockies (Roaring Fork Valley, CO) offers weekend music therapy retreats throughout the country to address the symptoms of PTSD, at no cost to Veterans and Active Duty SMs. The retreats focus on the neurologic aspect of PTSD with the goal of making lifelong changes and reduce suicidality. Retreats are facilitated by a board-certified music therapist who partners with local songwriters so each participant can create an original song. Click the link for upcoming retreats.

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**Resounding Joy** (<https://resoundingjoyinc.org/music-therapy-for-all/>)

Community Connections, based in San Diego, CA, provides music programs to first responders to manage stress.

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**Semper Sounds Military Music Therapy** (<https://resoundingjoyinc.org/semper-sound/>)

Semper Sounds Program (San Diego, CA and Chelsea, MA) provides individual and group music therapy services at military bases and

Veteran facilities. It offers bi-weekly drumming, songwriting, and jam sessions to Veterans and Active Duty SMs stationed at, or living near San Diego, CA., and The Soldiers' Home Chelsea, MA.

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**Valor Therapeutics** (Dayton, OH) (<https://valortherapeutics.org/index.html>)

Valor Therapeutics (Dayton, OH) offers music therapy and art therapy individual and group sessions at no cost to Veterans, Active Duty SMs, First Responders, and Military Families. Valor Therapeutics aims to reduce symptoms of PTSD and improve the emotional, cognitive, and psychological health of our nation's defenders residing in and around Dayton, OH.

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**Music Nonprofits Serving Military Populations**

Community-based music programs, often initiated by Veterans, that provide opportunities for music engagement for Veterans and Active Duty SMs are listed on Operation We Are Here (<https://www.operationwearehere.com/musictherapy.html>).

## How to Make a Music Therapy Referral

**B**oard-Certified Music therapists are trained healthcare providers who assess and treat psychological, behavioral, emotional, cognitive, and interpersonal factors using music. A background in music is not necessary to benefit from music therapy. To make a referral, contact your primary care manager, behavioral/mental health provider, the patient advocate at the VA through the Community Care Network, or contact the Certification Board for Music Therapists at [www.CBMT.org](http://www.CBMT.org) to find a music therapist near you. If you would like to

learn more about music therapy, contact the American Music Therapy Association at [www.MusicTherapy.org](http://www.MusicTherapy.org).

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## ABOUT THE AUTHOR

**Julie Edgell Garrison, MA, MT-BC,** Neurologic Music Therapy-Fellow earned a BA in Music Therapy from Eastern Michigan University, MI; MA in Music Therapy from Saint Mary-of-the-Woods College, IN, and completed advanced training in Neurologic Music Therapy. In 2012, she had the privilege of serving Active Duty Service Members and Veterans at the National Intrepid Center of Excellence (NICoE) at Walter Reed National Military Medical Center at Bethesda Naval Station in Bethesda, MD, through a partnership between the National Endowment of the Arts and the Department of Defense. At WRNMMC, Julie established clinical music therapy services in mental health and traumatic brain injury outpatient clinics and inpatient wards. As part of the NICoE behavioral health team, Julie provided group, individual, couples, and family music therapy sessions to Active Duty and Combat Veterans diagnosed with mild traumatic brain injury and associated psychological health needs to facilitate a relaxation response, emotional regulation, emotional expression, and increase familial relationships using music improvisation, active listening, songwriting, and drumming. Julie and her husband, a retired combat veteran of OIF/OEF, reside in Dayton, OH, with their children and Luke, Ryan's service dog. They established Valor Therapeutics to bring creative arts therapies (music therapy and art therapy) to the Military population, First Responders, and families living there. As a music therapy clinician with over 15 years of clinical experience, she incorporates neurologic music therapy and trauma-informed music therapy models in her holistic practice, focusing on how the therapeutic relationship is established and augmented through music. Julie firmly believes the art of creativity is fundamental in creating a healthy future.



# The Healing Process of Music Therapy: The Use of Therapeutic Song Writing with a Veteran

By Sarah M. Miller, MT-BC

In 1996 in Saudi Arabia, a truck bomb was detonated near the building being used as living quarters for coalition forces. One Service Member assigned with his team to support the defense of the no-fly zone, was three buildings away from the explosion that day. He since describes the event as “confusing and chaotic. Dust and debris were everywhere. Broken glass. Dismembered bodies. The wounded calling for help. People yelling from every direction.” This event changed

everything for him. The shock, panic, fear, and anxiety. The guilt. Up all hours of the night, trouble sleeping. The marital disconnect. Continuously feeling unsafe. The excessive consumption of alcohol as his numbing comfort of choice. In the commentary described in this article, this Veteran’s thoughts, feelings, and behaviors were to continue for the next twenty-five years, during which he has been admitted to in-patient care numerous times.

In my work as a Board-Certified Music Therapist serving Veterans, this scenario is all too common.

One traumatic event can alter a person’s capacity to relax, maintain inner peace, access joy, or find

pleasure, satisfaction, and meaning in life. When I (the Therapist in this case) started working with Veterans in January 2021 at a Veterans Affairs Medical Center in Ohio, Music Therapy was new to the unit. The Veteran described had no prior knowledge of or experience with Music Therapy and was referred for treatment of his post-traumatic stress disorder, depression, and anxiety. He agreed to participate in individual and group Music Therapy.

*One traumatic event can alter a person’s capacity to relax, maintain inner peace, access joy, or find pleasure, satisfaction, and meaning in life.*

## What is Music Therapy?

Music Therapy has been defined as “the systematic process of intervention wherein the Therapist helps the client to promote health, using music experiences and the relationships that develop through them as dynamic forces of change.”<sup>1</sup> Music Therapy is known for its holistic approach using the CAMES Model,

which integrates Communication, Academic/cognitive, Motor, Emotional, and Social areas to assess, set goals, and design treatment plans for clients.<sup>2</sup>

When working with adults, especially Veterans who have medical and mental

health conditions, a Psychodynamic Model is often used. Psychodynamic Therapy involves the interpretation of mental and emotional processes rather than focusing on behavior.<sup>3</sup> Psychodynamic Music Therapy proposes that with music-assisted interventions, individuals can become aware of their inner states and can communicate these through performed musical expression. From a psychoanalytic viewpoint, music portrays meaning and gives the individual



the experience of being mirrored, accompanied, and therefore feeling personally understood.<sup>4</sup> Given a variety of musical opportunities for self-reflection and self-examination, Music Therapy clients can identify their psycho-emotional states quickly, gaining a better awareness of who they are, how they feel, and why.

### Music Therapy Methods

There are four Music Therapy methods used as core interventions:

1. Improvisatory, which can be a vocal or instrumental improvisation and can be presented as a solo or as a co-improvisation with a group.
2. Re-Creative, such as song discussion/lyric analysis, or music supported art media such as music and art experiences or a movement to music intervention.
3. Composition/Song Writing (described below.)
4. Receptive, also known as song re-creation, which is individualized or a stylized group vocal or instrumental performance of a preferred song.<sup>5</sup>

### Therapeutic Song Writing Within Treatment

Therapeutic Song Writing is the process of creating, notating, and recording lyrics

and music by a client and Therapist within a therapeutic relationship to address psychosocial, emotional, cognitive, and communication needs of the client. In Therapeutic Song Writing, the Therapist purposefully engages the songwriter (the client) in a creative process whereby (s)he crafts a song that has personal meaning and simultaneously leads him/her through a journal of personal discovery. The song that an individual

creates becomes a tangible record of his/her journey or representation of his/her transformed state or the expressed desire to be transformed.<sup>6</sup>

The Veteran described here is a male in his fifties with approximately twenty-seven years of service. He met for individual Music Therapy once a week with the Therapist for one hour for eight consecutive weeks, while also attending group Music Therapy once a week

for forty-five-minute sessions. As the Veteran and I got to know each other and develop rapport during our weekly sessions, he journaled often, typically carrying around a notebook and pen. He appeared to take notes of conversations and social interactions within a variety of settings around the unit. Because of his observed comfort with writing, Composition (Song Writing) was selected for our individual sessions.

*In Therapeutic Song Writing, the Therapist purposefully engages the songwriter (the client) in a creative process whereby (s)he crafts a song that has personal meaning and simultaneously leads him/her through a journal of personal discovery.*

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## Finding the Voice Within

The Veteran's first step in his Song Writing process was to journal about whatever he wanted to journal about, knowing these thoughts/ideas would eventually be put to song. The assignment was deliberately open and general. He was instructed to think about a message or theme he might want to communicate to others who would hear the song. After three weeks of journaling, we met for our weekly session and began constructing his reflections into three verses and a chorus. His lyrics were points of reference for our discussion, which ultimately led to his sharing the details and impact of his traumatic experience in Saudi Arabia from twenty-five years ago. His post-traumatic stress, depression, anxiety, fear, and alcohol abuse were all topics of discussion during the Song Writing process. His song, however, is written about being placed in an in-patient unit that isolated him from visitors during COVID-19. So instead, he chose to write about how he was going to use his time within the unit to grow as a person and overcome areas he felt he needed to work on. As we talked about his trauma issues, he was able to connect the dots, e.g., identify the triggers that take him back to his war trauma, and why alcohol has been a way to avoid his pain. He did not want to feel his deep grief and face the memories of the explosion's impact on a score of Service Members who were killed, hundreds who were wounded, and many more family members who were affected; alcohol was his method of numbing painful memories.

Once the lyrics were written and their therapeutic implications discussed, he was

presented with choices for musical structure, tone, mood, and instrumentation. First, I played chord progressions using major chords, and then played darker and more contemplative minor chords. He chose the minor progression with a slower tempo and developed a melody for the verses and chorus. A soundscape (or sound vocabulary) of instruments was also presented for the Veteran to choose primary instruments for the song and other accompanying instruments to be used throughout. He chose the guitar as the primary instrument and the keyboard to accompany it.

When those foundational musical decisions were finalized, I played and sang his song on the guitar for him.

-----  
*I came from the shadows, dark into the light of  
grey,  
evaluate surroundings, hope for a brighter day.  
I'm learning to overcome all our past mistakes,  
conquering our struggles, build for another day.  
We want to take the time and smell the roses,  
we want to see our personal growth, the dirt and  
the rain  
although we don't like it supports who we become.  
Time is not all our own, I miss the way I feel when  
I'm around you,  
let's enjoy the brighter day.  
We want to take the time and smell the roses,  
we want to see our personal growth, the dirt and  
the rain  
although we don't like it supports who we become.  
We become the inspiration.*

-----  
As the song ended, tears streamed down his face and he said, "You bring the release of pent-up emotion and depression. In my mind that makes you a hero. You are an inspiration." This

moment served as a testament to his resonating in the healing power of music and the process of Song Writing in working through deep trauma.

I asked the Veteran what his thoughts were on the Song Writing process. He responded, "Song Writing is a release of energy to help myself and help others understand and see inside my mind. My mind goes to a creative process, and I don't think about the bombing at all. My mind is usually like a child in a playpen and all I want is to get out of the playpen. Song Writing was what took me out of the playpen, and I learned it is ok to have joy. I do not have to hold up those deep emotions like anger and take it out on others. Music took me to the other place—a place of relaxation and excitement. It is very emotional, and I cried when writing my song and when I heard the finished song, and I don't feel bad about it. Being vulnerable is good."

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### **Connecting Veterans: Group Music Therapy**

**W**e discussed the benefits of sharing this song with others on the unit. The Veteran particularly wanted his close friends to hear it. He hoped they would feel encouraged and be inspired to try something like this too. He chose egg shakers, the cabasa, and claves as additional percussion instruments to incorporate as accompanying instruments for his comrades to play. He asked his close friends and others on the unit to play along with him as the song was performed during group Music Therapy as the Therapist lead and sang the song. The Therapist recorded the song on the guitar the day prior and played it back through a Bluetooth speaker the day of group Music Therapy and played the keyboard and sang the song live while all the Veterans played along using their percussion instrument of choice.

What had started as an individual therapeutic experience emerged into a group shared experience. Veterans in the group each had the opportunity to share how they feel about being an in-patient on the unit and what it has been like for them not being able to see family and friends in-person due to COVID-19. They were also able to identify how they want to use their time on site and discussed long term goals for themselves. Using the Veteran Songwriter's original song (and other Music Therapy interventions over time), the group began discussing the traumatic events they each experienced over the years and how those memories have robbed them of joy and hope. Positive coping skills and relaxation techniques were discussed as well as suggestions to try leisure activities that may boost mood and improve their quality time.

As a result of these discussions, some Veterans requested piano (keyboard) and guitar lessons and set new goals for themselves in other Therapies. For example, one Veteran from group Music Therapy set the goal to walk again with the assistance and help found in Physical Therapy. His first goal is to walk with the help of a walker and then he decided to set the long-term goal to walk independently one day. While trauma deadened their joy and silenced some voices, Music Therapy has sparked their readiness to look within, allow themselves to feel and acknowledge their hurt and sorrow, and reclaim some of their inner light. Ultimately, music has helped them move forward on their path of healing.

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### **Growth Through Music**

**A**bout a month following the Song Writing experience, the Veteran had the opportunity to share his original song in a video recorded by Public Affairs within the VA which was emailed to



*Sarah Miller, Vocalist & Instrumentalist; Rob Schumann, Instrumentalist & Production*

staff and posted on the facility's Facebook page. The Veteran is still an in-patient and continuing with weekly individual and group Music Therapy and has offered to assist the Therapist during sessions however needed. He has taken a leadership role, including walking room to room to invite other Veterans to attend group Music Therapy; passing out and collecting instruments during sessions, hanging visuals on the wall, pushing his wheelchair-bound comrades to their rooms or to another area when group is over, etc. He has recently opted to learn piano (using a keyboard) and has starting sight-reading beginner music.

This experience has been a great confidence builder for this Veteran. It was something he did not think he could do and is currently

making musical progress at every session. He is determined to develop a variety of skill sets and has even expressed an interest in learning guitar. He is slowly overcoming his anxiety, depression, and atypical sleep schedules. The more therapeutic discussion that is processed between him and the Music Therapist either in individual or group Music Therapy, the more intentional and observable changes are being made and applied to his day-to-day routine. He has even expressed during group Music Therapy recently that he doesn't want to be an alcoholic. He hasn't had alcohol in eight months while being an in-patient. He is looking forward and has set goals to connect with friends and loved ones and make healthy changes so that he no longer will need in-patient care. Although it may

take more time, he is determined to hit a “reset” button on his life. He is learning the importance to care for himself and be the best possible person for his loved ones and one day soon thrive within his community.

If one person can make this kind of progress after twenty-five years, any Veteran has potential to tap into his or her musical capacity and be inspired to do whatever it takes to be the best possible version of themselves.

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### Additional Information

If you would like to learn more about Music Therapy, please visit the following website which explains Music Therapy in detail, how to find a Music Therapist, and settings in which Music Therapists can work: American Music Therapy

Association | American Music Therapy Association (AMTA). If you would like more information about Music Therapy with Veterans, please view: Music Therapy in Military Populations and NEA Military Healing Arts Network.

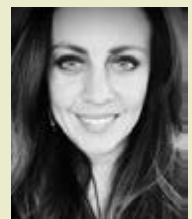
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## ABOUT THE AUTHOR

**Sarah M. Miller** grew up in Maumee, Ohio and graduated Cum Laude from Baldwin Wallace University in Cleveland, Ohio. Sarah received her bachelor’s degree in Music Therapy and then completed her Music Therapy internship in Pennsylvania. She has been working as a Board-Certified Music Therapist since 2003 and serving a variety of populations throughout Ohio and working in the Greater Dayton Area since 2009. She serves as a Supervising Music Therapist for Undergraduate Music Therapy students at the University of Dayton, Department of Music. She also serves Miami Valley Music Therapy llc as a District Music Therapist for Beavercreek City School’s Special Education Department working with students who have a variety of special needs. She has started her own private practice entitled, Composing Minds Music Therapy llc and serves Greene and Montgomery Counties working for families and facilities with children and adults who have a variety of special needs as well as working with Veterans who have medical and mental health conditions. Please feel free to reach out and connect with Sarah via email at [BlueLavaOoze@yahoo.com](mailto:BlueLavaOoze@yahoo.com) or find her on LinkedIn at: [www.linkedin.com/in/musictherapistmiller](http://www.linkedin.com/in/musictherapistmiller).





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# Warrior to Healer: Combat Marine to Music Therapist

By Mark Sauza, USMC (Ret)

One of the most difficult decisions of my military career was coming to terms with Combat Stress. From that unforgettable moment at boot camp when we step on our infamous yellow footprints, we are ingrained with an ethos of Esprit de' Corps, a sense of invincibility, and an adapt and overcome mindset. Learning the history of our fallen brothers fighting bloody battles on foreign beachheads, being dubbed the President's

Own, or just simply being called a "Jarhead" lifted my head and pumped my chest with the utmost of respect.

I thought to myself, "Marines are tougher than this, I am tougher than this!" Then how and why did I get here? How did I get on my office couch, laying here, staring at the ceiling, numb to the world? Literally, not giving a \$h!+ about anyone or anything around me. A loud unintrusive knock on my door eventually sits me upright, I take a deep breath, hands on knees, stand up, and slide behind my desk and shout... "Come in!"

---

## Coping with and identifying Combat Stress

What happened to the motivation and hustle that got me through 19 years of sacrifice? I was exhausted with helping others with "their" problems, I didn't want to be at work, I didn't want to be at home, wasn't sleeping, was abusing alcohol. I was a toxic mess. Then I began to wonder if that very hustle got me to where I was that day. Sure, I could look around and see numerous thank you and job well-done plaques and accolades on the walls. But what was it all for? I was divorced, struggling to maintain a relationship with my children, all my relationships (family or social), were or had fallen apart. I was ineffective as a Marine leader, was alone, and lacked purpose.

I struggled with Combat Stress while on Active Duty for 14 years. I took a common path

and masked my internal fires, thinking to myself that I had everything under control. I did what I had to and kept my head down. My performance at work was mediocre at best. In the spring of 2017, I had a serious bout with a .40 caliber Smith & Wesson and some suicidal ideations. A desperate phone call to a long-time Marine Brother of mine truly saved my life, I am forever indebted to him. Love you, Brother!

It was that very phone call that pushed me to own my mental health and take control of my alcoholism. While still on Active Duty, I openly expressed my struggles with Combat Stress to my Commanding Officer. Thankfully he was more than understanding and gave me the confidence to proceed with treatment. I no longer cared about the negative stigma associated with my mental health conditions. I proceeded to explore and take advantage of every program the military had to offer. This encompassed both Army and Navy PTSD/Substance Abuse, In-patient/Out-patient, Group Therapy, and Residential treatment facilities.

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## Clinical Treatment

I approached my Combat Stress treatment from every angle possible. I first established a good rapport with a primary Psychologist and Psychiatrist on base. This took a few attempts, but I did find the right doctors. As we all know, it is not easy to talk to someone





about personal matters. The most difficult part is giving someone you barely know the key to your very own pandora's box. I engaged in multiple group therapy sessions and Inpatient/Outpatient clinics. This was undoubtedly the toughest part of my journey. The unpacking of pandora's box is brutal. As you open the box, you pull back the black satin sheet only to realize this large box is filled with a hundred smaller boxes. Every counseling session, whether it be one-on-one or group, pulled out another little black box to open and prepare for an ensuing battle.

For this exact reason, I quickly became averse to Group Therapy sessions. Group Therapy sessions work, hands down, so I am not discounting them. I experienced professional programs that ran effectively and efficiently on both Army and Marine Corps/Navy Installations. My distaste for "group" is the inherent collateral damage group members take on when hearing another's tragic story or situation. This damage happens to other members of the group, whether it be crossfire or adjacent; it does not matter, someone gets hit. As I listened to the group members tell their stories, I would slowly drift into a trance. Trying to stay engaged in a group session after hearing another's story (unfortunately or fortunately, depending on how

you look at it) would remind me of a difficult experience from my past, an experience I may not have been ready to confront.

Having walked this road, I wondered if there must be an alternative controlled descent. These black boxes cannot just be shut when opened. Once they are open, they are wide open, especially when kicked open (listening to another's story that triggers a memory). Every box may be as important as the next, simply because of the unknown content.

Now let us compound this emotional rollercoaster with pharmaceuticals. At this point, my doctors and I were still navigating our way through the tricky waters of SNRI's/SSRI's to treat my conditions. Dosages were slowly increased, but the problem was having to wait 2-4 weeks, sometimes longer, to see if there was a positive or negative effect. Having run the gamut of SNRI/SSRI cocktails, I will say this. They work for some, not so much for others, and the side effects from ALL of them are real, very real. So real the adverse side effects of SNRI's practically annihilate testosterone levels and cease any kind of sexual activity. This is devastating to alpha personality types. "Now I have to take this "Blue" pill because I take those other meds? Roger that Doc, whatever we have to do to get this \$h!+ show rolling again."

I was ambushed by the disarray of my past memories before me. My mind kicked into hyperdrive: reliving, smelling, feeling those same emotions, sights, and sounds from over a decade ago. However, my medications were stuck in 1st gear as I waited out the exposure period.

Something needed to stop the demons in my head, and it needed to stop them now! ATTENTION: Stage left entrance: Mr. Alcohol.

Due to low dosages and exposure periods, I quickly turned to another source of “medication.” Fueling a family history of substance abuse, I rapidly spiraled out of control. I was not the type of alcoholic that needed a drink upon waking, nor was I that alcoholic that drank at work. Instead, I was the guy that couldn’t stop once started, full throttle or no throttle. My consumption rate would either end in passing out, blacking out, or running out (drinking myself sober). Over the years I have burnt many bridges due to my alcoholism. To all of those bridge owners, I openly and sympathetically apologize to you now! I feel the combination of the unpacked boxes, low medication dosages, and high levels of alcohol brewed the perfect storm for me that spring night of 2017, the night I called my dear friend.

I took a lot of information away from my Inpatient/Outpatient programs and felt they were extremely beneficial. However, clinicians must be

particularly careful while treating and medicating Service Members and Veterans. These clients need to be prepared mentally and physically for their healing journeys and determining combat Veterans’ readiness to face demons can be extremely difficult. Developing rapport and trust with patience and compassion opens dialogue and encourages communication. Clinicians need to use our education, experiences, and clinical gut to determine each patient’s next step. If

we listen closely, our patients will tell us when they are ready.

After completing a few different Army programs at Inpatient/Outpatient clinics. I turned to a nearby Marine Corps installation to see what they had to offer for treatment. Again, I was greeted with professionalism and respect. My counselor

was a retired Navy Sailor. Who better to counsel Marines and Sailors than an old salt dog sailor troublemaker (at least that is what I gathered from his stories)? He was sincere and genuine, and I liked that. After a handful of counseling sessions, he invited me to speak to his younger Marines who were enrolled in command-directed substance abuse programs. I was reluctant at first but quickly realized the benefit of my presence. It felt good to help Marines again.

In May of 2017, the Navy counselor recommended a Residential Behavioral Health Clinic in South Florida to me. “Fancy word for

*Trying to stay engaged in a group session after hearing another’s story would remind me of a difficult experience from my past, an experience I may not have been ready to confront.*



rehab,” I cracked at him. He knew what I needed. He knew I was not going to fully open up unless I had someone’s attention 24/7. He was right: I feared getting anywhere near those black boxes. Here I would be treated for both Combat Stress and alcoholism, plus be under constant supervision. I was all in.

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## Discovery of Music Therapy

A couple of weeks into residential treatment I noticed “Expressive Therapy” listed on the daily schedule pinned to the wall next to the nurse’s station. Prior to this, I had not heard of “Music Therapy” in a clinical sense. I was politely educated by one of the staff nurses that “A Music Therapist (MT) would come in and play music for us.” Other than that, she was not sure what our time would entail. I thought it was an intriguing idea but did not know what to expect.

Looking back, I can now identify two different techniques utilized by our MT: Lyrical Song Analysis with recorded music, and Improvisation with Songwriting. After our session, I asked the Music Therapist some quick questions about her profession. The following week she handed me a packet of information about the Music Therapy Degree along with a list of schools that offered the program. I thanked her for the information

and honestly put the idea on the back burner. Music Therapy was an interesting thought, but I really did not see how it pertained to me.

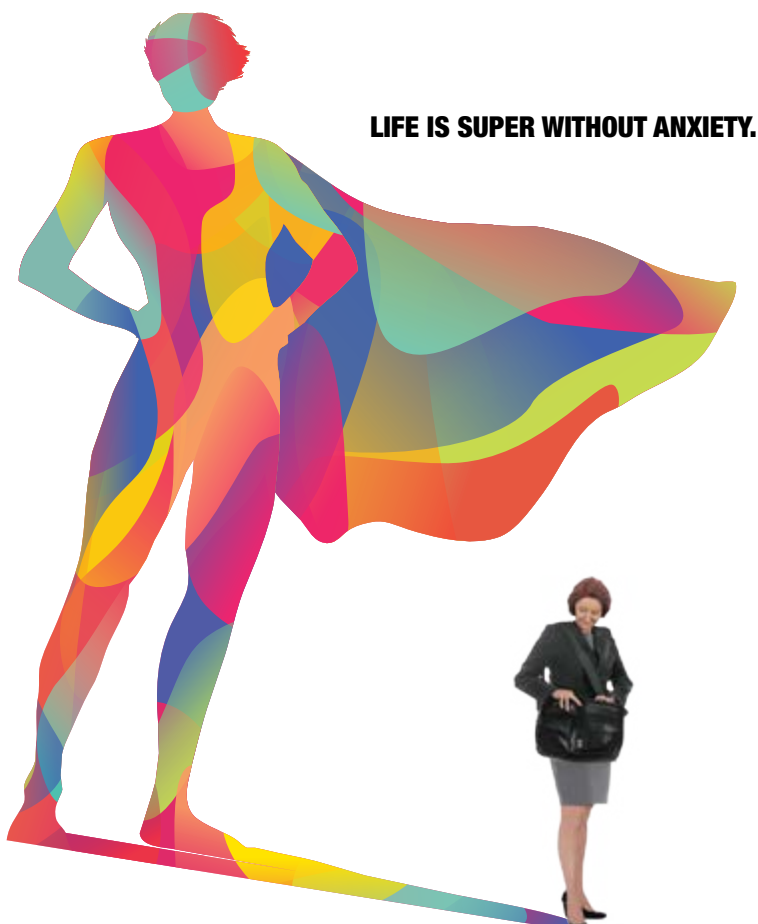
A few days later, still in residential treatment. I attempted to write down some thoughts (homework) in anticipation of an upcoming one-on-one counseling session. Completely unexpected to me, my struggles seamlessly transferred to paper that night. At this point, I had seen 6 different counselors over the past year and a half, each of whom tasked me to write down my “Initial Trauma” (defined in their eyes as that moment in time when I knew my experiences had changed me). Pardon me, say again? You do realize I have at least 100 of those incidents, right? After many attempts, with many different counselors, I could not complete this task. I guess the apparent fear of revisiting any of those events felt way too sketchy. Abort had become my mission.

The following day I met with my counselor. She was a retired Master Sergeant from the Air Force who helped me peel back some nasty layers and realize some hard truths about myself. Without her guidance, I would not be where I am today, so I thank her deeply. After some daily greetings, I gave my counselor the sheet of paper from the night before. She was ecstatic about my breakthrough.

Not only did I identify some tangible issues with my Combat Stress, but I also found a vessel that would allow me to communicate what I could not otherwise express directly. I had written a song and titled it "Hollow Tears." "Hollow Tears" has a minor tonality (sad or dark sounding) with aggressive lyrics that speak to the perspective of the ongoing battles within a Combat Veteran's mind. The lyrics speak to knowing that we as Warriors are twisted up inside. Twisted about the price of freedom, constant struggle with guilt, sacrifices made, invisible injuries, knowing we drink too much, fight too much, etc. The tears of a deeply wounded Warrior appear hollow to our family

and friends. Our inability to convey emotions leaves those closest to us feeling confused and helpless. Helpless, as they witness unexplained tears leaking from our faces.

I smile as I picture the two entry-level guitars with rusted strings hanging behind the nurse's station. I do not come from a musical background. I have never been in band class and the only person in my family who plays an instrument is my grandfather, who is an 84-year-old Vietnam Veteran whom I love and respect dearly. I remember as a child seeing him play music with his friends at one of his many cookouts or hog roasts, but he never sat



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me down and said, "Boy this is how you hold a guitar and make a D chord...now strum." I was at that point self-taught, with no formal lessons. I had played the guitar off and on throughout my military career. I would play for a year or two then put the guitar down and not touch it for another 2 years. I believe the longest was 4 years between bouts of playing. I even recall a couple of deployments where I was handed a guitar as a passing Marine boarded a helo finishing his tour of duty. I could play a few chords and sing a couple of songs but that was it.

---

## Finding a new mission

A few days after handing my counselor the lyrics to "Hollow Tears," a fellow patient

(Army Major) and I were playing the guitars in the courtyard during some supervised free time. Our inpatient treatment facility was in the shape of a pentagon, having five wings with a grassy courtyard in the middle. Each wing had its own designation, e.g., Wing #1 Adolescent Children, Wing #2 Older Adult, etc. My wing was strictly active-duty military. Normal operating procedures did not allow any two wings to be in the courtyard simultaneously. However, this day was different. Our group was in the courtyard enjoying some fresh air and the warm Florida sun. The Major and I were sitting at picnic tables in a shaded area near the entrance to an adjacent wing, picking and grinning away on the guitars. About 15 minutes before our "Free

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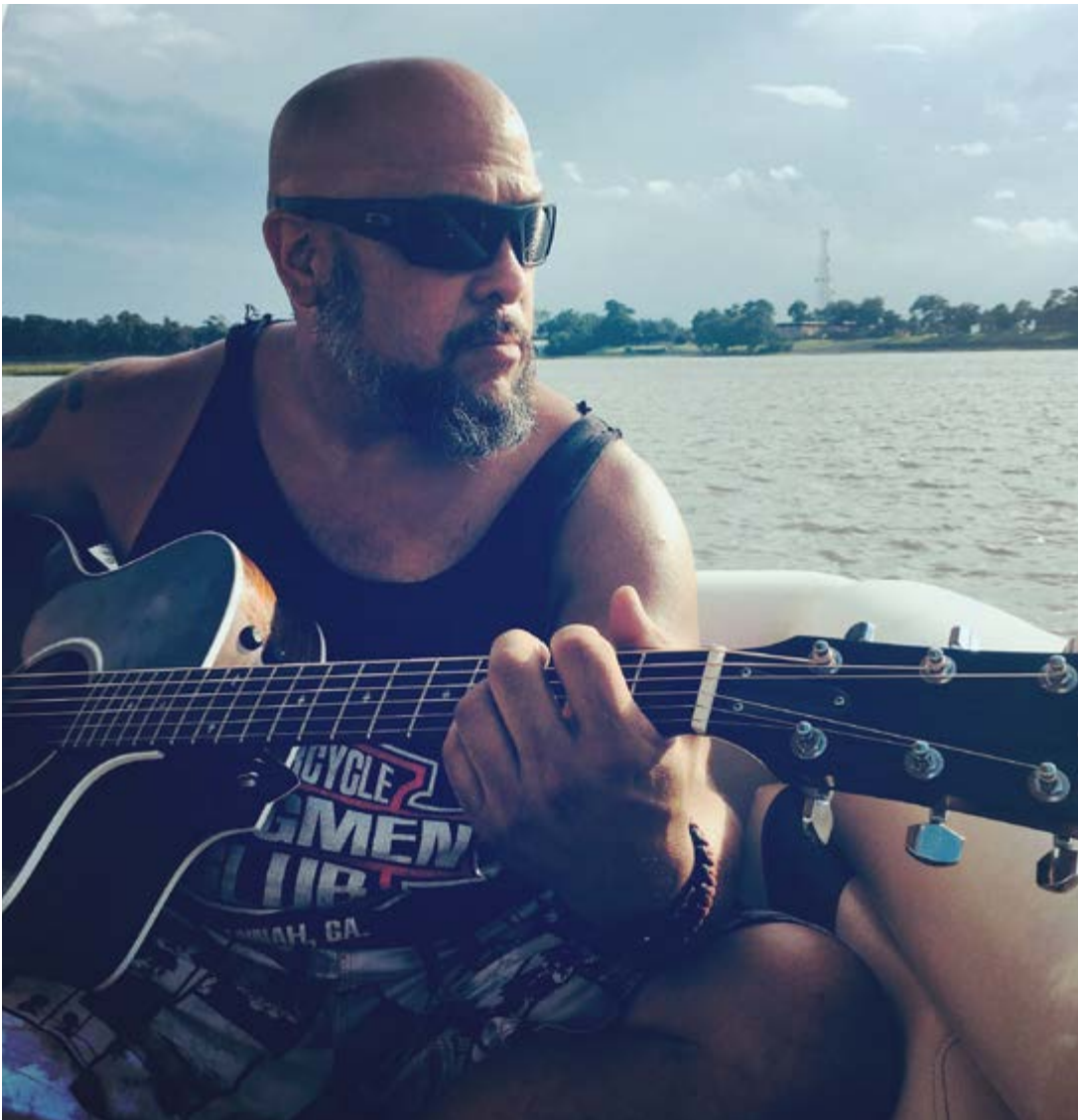
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time” ended, the automatic doors next to the picnic tables opened. The Major and I took a glance and quickly identified patients emerging as a much older group than ours. As we were in the largest shaded area, we decided to move to allow the older patients a place to sit in the shade. With our guitars in hand, we began to walk to the other side of the courtyard, when an older gentlemen’s raspy voice yelled out, “Can you play that thing?” The Major and I both turned around and I acknowledged, “We can pick a little, any particular song you want to hear, Sir?” He quickly belted out, “How about some Johnny Cash?” I was relieved with his song choice because it was one of 3 songs I could remember at the time. “As a matter of fact, we were just playing one,” I replied. The Major and I began to strum up our version of Mr. Cash’s “Ring of Fire.” At

first, about 3 or 4 patients were listening to us. I noticed an increasing number of patients gathering around us as another patient from the back corner of the picnic tables yelled out another song title. Unfortunately, I did not know the requested song but strummed up another tune from the same genre.

As I began to play, I faded into the song. Somewhere between me trying

to keep the rusty strings from breaking and remembering the lyrics to the song, I noticed not only patients but now staff gathered around our picnic table. I was blown away as I looked up and saw about 20 people swaying and bopping their heads to the music. All I could think about was how each of us (staff and patients) came from different experiences, ethnic groups, and upbringings. As I made eye contact with the crowd it hit me like a battleship pounding a beachhead: it was the music. No matter the life problems or medical diagnoses, the music took us to a place where nothing else mattered but that moment. I witnessed the medicine of Music Therapy that day and at that exact moment, I knew what my next mission was, it was to become a Music Therapist. I was awestruck by what I had just experienced. I



knew, without a doubt, my next mission was to share this experience with as many Veterans as possible. As I finished the song, we were called in for chow. We exchanged some quick goodbyes and good lucks and went inside. There was an indescribable weight lifted from my shoulders. That was the day I found my new mission. I had a purpose!

At the first opportunity available, I signed up to use the one and only computer accessible to patients on our wing. I sat down and quickly ruffled through the literature given to me by the facility's resident MT. I found a list of universities that offer Music Therapy degrees. To my surprise, Charleston Southern University, located in Charleston, South Carolina, was on the list. "Shut up, No way!" I thought to myself, "That's only an hour away." I pulled up CSU's main webpage, found that it accepts the G.I. Bill, and participates in the Yellow Ribbon Program. I pasted some web links and emailed them to myself, as I still had a few weeks of treatment left before I was released. I completed the residential treatment program in South Florida in the summer of 2017.

---

## Songwriting

Since discovering therapeutic songwriting, I have written 12 songs, mostly dealing with Combat Stress and military sacrifice. I eventually backtracked and wrote a song about my battle with those suicidal ideations, titled "May the Best Man Win." I find songwriting in this atmosphere to be extremely challenging yet medicinal in nature. My challenges do not lie so much in finding lyrics or melodies to accompany the testimonies. Instead, my primary focus is to create a safe haven where I can control the environment, free my emotions and

quickly get back to a place of refuge if needed. Writing music is my new medicine. I write for self-healing, direction, and scope. The process is deeply emotional; it hurts to write, perform, or even discuss the content of my music. That probably explains why I have only written a small number of songs in comparison to other singer/songwriters' catalogs. I continued weekly counseling sessions with my therapists until I officially retired from the USMC in the summer of 2018.

---

## Forging Ahead

Upon retiring, I still had not fully researched CSU's Music Therapy program. The mindset I had approaching school was simple: I will get a little music training and probably a lot of therapy

training. After four years of school, Hokus Pokus, I'll be a Music Therapist. I accepted the daily 1-hour, one-way commute, even though I had not yet made the drive to campus. I would have class Mon-Fri starting at 0800 and be home by 1600 every day, drive included. I was a 43-year-old Veteran student who would be cranking out a full-time credit semester. I was so confident in my decision to become a Music Therapist that I barely screened the program requirements. I basically enrolled in the CSU Music Therapy program and showed up.

August 2018, CSU, Orientation Day or Music Boot Camp Day #1, as I refer to it: I receive an email notification that there is a mandatory meeting for all students of the Horton School of Music. Ok, I guess that means me? School of Music? What's that about? I was oblivious to the structure and function

of Schools of Music within university systems. Regardless, I showed up to the designated room 15 minutes early, backpack in hand, and sat somewhere in the middle, back row. Being early, I expected a few people to be in the room. What I did not expect was to be the only one in the room less than 10 mins to presentation time. I sat there beginning to wonder if I was in the wrong place. Oh

wait, there's a group of kids. Ok, that looks like a professor. Yes, I must be in the right spot. I settle in and wait for the presentation to begin. As the room fills up, I scan the room and suddenly realize that I am surrounded by 18- and 19-year-old men and women (freshmen students). I also realize that I was that gnarly looking, long-bearded, Veteran student sitting in the back of the room with tattoos and his arms crossed.

Out of place was an understatement, but oddly I did not feel out of place. I uncrossed my arms and tried to smile. As the presentation began, a loud voice came over the microphone. "Good afternoon, I am the Director of the Horton School of Music (HSM) and I would like to welcome all of you. Oh, apologies, you are not yet officially accepted into the School of Music; you are on probation pending acceptance into



the HSM. After this fall semester, I along with the other HSM faculty members will review each one of your files individually and determine if you have met HSM acceptance criteria. We will be evaluating each of you on characteristics such as, but not limited to, work ethic, GPA, musical potential, and ability to work with others.” When he mentioned acceptance criteria and mandatory probationary status, I thought to myself, man these guys are not messing around. What in the world did I get myself into? As the Director continued, I could see at least 12 other professors sitting on the stage.

After his brief introduction, the Director began introducing the professors. Taking turns, each professor told us their name and their role at the HSM. As the introductions continued,

I realized there were numerous degrees that fell under a bachelor’s degree in music. Music Therapy, Music Worship and Leadership, Music Education, Choral Education, Music Performance, etc. The realization of achieving a classical music degree was beyond me. I had NO classical music influences or prior experience, I could not read music, nor could I play the piano. Simply put, classical music was a foreign language to me. Ultimately, it did not matter because I was dead set on becoming a Music Therapist, marching on.

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## The Mission Continues

**O**n the first day of Musicianship class (a sequence of four classes that every music student must pass, consisting of Music Theory, Aural Skills, and Dictation), I was given a music

theory placement exam. It was about 4 or 5 pages long. I presume the questions became more complex as you plowed through the test. I flipped through the pages, instantly realizing I couldn’t answer a single question. I scribbled my name and student ID in the top right corner and turned in my blank exam. The professor conducting the assessment asked me if I was serious. I told him that I was dead serious, that I had no





prior musical training, but I was trainable. He said, "We'll see." Affirming that I was definitely out of my league.

I will admit the last 3 years of school have been brutal, with exceptionally longer hours than expected. The last class of my first semester ended at 1830 Mon-Thurs. Due to my lack of Music Theory knowledge, I scheduled tutors twice a week. On average I was not leaving campus until 2200, often burning the night away in the Veterans lounge or the University Library until closing time. My official commute from my driveway to campus was an hour and 30 minutes one way, not the hour I had initially anticipated. I also discovered the Music Therapy degree was a 5-year program with 1,200 required in-school clinical hours and a 6-month internship.

I am now entering my 4th year of studies as a Music Therapy student. I have since completed the musicianship sequence. I have achieved Vocal and Guitar proficiency. I have sung in the Men's Choir, and I have been a part of the HSM

Guitar Ensemble for the past 2 ½ years. I am continuing to study piano with aspirations of achieving proficiency in the Spring of 2021. I have also observed or participated in Music Therapy clinical sessions with special needs children, adult psychiatric, and dementia patients. In the Spring of 2019, I worked with Challenge America (a non-profit Veterans foundation based out of Colorado) at a Veterans songwriting clinic in Nashville, TN. Here Music Therapists, Nashville songwriters, and Veterans were teamed up at Vince Gill and Amy Grant's 450-acre ranch. Each team was given a day and a half to venture into the woods and write a song inspired by the Veteran. On the 2nd day, Amy Grant's sound crew set up a small stage and we performed the songs we had written for the Veterans' families and friends. Dallas and his team at Challenge America are true professionals with a solid mission, it was an amazing experience.

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## End Goals

I have chosen to pursue an optional minor in Psychology along with my Music Therapy degree. With that, I have 4 semesters of school remaining before I am eligible for an internship. One of my many short-term goals is to establish a network between the local Veterans Affairs Medical Center and the University. The Veteran population is the only group we do not have access to as Charleston Southern Music Therapy Students. Allowing our students to conduct clinical work with Veterans on a consistent basis will be invaluable to both programs. This could potentially lead to internships or permanent Music Therapy positions at the VAMC.

Once I am board-certified, my focus will be lyrical song analysis through songwriting

with Combat Veterans suffering from PTSD. I intend to work with Music Therapy Associations and Veteran Foundations to serve as a walking example that the power of Music Therapy is real. I want to help educate and train future Music Therapists on how to best serve Veterans.

Having walked the road of alcoholism, clinical treatment, pharmaceuticals, suicidal ideations, and Combat Stress. I hope to bridge the gap between clinician and patient. I am currently 4 ½ years alcohol-free and I am off every pharmaceutical medication prescribed to me 4 years ago. We all have an organic pressure release, and I believe the key to that valve is music. I want to teach others how to restock their medicine cabinet with musical interventions, meditative practices, and expressive therapy techniques. I will promote the medicine of music and show the world there is a Music Therapist hidden within all of us.

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## Special Acknowledgments

**M**y academic progression would not be where it is today without the guidance and mentorship of two professors at CSU. Dr. Jennifer Whipple is the Universities Director of Music Therapy and my Academic Advisor. She has been my captain, steering me through this entire academic process. Her family's military background gives her great insight and the ability to effectively communicate with Veterans. Dr. Whipple, your knowledge and dedication to your profession is deeply admired. Thank you for being one of my pillars and guiding me through this process!

Dr. Dustin Ousley is the Universities Director of Choral Activities. Dr. O. was my primary instructor throughout my musicianship sequence.

## Hollow Tears

Mark Sauza

What excuse will I use today?  
To have drink and wash it all away  
I don't have a problem, I don't need to quit  
There's demons in my head and I'm sick of this shit.....

I self-medicate to cover my worn torn eyes  
Been through situations done something's that I despise  
Guilty for my actions, bottled deep down inside  
Pandora's box compartmentalized

I know, I know, you know, I don't talk about all my fears  
I know... I never get back those years  
I know, I know, you know, I won't talk about all my fears  
That's what it's like living through these Hollow Tears

Intoxication to a point of no return  
Passout.....Blackout.....will I ever learn?  
Existing in shadows consumed by shame  
Stumbling through life is no way to play the game

Lying to myself has become the norm  
Justification for my alcoholic storm  
Day to day I cover-up the truth within  
How can I live a life filled with sorrow and sin

I know, I know, you know, I don't talk about all my fears  
Because I never get past those years  
I know, I know, you know, I won't talk about all my fears  
That's what it's like loving a man with Hollow Tears

I know, I know, you know, I won't talk about all my fears  
That's what it's like loving a man with Hollow Tears

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I have observed him in choral, one-on-one, and classroom environments. As a career Marine and a certified instructor trainer, I have spent countless hours on platforms instructing civilians and Marines. When I say that Dr. Ousley is the best educator I have ever witnessed, my assessment comes with grit and experience. His thirst for teaching is second to none. Coupled with his tremendous talent, he sets an example for all

professional classical musicians to emulate. He is truly a subject matter expert who can demonstrate and make on-the-spot corrections quickly and accurately. Dr. O., thank you for your relentless devotion to music education. I would not be where I am today without you.

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## More about Music Therapy

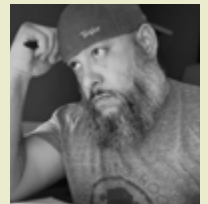
- Charleston Southern University, Music Therapy Program  
<https://www.charlestonsouthern.edu/academics/horton-school-of-music/music-therapy/>
- American Music Therapy Association (AMTA) is a 501(c)3 non-profit organization whose mission is to advance public awareness of the benefits of music therapy and increase access to quality music therapy services in a rapidly changing world. <https://www.musictherapy.org/>
- Challenge America is a 501(c)3 organization whose mission is to connect Service members, Veterans, and their families to resources and solutions that build community and give purpose to their lives. <https://www.challengeamerica.com/>

## ABOUT THE AUTHOR

**Mark Sauza**, United States Marine Corps, First Sergeant (Ret) is currently in his 4th year of study at Charleston Southern University (CSU) in Charleston, SC pursuing a degree in Music Therapy. Mark's intentions are to highlight and stand as an example of the benefits that Music Therapy can provide for Veterans. His primary focus will be utilizing lyrical analysis and songwriting to help Veterans explore compartmentalized experiences from their past.

Mark is a retired Marine with 21 years of service. His military occupational skill was a M1A1 Tank Crewman (1812). He was a Platoon Sergeant/Tank Commander for 3 Combat Tours in Iraq with 1st Tank Battalion. Falluja 2004, Haditha Dam 2005-2006, and Northern Al Anbar Province 2007 with the 13th Marine Expeditionary Unit. In 2012 he completed a successful tour of duty as a Drill Instructor at Parris Island, SC. In June of 2012 he deployed to Helmond Province, Afghanistan for his 4th and final deployment with 2nd Tank Battalion. He was promoted to his current rank in 2013. He retired from the USMC in June of 2018 and began his professional Music Therapy journey in the Fall of 2018 at CSU.

Mark was awarded the Navy and Marine Accommodation Medal with Combat Valor distinguishing device for his actions in Fallujah, he was also awarded the Navy and Marine Corps Achievement medal with Combat Valor device for his actions in the Haditha Triad in 2006. During his deployment in 2007, he was wounded by enemy sniper fire and subsequently received the Purple Heart medal. Above all Mark's accomplishments, he is the proudest of his two sons, Hunter and Kadin.



## Music of My Soul: My Journey to Healing

By Connie Hunter-Baptiste, United States Air Force (Ret)

In 2015, Women Veteran Social Network, Inc. ([www.wvsjnetwork.org](http://www.wvsjnetwork.org)) hosted our second Annual Conference in Atlanta GA. As a WWSJ Ambassador, I was assigned to be wingman/battle buddy to Jason Moon, one of our Veteran musical guest performers at the Conference. We spent three days together traveling around Atlanta and navigating the Conference. What was happening while I hosted Jason would become life changing for me.

During the days we spent becoming friends, we began to share the stories our military service. This was a glimpse into worlds that neither one of us knew existed. Jason learned about harm done to many women Service Members, and how that same harm can affect women Veterans of color on many additional deeper levels. I learned first-hand the effects of combat on Veterans who served in war zones. We both learned of the invisible wounds that can affect those of us traumatized during our military service in different ways. In sharing our stories, we developed a friendship

and mutual respect that would start my journey to healing and would help build a legacy that would change my life forever. This chance meeting allowed me to be a part of Jason's music program through his nonprofit, Warrior Songs, Inc. ([www.warriorsongs.org](http://www.warriorsongs.org)), giving me, a woman Veteran of color, the opportunity to tell my story through songwriting and singing.

During our weekend together, I realized that my assignment was not just to make sure Jason's experience was seamless, but to share my story and open a window for him into the world of women who have served, and more importantly into the world of women Veterans of color. Our series of candid, transparent conversations led to not only friendship with a military brother, fellow advocate, and Founder/Executive Director of Warrior Songs, but the beginning of a healing experience for me through his music program.

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### My Journey to Healing

Society sometimes thinks that the military world is perfect, but it is far from it. The ills that are seen in society are magnified in the military by the very power that the perpetrators have over their victims. Offenders are often our peers or our leaders, and sometimes a stranger who is also in uniform. You always believe that your experience is not unique, that everyone who served is aware of all the harm and hurt that goes on in the military.







Veronica Mederos, Jason Moon and Connie Baptiste at Release Party.

Being black in the military is not easy. Being a black woman in the military can sometimes seem unbearable and very lonely. As a military woman/killing machine, I was trained to bury anything that resembles softness, femininity or emotion. To survive, I could not be a woman, a mother, or show feelings. To show or share feelings was considered substandard for military personnel. Speaking out in defense of others could be considered a character flaw, and the military had no place for that.

I spent most of my military career in spaces where I was often the only woman and sometimes the only person of color. I heard the racial and sexist jokes focusing on my brothers and sisters in arms. I heard the comments

when they thought I wasn't listening or wasn't in the room. I did not have a name for what I was feeling, what it meant to witness what had happened to me and to others; I just knew that the hurt was unexplainable and deep. For years I carried that hurt and buried it so deep that I did not realize it was inside of me. I just knew I had to excel, survive, keep my head down, and do my job. There was hurt, rejection, and denial because I was a woman, a black woman. There were many times I witnessed the same harm being done to others.

### **Realization: Military Moral Injury**

I served for 20 years in the United States Air Force, with the highest rank of Technical

Sergeant (Retired). I had many non-traditional jobs, including Cable Installer, Drug Enforcement Officer, and Training Manager. There were many times I was completely ignored and treated as if I was invisible, given no respect even though my rank said that I earned it. I buried the damage and the hurt deep inside just to survive. I heard the jokes, e.g., from “black people hating God because of having pubic hair on their heads,” to “where are the good-looking women.” There was even an incident where I was intentionally left behind at the squadron when my team went to a jobsite. What did that say about inclusion?

In what I thought was a simple conversation with Jason Moon, sharing my experiences brought the pain flooding back. Just like so many other traumas, it bubbles up when you least expect it. There are so many layers to my moral injury, the wrongs I witnessed or experienced, the hurt I could not or did not prevent just to survive. I now know that what I was feeling that deep hurt, is Military Moral Injury. Moral injury has a broad definition in the civilian world, and Military Moral Injury applies specifically to wounds sustained during military service that include acts against one’s values and beliefs that can happen in and out of combat and also include aggressive unwanted acts against one’s person, known as Military Sexual Trauma (MST). But it is so much more.<sup>1,2</sup> I believe that experiencing and witnessing racism, sexism and other “isms” was for me a profound Military Moral Injury.

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## Finding my Voice

**M**y time spent with Jason introduced me to the wonderful healing power of music. I discovered that I had a story to tell and that telling it was my way of starting to heal from

my trauma. Music is and has always been a big part of the community of color. It has been our way of sharing who we are and what we need to say. We write songs about social injustice, love, heartache, and war. We sing when we are far away from home. We sing to remember our love ones, to honor our brothers and sisters we lost in war, to fight and right the wrongs done to us and others.

You can trace the music of our community back to every war and conflict. In the twentieth century alone, this has included: Jim Europe and other black regiment bandleaders in World War I; Josephine Baker, who sang throughout Europe while spying for the French Resistance in World War II; Alberta Hunter and Ella Fitzgerald, who sang the blues and jazz for troops through the USO; BB King and John Coltrane, who played in military bands while serving in uniform in World War II; Bill Withers, Marvin Gay, and The Temptations, who sang protest songs during the Viet Nam era; and BriGette McCoy, Gulf War era Veteran, who has composed and sung songs celebrating black women Veterans in the twenty first century. And now I can proudly add my name to the list.

Our music is a way we choose to tell the world how we feel. Through our music, we can speak of the heartache, the unfair treatment, the losses, and our overcoming all of them. Veteran songs tell the stories about our service, not because of what America was and is, but what we believed it could and can be. Veteran songs also celebrate our overcoming pain and finding joy going forward.

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## Warrior Songs, Inc.

**I** cannot talk about my healing journey without talking about Jason Moon and Warrior Songs,



Connie Baptiste holding the Album of the Year Award.

aside all of my fears and apprehensions. Participating on this CD meant no longer keeping my head down and being silent. It meant that the world would see and hear me now. It also meant that by telling my story, I would again have to deal with the trauma embedded in my military service, but it also meant healing and getting on with life. Here was my opportunity to tell the world about the Warrior I had always been, the proud Airman, who gave 20 years of my life to serve a country who didn't always understand or see me.

My first attempt at song writing and performing as a singer/

Inc., the non-profit he started because of his own combat trauma and the need for music in his life. There are always people who cross your path, who talk about helping but don't, and then there are people who show up. These are the advocates who make the biggest impact on one person at a time. Jason is one of those Veterans who walks the walk and show up for other Veterans. He is an advocate that did not look like me, but who championed my cause.

I accepted Jason's invite to perform on an all-women Veteran CD. To do this, I had to set

songwriter earned me a place in history on **Warrior Songs, Women at War: Warrior Songs Vol. 2**, which won Album of the Year at the 2019 Wisconsin Area Music Industry Awards. I was no longer invisible. I heard my sisters in arms singing my song and making it their anthem, the theme song of women Warriors.

I was later granted a second opportunity to attend one of Warrior Songs' Art Retreats in Phoenix, Arizona, which was for women Veteran MST survivors. As a gift to the attendees, I worked with Jason and co-wrote and performed a

song using the words of the women Veterans in attendance. We performed the song on the last night of the retreat at a fundraiser, **See Me** (<https://warriorsongs.org/track/1906473/see-me>). Jason and I teamed up to express through their song the hurt, betrayal and the winning spirit of the women Veteran warriors who told their stories at the retreat.

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## My Music: My Legacy

I can now take an honest look back over my military career with new eyes. I am a country girl from the deep South, a place that was the birth of racism. My uncles, my brothers, my cousins and I wrote a blank check to America without hesitation. I missed many birthdays, anniversaries, and family gatherings to serve and protect. I have seen wrongs perpetrated on those around me and lived through those same wrongs done to me. But if you listen to my song, you will hear my dreams, my Warrior declaration. I was in love with

an idea of what I wanted America to be, not just for me but for my sons, my grandsons, my nieces and nephews.

I told my story and began to heal. I thought it was just my story, but I found out it was the story of many of my sisters in arms. I am honored to have gotten past my fears and was able to co-write and perform my story through music. My anthem, **Always on Top**, <https://warriorsongs.org/track/2792738/always-on-top>, is my history, my story put to music. Always on Top is my belief in me, my healing. In writing my story, performing, and recording my history, I have reclaimed who I am and where I will always be going forward, **Always on Top**.

---

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## ABOUT THE AUTHOR

**Connie Baptiste** is a proud Desert Storm/Desert Shield, Post 9/11 Air Force retiree with combined 20 years of service in Active Duty, Air Force Reserve and Georgia Air National Guard. Born and raised in Georgia with a strong dedication to everything Georgia and military, she is a Business Owner of multiple businesses and an Award-winning Chef. She is a 2017 Graduate of The Hotel School of Cornell SC Johnson College of Business, EBV Program.

Her current philanthropic endeavors include but are not limited to: Chief Operating Officer, Women Veteran Social Justice Network, Inc.; Vice President, Federally Employed Women Greater Atlanta Chapter, Executive Board Member, Warrior Songs Organization; and Military Ministry Leader at Tabernacle of Praise Church International. Connie is a Recipient of the 2019 Album of the Year, Wisconsin Area Music Industry, for her original song she recorded on Warrior Songs, Vol. 2, *Women at War*.



## ALWAYS ON TOP

(A Warrior's Song: Connie Hunter-Baptiste)

Written By: Connie Hunter-Baptiste and Dora D. Chambers

<https://warriorsongs.org/track/2792738/always-on-top>

*(Introduction)*

I put on the uniform  
And found myself  
I served my country  
And fell in love with ME  
Traveled the world  
Being all I could be  
God showed me  
Here is where I'd be  
Always On Top.

*(Chorus)*

Always on Top; Always on Top;  
Always on Top; Always on Top;  
No matter what it looked like  
God always sees me through  
No matter the seasons,  
I always found a reason to rise

*(Bridge)*

Write the pages of my life;  
Let the chapters speak my truth  
I lived in complete service  
Always giving, always sharing

*(Chorus)*

Always on Top; Always on Top;  
Always on Top; Always on Top.

*(Verse 1)*

They said I couldn't make it  
They said that I shouldn't try  
No matter what people said  
I made up my mind to win-- my way  
A Warrior I am designed to be  
Celebrating Victory after Victory  
I live in total Celebration  
Always smiling, always laughing,  
A heart full of joy; a Champion of Love  
**Always on Top**

*(Bridge)*

Write the pages of my life;  
Let the chapters speak my truth  
I lived in complete service  
Always giving, always sharing

*(Verse 2)*

I've been knocked down  
I've been put down  
I've had my share of heartache  
I have been loved, but never chosen  
But I choose me, I choose to love  
Living my best;  
A Shining Star;  
Bright for the world to see  
By grace, I've come this far  
My love for my Country made me  
This world it couldn't break me  
Here I am  
Standing strong  
Always on top.

*(Bridge)*

Write the pages of my life;  
Let the chapters speak my truth  
I lived in complete service  
Always giving, always sharing.

*(Chorus)*

Always on Top; Always on Top;  
Always on Top; Always on Top.

*(Verse 3)*

Let them tell my story  
Let them talk about my life  
Filled with love, with joy  
Always giving more than I got  
My service tells how I live  
Unselfish love and unconditional giving  
Standing strong, living large  
Here I am, **Always on Top**

# The Hero's Journey: *The Arts and Trauma Recovery*

By M.B. Dallocchio, LMSW



Veterans who are trauma survivors searching for a recovery method that fits them best may be viewed as warriors embarking on what Joseph Campbell described as the *Hero's Journey*.<sup>1</sup> Veterans experiencing post-traumatic stress not only have to navigate mental health stigma but find their path toward healing while managing various forms of trauma-induced symptoms. As a Combat Veteran, artist, and social worker, I have assisted others

on their own *Hero's Journey* - which was only possible because I had figured it out the hard way. I discuss this post-war homecoming odyssey in my memoir, *The Desert Warrior*.<sup>2</sup>

However, during the onset of the COVID-19 pandemic, I relocated to London and created Veteran Art Studio<sup>3</sup> on YouTube, which embodies

all intersectional aspects of my experiences, what the journey has meant to date, and why it is important to broaden one's horizons on the path to healing from military and war-based trauma. In a time of crisis, it became a priority to let people know that they weren't alone, and that healing is certainly possible. I would argue that

it is imperative to include the arts in evidence-based interventions.

This alternative perspective of arts-based interventions for trauma symptom management and healing calls for an examination of strengths present within Veteran trauma survivors, requiring a reframing of their symptomology. Using the arts (visual, literary, music, performance, etc.) as coping strategies in managing the aftermath of traumatic circumstances effectively serve as tools for learning to manage traumatic memories with a creative lens.

Using creative writing to process a Service Member or Veteran's experience could be facilitated by understanding the three stages

of the *Hero's Journey*. This process can be done alone or with the guidance of a therapist. One could choose to write using a first-person perspective or use the voice of a third person to narrate the story of the "protagonist."

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## The Creative Process

**B**efore embarking upon the Hero's Journey, it is highly recommended to ease oneself into the creative process by creating a specific space to brainstorm. One can compose music, create visual art, or even choreograph a performance piece using a creative process to begin using the creative lens to produce works in one's chosen



medium. The following process is outlined in Veteran Art Studio where one could use it alone or to assist a client:

**1. Find your favorite time, place, to create:**

Figure out where you feel the most comfortable to work on your chosen creative project. It could be a specific area of your home, outdoors, or even in bed using paper and pen or an app. Wherever you feel most inspired to create, go with it, and make it your creative spot.

**2. Choose your favorite method(s) to create:**

Whether you prefer using paper and pen, apps on your phone, voice to text, or a combination of a variety of methods, figure out what works best for you.

**3. Turn off your inner critic:** You don't have to be a published author or hold a Master of Fine Arts to get started, but you should do your best to silence your inner critic. It's important to note that you shouldn't get too bogged down in mastering the technical details of any medium or given craft. One can always adjust and correct later. Even the most experienced artists make mistakes, so allow yourself room for errors as well. The most important thing is that you're here and expressing yourself.

**4. Figure out what you want to express most:**

Do you want to write about traumatic events? Do you want to paint a period that took place during childhood or adulthood - or even a combination of both? Decide what period you want to focus on.

**5. Outline your project:** This is where you can start to organize a creative project by plugging in dates and locations of your story - or periods of time that inspire creative expression.

**6. Select a chapter or section that excites you**

**the most and get to creating:** Choose a specific event or details of your story that's calling your name and go with it.

**7. Keep a notes app on your phone or a notebook for sudden bursts of inspiration:** No matter what you like to use for planning creative projects, keep your preferred method for taking quick notes close. I prefer using both a notes app on my phone as well as a Moleskine notebook for random thoughts and unexpected moments of inspiration that I don't want to forget. You'd be surprised how and when the muse strikes, so resist the urge to tell yourself, "I'll remember this later." Because inspiration comes and goes and can be easily forgotten.

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## The Hero's Journey

**A**uthor Joseph Campbell introduced the concept of the Hero's Journey as a universal theme of going on a journey that includes a transformation.<sup>4</sup> This journey is not only present in mythological tales and religious studies, but in well-known works such as *Lord of the Rings*, *Star Wars*, and numerous other books and films. The book was intended to help people "see myth as a reflection of the one sublime adventure of life, and then to breathe new life into it."

The challenging process of military related trauma rehabilitation and community reintegration parallels Campbell's metaphorical use via literary arts of the stages of departure, initiation, and return. The historical conceptual framework for understanding psychosocial and lingering impacts of trauma not only explains the odyssey of the Veteran experience, but that the path from trauma toward healing is a worthwhile journey that emerges from the creative process.





# THE HERO'S JOURNEY



A GUIDE TO OUTLINING YOUR STORY BASED ON  
JOSEPH CAMPBELL'S MONOMYTH STRUCTURE IN THREE ACTS

1

## DEPARTURE

- Ordinary World
- Call to Adventure
- Refusal of the Call
- Supernatural Aid
- Crossing the First Threshold
- Belly of the Whale

2

## INITIATION

- Road of Trials
- Meeting with Goddess Figure
- Temptation
- Atonement
- Apotheosis
- Ultimate Boon

3

## RETURN

- Refusal of the Return
- Magic Flight
- Rescue from Without
- Crossing of the Return Threshold
- Master of Two Worlds
- Freedom to Live

The *Hero's Journey* may be used as a method for the writing process, but it is important to bear in mind that creative approaches are not limited to this medium. While narratives of trauma, military service, or even childhood can vary, it is important to choose a specific range of time to focus on one's creative project. By selecting a specific period of time, one can concentrate on events, details, and themes that are linear and limited. In doing so, this minimizes distractions and tangents while giving the project its core.

### The Three Parts of the Journey

The hero's journey is broken down into three main acts or parts, with the bulk of the

action happening in the middle of the story. Part 1 represents the departure of the protagonist, where the Servicemember or Veteran can begin their narrative as they prepare to embark on a journey or quest. Part 2 represents the initiation of the protagonist, who endures challenges, hardships, and undergoes a transformative experience. Part 3 represents the return, where the transformed protagonist returns to the so-called ordinary world where the story began.

### Part 1: Departure

When writing, composing, or creating a project about war or major life changes, the concept of leaving the familiar behind is a



common theme and a great way to introduce your audience into your world (or that of your protagonist should you choose a fictional character). One may use wartime deployment as an example of the hero's departure. Consider incorporating the following six points to see how each line up with your creative timeline. If any point does not apply to your timeline, feel free to skip it.

- **Ordinary World:** Where you (the protagonist) are in your everyday life prior to receiving life-altering news.
- **Call to Adventure:** This marks the beginning of the quest, the first sign of stepping into the unknown and possibly a terrifying new path. For example, the first time you get orders and know you're about to deploy.
- **Refusal of the Call:** Was there any reluctance or doubt about the journey ahead? This is where you address any resistance to upcoming changes or any challenges facing the main character before the journey begins. This could range from general anxiety to

conflicts with family or loved ones prior to departure.

- **Supernatural Aid:** The main character receives help from an unlikely source or an important mentor before the journey officially begins. This is where you would introduce a key character in your story who may impact the hero or the journey in a deep, meaningful way.
- **Crossing the First Threshold:** The main character has accepted the quest - or in this case, come to terms with orders to deploy, and starts preparing accordingly. This could mark the pre-deployment phase.
- **Belly of the Whale:** The main character has officially crossed the threshold into another world. This could be where deployment officially begins, and the hero comes to terms with possible injury or death - of the self or comrades - physically and/or psychologically.

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## Part 2: Initiation

**D**uring this phase, the protagonist is tested on a variety of levels. This typically contains

the bulk of your story, and where one or more climax / life-altering experiences will certainly take place.

- **Road of Trials:** The protagonist is tested for the first time with a challenge that proves to be a milestone in the overall journey. This can be the introduction of one or more traumatic events as they apply to your story.
- **Meeting with Goddess Figure:** Campbell referred to this point as when the protagonist manages to experience transformative love. This can refer to romantic relationships or a deep sense of camaraderie in the middle of conflict.
- **Temptation:** If the protagonist's ethics and morals are challenged, a possible

deviation from one's path may occur. How does the protagonist respond to a crisis of conscience? This is another marker for traumatic events as moral dilemmas serve as important milestones to be discussed if they apply to your story.

- **Atonement:** The protagonist is confronted with challenges related to leadership and/or regret. In Campbell's monomyth structure, this would be a point where the protagonist seeks forgiveness or guidance from a parental figure, mentor, or leader.
- **Apotheosis:** After a period of introspection, the protagonist reaches a point where fears are overcome in a new, profound way that



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indicates a loss of innocence and an increase in knowledge - for better or worse.

- **Ultimate Boon:** Having overcome traumatic events and survived, the protagonist becomes more aware of his/her own mortality. This is a space where survival is viewed as a leadership lesson, or a change in identity prior to the return. For example, redeployment or the end of one's enlistment could be used as a milestone.

### Part 3: Return

After multiple tasks are complete, the journey is nearing an end.

- **Refusal of the Return:** This is where the protagonist has a crisis of feeling unready to return - or redeploy. This could indicate a feeling of not having done enough or having done the wrong thing. There is a sense of incompleteness - whether it pertains to a mission or the self - to be explored before the journey ends.
- **Magic Flight:** The protagonist is provided with some sort of assistance prior to the journey ending. This could be help from a battle buddy or a leader/mentor figure before the journey ends. This is where the protagonist reflects upon the entire journey before returning to the so-called ordinary world.
- **Rescue from Without:** The protagonist is trying to come to terms with being transformed by the journey and other characters in the

story provide a degree of assistance - from friendship to advice - for the road ahead.

- **Crossing of the Return Threshold:** The protagonist is officially returning home - or redeploying. It is clear by this point that the journey has changed the protagonist, who is returning to the ordinary world as a different person, marked by life-altering events.
- **Master of Two Worlds:** This incorporates post-deployment processing and community

reintegration.

As the journey has changed the protagonist, there is a new, intersectional understanding of the world.

- **Freedom to Live:** This final point indicates lessons learned, a newfound knowledge, and a sense of having survived.

George Lucas claimed that using

Joseph Campbell's hero's journey structure was vital in his creation of Star Wars, noting it is a structure that is timeless and can be seen in stories and myths for thousands of years.<sup>5</sup> I certainly agree that it is helpful as a structure to process one's military experiences. This is intended to help organize one's personal narrative as well as in discovering one's authentic voice as an artist. Once this journey is completed, one will have a source to pull from and return to for creative inspiration that is completely organic and original.

*The purpose of writing one's narrative or using another creative outlet to express emotion is not only to document aspects of one's life, but to also make it tangible and gain perspective.*

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## The Arts and Healing

**W**hat led me to writing as Veteran after returning from the Iraq war? I was tired of living on a powder keg of my own trauma. Much like other trauma survivors, hypervigilance, anger, depression, and a variety of trauma-induced symptoms can take its toll on the psyche, and I found myself running on fumes for years in my own community reintegration process.

The purpose of writing one's narrative or using another creative outlet to express emotion is not only to document aspects of one's life, but to also make it tangible and gain perspective. When we're given the space to breathe, create, and see or hear our work before our eyes, the results are a sense of empowerment and the gift of seeing or hearing our experience in present, tangible form. In turn, the writer owns those thoughts and memories - they don't own the writer.

Expressing life experiences, whether through creative writing, painting, music, or performance art, has the power to alleviate many of what we might have been taught to suppress or numb out. Instead, I invite survivors to transform trauma into inspiration.

According to the American Art Therapy Association,<sup>6</sup> arts-based interventions - from the visual arts to music - can be used to:

- Reduce PTSD symptoms and co-existing conditions
- Improve cognitive functioning and behavior
- Aid in the expression of traumatic events and addressing recurring episodes
- Bolster self-esteem and providing stress reduction

When it comes to creating music, the effects are quite similar. Music-based therapeutic interventions have demonstrated the ability to facilitate the expression of traumatic memories, resilience building, motivation for long-term success, and lowering the need to seek additional mental health services.<sup>7</sup>

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## Creatively Expressing Trauma

**D**r. James Pennebaker, who studied expressive writing, said "By writing, you put some structure and organization to those anxious feelings," and that "It helps you to get past them."<sup>8</sup> Other research by Dr. Pennebaker indicates that suppressing negative, trauma-related thoughts compromises immune functioning, and that those who write visit the doctor less often.



There is something undoubtedly special about putting one's own thoughts and memories into a creative project. When we express what disturbs us the most, what we fear, or things we are afraid to talk about, we free up space in our minds for something positive and healthier to take up that space. If we become unafraid of the voices within, it is also easier to lose our fear of the voices of those around us.

In the book *Writing Down the Bones: Freeing the Writer Within*, Natalie Goldberg states, "I don't think everyone wants to create the great American novel, but we all have a dream of telling our stories-of realizing what we

think, feel, and see before we die. Writing is a path to meet ourselves and become intimate."<sup>9</sup>

## Creativity Makes Life Worth Living

**D**ne of the most worthwhile aspects in the journey of expressing trauma is that we get to know ourselves that much better. Our voice and creative lens are important, not only to ourselves but to the collective story of humanity. It is easy to take that for granted. When we allow ourselves to speak from the heart and mind, we release a purifying fire onto the blank spaces before us.

When we transmute trauma into inspiration, it is somewhat of a magical process, much like the Hero's Journey itself. Our perceptions



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change when we revisit past events – after we have changed, grown a bit older, and hopefully wiser. But more importantly they allow us to see memories in tangible form and provide space for reflection. By reflecting, we give ourselves both space and permission to let go of what has been hurting us or haunting us, and more importantly, we give ourselves the space to heal.

Campbell said, “My general formula for my students is, “Follow your bliss. Find where it is, and don’t be afraid to follow it.”<sup>10</sup> In closing, I invite you to do the same. If you are a Servicemember or Veteran, create from your heart in a way that alleviates some of the burden from your own psychological ruck sack. If you are a clinician, help create the space for Veterans to do just that. More importantly, in creating works that emanate from difficult experiences, we create something new that

allows us to follow our bliss toward a path of healing, redemption, and purpose.

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#### Art Credit

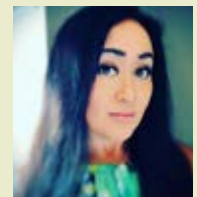
All illustrations by M.B. Dallochio, LMSW <https://www.thedesertwarrior.com>

## ABOUT THE AUTHOR

**M.B. Dallochio** is a London-based Chamorro artist, author, and social worker who specializes in artistic psychosocial rehabilitation. Dallochio served as a medic, mental health sergeant, and retention NCO in the US Army for eight years. While on deployment to Ramadi, Iraq in 2004-2005, she served as a member of "Team Lioness," the first female team that was attached to Marine infantry units to perform checkpoint operations, house raids, and personnel searches on Iraqi women and children for weapons and explosives.

In addition to having been featured in the San Francisco Chronicle, The Huffington Post, Las Vegas Review-Journal, PBS, Yahoo! News, and many other media outlets covering facing injustice during and after combat, she also speaks out on women and minority issues, post-traumatic resilience, and the importance of self-empowerment. She received her MSW from the University of Southern California and is a David L. Boren Scholar in Czech studies and international relations.

For more information, visit: <https://www.thedesertwarrior.com/>



# Dog Walk Home: A Documentary Film Portraying Veteran Families Battling PTSD with the Help of Service Dogs

By Vicki Topaz, Filmmaker, Photographer and Daughter of a WWII Veteran

Perhaps more than any other art form, documentary film has the power to make the unseen seen. As filmmakers, this is what we set out to do in *Dog Walk Home*: offer a rare glimpse into the lives of three Veteran families as they share their stories from the privacy of their homes. Through their voices we learn about the causes and effects of post-traumatic stress disorder (PTSD) in all its myriad forms: injury, assault, survivor's guilt; anger, self-isolation, and self-medication. Yet these are not the places where we linger. The heart of this film is elsewhere: in hope, family, recovery, and the service dogs that help make it possible.

Why would these Veterans and their families allow our filmmaking crew of five into their homes? Why would they bare their souls to us? It is not complicated. These people are a different breed of Americans – those few who have pledged their lives to protecting their country and their fellow Service Members. If this film saves even one Veteran's life or inspires one Veteran to seek help, the discomfort of sharing their stories will have been worth it. And thanks to the love of their families and some very good dogs, these Veterans have regained the heart to complete this vital mission.

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## How This Film Came About – and Why It Is Important to Me

All of my work with Veterans has been deeply personal – a truth which, over time, I realized was partially rooted in the formative experiences of my own childhood. My father was a U.S. Army Veteran who flew missions as a tail gunner in Europe during WWII. Like the Veterans in *Dog Walk Home*, he arrived home with PTSD, a condition that was unrecognized and untreated at the time. Now, all these years later, I know that he was grappling with PTSD which led to his anger and alcoholism. I also know that my

childhood perspective has helped me foster deeper insights into the unique struggles of children and families living with trauma.

My desire to shed light on the Veteran experience began to take shape more than a decade ago, but it truly crystallized when I started interviewing and photographing Veterans living with PTSD for my multimedia project called HEAL! It was an honor and a revelation to listen to these Veterans relate their stories of military service, to learn about their subsequent battles with PTSD, and especially to witness how their service dogs helped put them on a path to restoring their independence.

Somewhere along the way, my thoughts circled back to my own childhood memories as I was gathering these intimate stories told in HEAL! I realized there was yet another facet of the Veteran experience that needed to be told: the role of the family. This insight ultimately led me to *Dog Walk Home* to show how PTSD impacts Veterans and also to reveal how secondary trauma impacts family members.

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## The Exceptional Families (and Dogs) in *Dog Walk Home*

The stories and perspectives of the three Military families in the film are unique, yet they all share a dual thread: their struggles with PTSD and secondary trauma and the discovery of dogs willing and able to meet them in their







darkness and lead them into the light and love of family and friends.

We first meet Emilio Gallegos, a Mexican American U.S. Marine Corps Veteran, Purple Heart recipient, poet and single father. Speaking of his deployment in Iraq, Emilio describes how the Humvee he was driving on his base was blown apart by an improvised explosive device. Suffering with symptoms of PTSD and a traumatic brain injury, he returned home distant and angry, self-isolating from his own family and from the world. However, his isolation ends and reconciliation with his children begins when Emilio is partnered with his service dog, Samson.

Next, U.S. Army Veteran Kim Voss shares the heartbreaking account of how her PTSD first developed from early childhood abuse and was then compounded by a sexual assault in the military. Demoralized by "Don't Ask, Don't Tell," she left the service to manage her symptoms as best as she could. Just as her marriage to wife Tamara is hanging on by a thread, Kim is partnered with her service dog, Artemis. She

helps Kim remain in the present and gives both Kim and Tamara the strength and stability to stay together.

And finally, we meet Ramon Reyes, a Mexican American U.S. Army Veteran who deployed twice to Iraq. He is haunted by survivor's guilt and stricken with severe PTSD. Ramon self-medicates with alcohol to such an extreme that he temporarily loses his wife and two children. When he is treated at the VA and then partnered with his service dog Huey, Ramon can finally start mending the rift with his family. Huey helps everyone in the family lessen their symptoms of PTSD and secondary trauma.

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## **The Human-Animal Bond: How Does It Work, and How Does It Help?**

**W**hen you're looking at the entire scope of the human-animal bond, dogs are the gold medal winners. The chemistry and wiring of their social brain network is most similar to ours. This is why, neurobiologically speaking, dogs are our best friends!" – Meg Daley Olmert, film advisor

**S**amson helps me decompress. I talk to him a lot too. When I'm at the store, buying cereal, I ask him, 'What should we get today? What do you think? Maybe some Fruit Loops?' People in the aisle are like, 'Is that guy talkin' to his dog?' Having Samson gives me a chance to love someone every day. Sometimes I'll step outside of the house, to run to my car quick, or go into the garage. When I come back in, he gets so excited, 'Where did you go?' I'm like, 'Man I was just outside a couple of minutes.' It's easy to get lost in alone-ness but now, I'm not alone, I'm never alone, you know.

– Emilio Gallegos, U.S. Marine Corps (1999–2010). Deployed to Iraq. Purple Heart recipient. Service dog and training provided by Operation Freedom Paws in 2016.

and author of *Made for Each Other: The Biology of the Human-Animal Bond*.<sup>1</sup>

One of my first questions about service dogs was, how can they help reduce the symptoms of PTSD? The answer lies in their extraordinary ability to merge into our hearts and homes. They quickly become family and much more. Emilio Gallegos captured it when he said: "Having Samson gives me a chance to love someone every day."



*Filming Dog Walk Home, (Picture Courtesy of Vicki Topaz).*

Like all good friends, they know us well – often better than we know ourselves. Their extraordinary sense of smell can alert them to the chemical changes that signal the onset of stress, anxiety and night terrors and pull their Veteran back from these emotional pitfalls and remind them they are safe and loved.

When Ramon Reyes first brought Huey home, there happened to be fireworks in the neighborhood. The explosions echoed Ramon's wartime experiences, but Huey was able to detect his rising anxiety. By jumping on Ramon's lap and licking his face, Huey created a distraction and prevented what would have surely been a triggering event.

As Meg Daley Olmert goes on to explain in the film, the social brain network is also the anti-stress network. So, when we pet, hug, snuggle and sleep with our dogs we are producing the brain chemicals that ease the symptoms of PTSD.

These are just a couple of examples that show us how service dogs anchor their Veterans in the present moment.

**T**here are times that I push people away, especially when it gets close to anniversary dates of certain events that happened in Iraq. Huey won't let me. He senses it. He'll come up and start nudging at me like, 'Hey, pay attention to me. Pet me.' He won't stop until I actually pay attention to him. Every time I say, 'Leave me alone.' He comes back and he's at it again. He helps with fireworks too. The first night some fireworks went off, I got real bad anxiety. Right away, he jumped on top of me and started licking my face. I was so amazed. And still to this day if there are fireworks going on, he comes up to me.

– Ramon Reyes, U.S. Army (1995-2012). Two deployments to Iraq. Service dog and training provided by Operation Freedom Paws in 2017.

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## The Impact of COVID-19

**C**COVID-19 has put Veterans at increased risk. Forced isolation, stress, fear of the unknown, and suicidal ideation are just a few of the factors they face. Not to mention the very real risk for Veterans whose immune systems were compromised in the military conflicts in which they served. For this group, fear of contracting the virus can trigger a vicious feedback loop and cause even higher levels of stress and anxiety. In a Zoom recording with Ramon Reyes, he shared this comment: "The past couple of days I haven't been able to sleep right. The nightmares have started. There are times that it takes me back overseas, just fighting an enemy we cannot see." We were also able to record Emilio Gallegos via Zoom, and he shared this with us: "I see how it can go one or two ways: having comfort in it, because I've been here before emotionally and mentally, or having extreme discomfort, because this reminds me of a bad place. And I don't want to be there again. You know what I mean?"

The film revisits each family post shut-down to see how they've managed the challenges of COVID-19 and to catch sight of what their futures hold. To no one's surprise, we learn that Samson, Artemis and Huey continued to play a profoundly stabilizing role for the whole family as the pandemic played out.



Filming Dog Walk Home, (Picture Courtesy of Vicki Topaz).



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## Helping Veterans Succeed: Why Dog Walk Home – and Why Now?

**W**hen the peace treaty is signed, the war isn't over for the Veterans, or the family. It's just starting."<sup>2</sup> –Karl Marlantes, author, Vietnam War Veteran, U.S. Marine Corps

How can we expect Veterans to smoothly reintegrate into civilian life when daily functioning is so difficult? Why do they wait so long before asking for help? And why do service dogs make such a positive difference?

PTSD is a recognized crisis within the U.S. military. An estimated 2.2 million U.S. Veterans suffer from PTSD. Approximately 20.6 Service Members die by suicide every day. Research, including a study by the Veterans Administration finalized in 2021, has found that service dogs offer a valuable therapeutic treatment option for those with "invisible" disabilities such as PTSD. With *Dog Walk Home*, we hope to bring yet another voice to the many who are encouraging the Veterans Administration to provide Veterans in need with another life-saving intervention:

the healing love that is waiting for them at the end of a leash.

The three Veteran families featured in *Dog Walk Home* are representative of the wider audience the film is made for. Namely, underserved Veterans and the communities that support them, including Latino, LGBTQ, and BIPOC groups as well as seniors, women, and disabled Veterans. An even wider audience of mental health workers, educators, and of course all dog lovers will draw their own meaning from the film.

Further, by holding up a mirror that reflects hope back to other Service Members and families who face similar challenges, we believe *Dog Walk Home* can offer a roadmap and urge them to seek help.

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## It Takes a Village (to Make This Film)

**T**elling such stories through the medium of film is, to say the least, a collaborative process. Years before *Dog Walk Home* began to take shape, I was introduced to Mary Cortani, herself a Veteran and Certified Army Master of



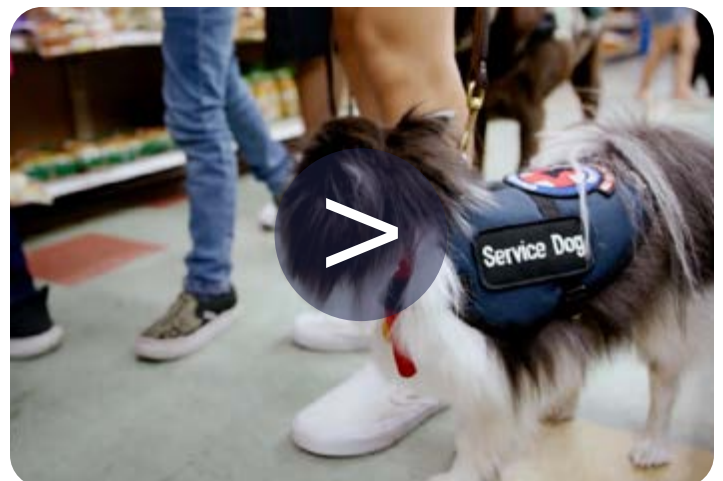
Canine Education, and the founder of Operation Freedom Paws (OFP), a nonprofit that partners Veterans with service dogs. It is thanks to her that I had access to the Veteran community served by OFP. Being among them and hearing their stories opened my eyes and my mind to a world I had been seeking. I am so grateful for the many trusting relationships with Veterans and their families that I developed over time.

To help share these stories of trauma and healing, I joined forces with a like-minded filmmaker, Wynn Padula. Wynn collaborated with Iraq War Veteran Bobby Lane and other Veterans with disabilities when he codirected and shot *Resurface*, an award-winning Netflix original short documentary about the healing power of surfing for Veterans traumatized by PTSD.

The stories of *Dog Walk Home* are augmented with critical “how and why” insights from experts in the science of the human-animal bond, trauma specialists, and service dog training professionals. They help explain what we see and hear from our Veterans and their families about the healing power of their

service dogs featured in our film. We will also get a better understanding of why the Veterans Administration has been reluctant to fund service dogs to those with the “invisible wounds” of war and the progress that is now being made.

To see the full lineup of our remarkable and dedicated crew and film advisors, please visit our website at [Dog Walk Home](http://DogWalkHome.com). The film is currently in production with an anticipated release date in 2022. This project is made possible with support from California Humanities, a non-profit partner of the National Endowment for the Humanities.



**A**rtemis has affected my entire life, both going out in public and being at work. She's also helped my marriage quite a bit—I'm able to be present a lot more. I don't stay locked in my head as much. Artemis helps all of us be aware of when I'm feeling particularly anxious or when I'm feeling angry. Having a service dog is an incredibly vulnerable thing because you can't just hide your feelings and emotions because these darn dogs, they know, they can smell it, they can feel it. Artemis helps make me more aware and more accountable for who I am and how I show up in the world.

— Kim Voss, U.S. Army (1989-1993). Military Intelligence. Service dog training provided by Operation Freedom Paws in 2019.

View a short 3-minute sample trailer for *Dog Walk Home*: <https://vimeo.com/386530510>

We are devoted to telling these stories of healing and transformation to prove to Veterans and non-Veterans alike that recovery is possible for those who seek help. If you are reading this right now, we are thankful to have reached you.

Contact: Vicki Topaz, San Francisco, CA, email: [vicki@vickitopaz.com](mailto:vicki@vickitopaz.com), text: 415-298-9465

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## ABOUT THE AUTHOR

**Vicki Topaz** has worked as a photographer for the past 25 years. Since 2010, she has focused on a multimedia project called HEAL! This endeavor documents Veterans sharing stories of their military service and their struggles with PTSD – as well as the service dogs who provided lifesaving aid. Her short documentary *Veterans Speak About PTSD* garnered significant public attention and was screened in 17 film festivals nationwide. Her deep, personal commitment to telling these stories is rooted in her childhood experiences with her own father, a WWII tail gunner who returned home with PTSD, which was then unrecognized. Prior projects include *SILVER: A State of Mind*, a photographic series about women and aging that was exhibited at the Buck Institute for Research on Aging and featured in the *New York Times*, the *Times of India*, NPR's *Forum*, and other international news media. Her 2008 monograph *Silent Nests* depicts the first photographic investigation into the medieval dovecots of Normandy.



# How Service Dogs Can Reduce Veteran PTSD and Save Lives

By Mary Cortani, U.S. Army Veteran and Founder/Executive Director of Operation Freedom Paws

I am a Veteran who served in the Army from 1975 to 1984. When I signed up to serve, I joined the Women's Army Corps which was absorbed into the Army shortly after my basic training. This was a tough time for women serving, as male troops did not really want us there. I survived and became an MP with a specialization of K9 handler and Army Master Instructor of K9 Education. As my service started at the tail end of the Vietnam War, I am a Vietnam Era Veteran. This

was a time of a war within all military branches... and a war that continues today – Military Sexual Trauma (MST).

I am not a clinician or medical professional. I am a Veteran using what I have learned to continue to serve and help Veterans and Non-Veterans (civilians) heal through the use of amazing gifts called service dogs. Not every dog can be a service dog, but those who are change and save lives every day.

## Tough Transitions to Civilian Life

Every Veteran goes through a transition when coming out of the military and active duty. It is hard; I did not know how to fit in with non-Veterans. My world was and is black and white, right and wrong, and clear boundaries, just like it is with many other Veterans. Civilian life is filled with gray areas. It took me two years to figure out where I was going to live! Then I had to figure out what I was going to do, how I was going to make a living, and survive. I lived with friends and worked 2-3 part-time jobs at the same time. I struggled.

I finally went to school to become an electronic technician, followed by a degree in Computer Engineering. Fast forward to the early 2000's and I had the rug pulled out from under my feet again. I had worked hard to become an executive in a high-tech company. I was now much older and later in life; the career I had

built was suddenly gone. I was let go from a very lucrative position, basically fired for the first time in my life. What was I going to do now? I would have to reinvent myself again.

## Finding my Future with Service Dogs

I had never stopped training dogs. In fact, I even did K9 search and rescue throughout the years. It took me a couple of years to figure out that I needed to go back to my passion, training dogs full-time. In 2007 I met a dog that would forever change the course of the rest of my life, CJ (pictured below), my heart dog. So, I decided to start a full-time dog training business (K9 Coach Plus) and became an American Kennel Club Canine Good Citizen (CGC) Evaluator in 2007.

In 2010, a Marine Veteran with suicidal ideation reached out to me to help him acquire a service dog. He had been on the waiting list of existing organizations for years. I realized I was uniquely positioned to help my fellow Veteran find a rescue dog and teach him how to train a dog to become a service dog, to help him develop the ability to communicate again, and to teach the dog to perform tasks that would help reduce his PTSD symptoms. Hence, Operation Freedom Paws (<https://operationfreedompaws.org>) was born out of K9 Coach Plus, and became a nonprofit and my life's passion.





*CJ, Mary's search and rescue buddy and service dog task demo boy.*

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## **Operation Freedom Paws: Serving Veterans with PTSD and other Military Traumas**

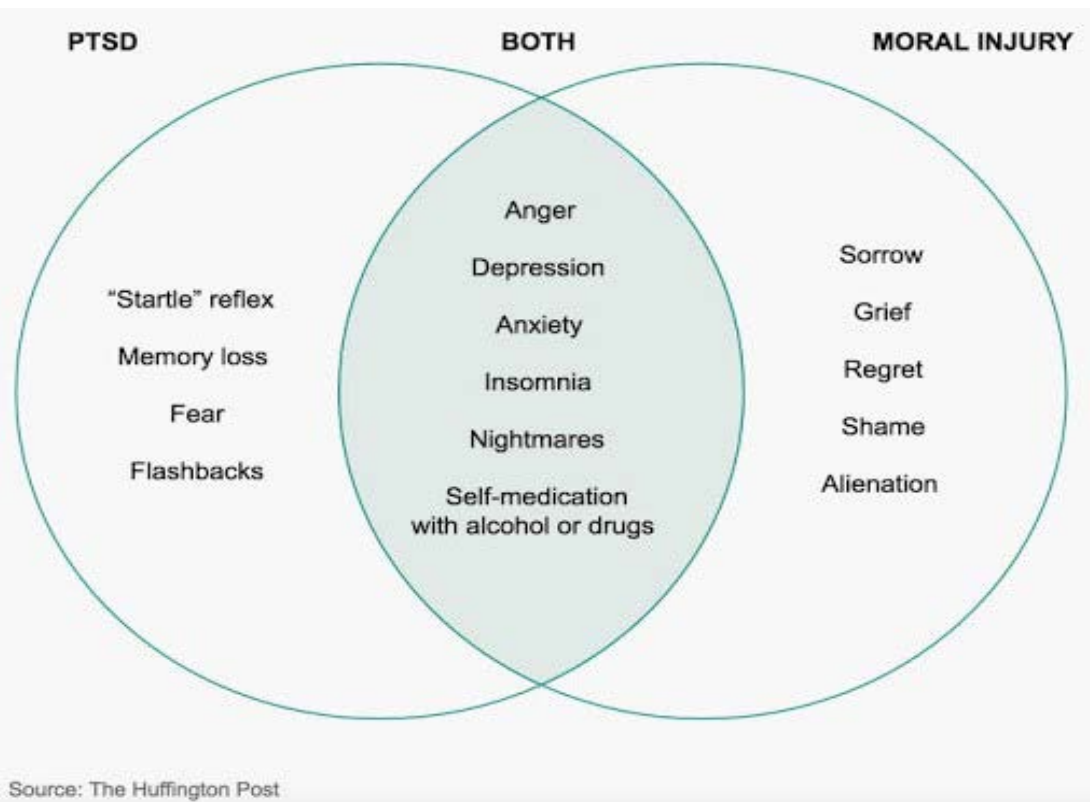
**T**rying to understand what challenges and injuries face our Veterans sent me on a new journey of learning and understanding. What was Post-Traumatic Stress Disorder (PTSD) and what were the other issues my fellow Veterans were dealing with? Combining my service and civilian training, I made that Marine a promise to help as best I could and that he was not alone.

I founded Operation Freedom Paws after working with that first client. This led to the creation of a 48-week service dog training program based on my knowledge and hands-on experience to serve my fellow Veterans. Operation Freedom Paws became a nonprofit in September 2011. This year we

will be celebrating 10 years as a nonprofit, while providing service dogs (83% of which are rescued dogs) and other services to our clients and their families over the last eleven and a half years.

What I have learned throughout those years is that healing doesn't happen in isolation. PTSD affects families when untreated. It can destroy families and lives. But healing can save families and lives, and the use of a service dog can bridge the gap of family members' need for understanding of why their loved one is changed.

To date, Operation Freedom Paws has helped over 460 Clients and their families. We have also rescued 380 dogs to be trained as healers for Veterans, first responders and civilians. Our program uses mentor trainers who have graduated from the program. These trainers have become employees who lead classes in our 48-week



Service Members can experience Moral Injury on the battlefield, such as deep remorse for killing children or witnessing horrific acts of war; in garrison, such as being raped by peers or leaders, or failing to report witnessing

harassment/rape of others; or institutional betrayal (by chain of command or government, such as for failures to fix known problems or legitimate grievances). Any of these traumas can have lifetime impact on Veterans. Many Veterans have experienced more than one moral injury and carry deep wounds for their lifetimes. Service Dogs are one of many healing options to alleviate these wounds and help Veterans reconnect to themselves, their families, and their communities.

## PTSD: An Overview

Post-traumatic stress disorder (PTSD) captured the American public's consciousness when the American Psychiatric Association added this diagnosis to its *Diagnostic and Statistical Manual of Mental Disorders*<sup>1</sup> after thousands of Vietnam Veterans were identified as having serious mental health problems from their service a decade or more after their return from war. These symptoms were part of a cluster specific to war trauma that include physical (headache, fatigue, sleep problems, dizziness, and sensory sensitivity), cognitive (memory, problems focusing, slowed thinking, trouble putting thoughts into words) and emotional (depression, angry outbursts, personality changes, panic, hopelessness, avoidance) distress.

## Moral Injury

Moral injury "involves psychological and spiritual wounds that result from experiences that conflict with one's deeply held beliefs of right and wrong."<sup>2</sup> In the military,

harassment/rape of others; or institutional betrayal (by chain of command or government, such as for failures to fix known problems or legitimate grievances). Any of these traumas can have lifetime impact on Veterans. Many Veterans have experienced more than one moral injury and carry deep wounds for their lifetimes. Service Dogs are one of many healing options to alleviate these wounds and help Veterans reconnect to themselves, their families, and their communities.

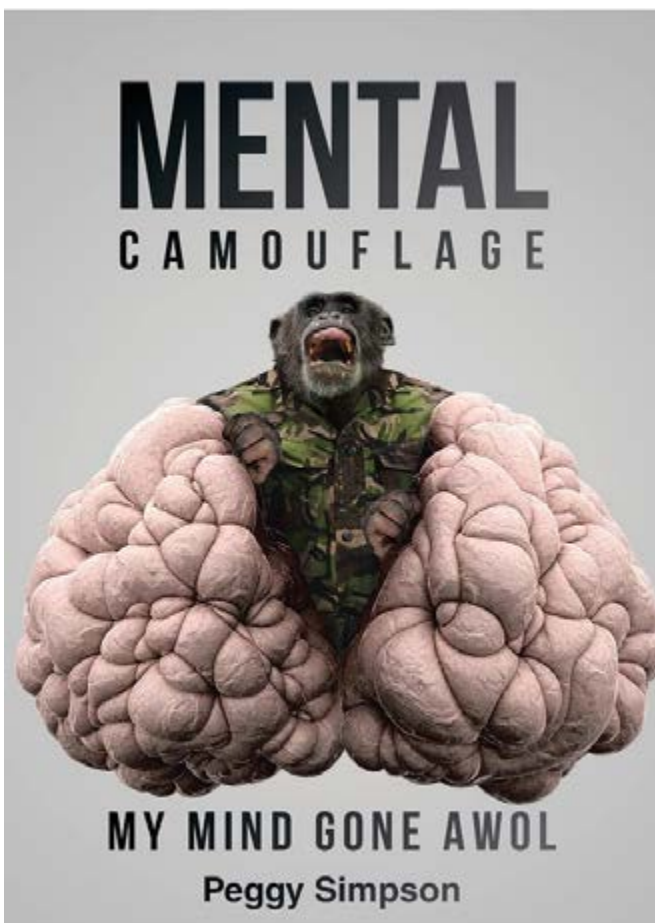
## Traumatic Brain Injury (TBI)

TBI occurs from a sudden blow or jolt to the head. Brain injury often occurs during some type of trauma, such as an accident, blast, or a fall. Often when people refer to TBI, they are mistakenly talking about the symptoms that occur following a TBI. Actually, a TBI is the injury, not the symptoms. TBI's among Servicemembers and Veterans are one of the signature injuries of the Iraq and Afghanistan wars. They can result in psychological, neurological, and physical needs where a service dog can provide significant help.

## How Service Dogs Help Veterans

There is a lack of understanding and a limited body of evidence-based research demonstrating how service dogs can help individuals with invisible wounds and injuries. We are a visual society; what we cannot see we do not believe. Dr. Shauna Springer, Chief Psychologist with The Stella Centers and leading trauma expert, says it best: “even though PTSD is said to be an invisible wound, it is NOT invisible with the right scan.”<sup>3</sup> She is referring to high intensity MRI scans that can show brain activity at the micro-level which is not always apparent on older scanning equipment.

While PTSD is evidenced in physiological changes in the brain that can only be seen with such scans, it is my experience that these changes can also be detected by a trained service dog’s nose. Physical changes can be noticed by another person. However, while biological and chemical changes are invisible to the human eye, they are readily perceived by a dog’s nose and observable in the dog’s reactions to those changes. A dog’s keen sense of smell to human and environmental changes has been evidenced in my 45 years of training many kinds of dogs in different capacities, including Sentry, Patrol/Apprehension, Explosive Detection, Narcotics, and Search and Rescue.



James experienced multiple traumatic events, beginning from the time he was a young boy, culminating with his military service in the Ulster Defense Regiment (UDR) in Northern Ireland. Upon his discharge from the UDR, James became a breakfast chef. However, the impact of all that led up to his CPTSD left him emotionally crippled and unable to hold down a steady job.

In addition to professional counseling provided by the National Health Service (NHS), writing about the many causations that ultimately left James with CPTSD has helped tremendously to loosen the power this disease has held over him for so many years.

James is now able to walk alongside others in the military who are on the road to healing. He looks forward to speaking into the lives of those who are suffering with PTSD.

• Available through Amazon, Barnes & Noble, Google Play and iTunes. •

<https://www.youtube.com/watch?v=BM1oOAM4CY>

My understanding from Scent Dog training while in the military is that 60% of a dog's brain is dedicated to the sense of smell. Dogs can smell at least 10,000 times better than we can.

For example, Diabetic Detection Dogs can smell changes in blood sugar levels in humans, detecting a change in the chemistry of the human body. Our body chemistry also changes with trauma. It changes every time the "fight or flight" reflex kicks in. Dogs can alert the handler/owner to these changes as they are occurring, so that the handler can take action to mitigate the stress accompanying traumatic memories, flashbacks, or nightmares. These alerts are known as service dogs' tasks.

Dogs communicate with body language. An alert can be a nudge, a wet nose, or a paw that wakes individuals up from nightmares related to their trauma and brings them back to the present. Service dogs lessen anxiety and isolation. A dog can act as the Veteran's eyes and ears, as well as a gate guard between a Veteran and strangers. These dogs provide safety to allow Veterans to rest and relax. Many of our clients report that they have experienced improved sleep and increased trust in their environment since having their dogs.

When a Veteran enters into a hypervigilant state and becomes agitated, his or her service dog

leans in or uses his nose to touch the Veteran's arm, or touches/licks the hand, effectively saying, "focus on me, I have got you." Veteran handlers can also train their service dogs to set safe boundaries in public to reduce their stress, enable them to feel safe, and re-engage in their communities. Examples of where service dogs help set boundaries with strangers and in potentially threatening situations include grocery stores, banks, workspaces, social engagements, and restaurants. When a Veteran begins to feel uncomfortable in a situation around

someone else, he/she can issue a command to the service dog to "block." The dog will respond by standing between the Veteran and the perceived threat/approaching individual(s). Here at Operation Freedom Paws we have a list of over 130 commands. Examples of tasks include:

Block, Watch My Back, Post, Pressure, Lap, Find Exit, Get Meds, and Get Help.

*When a Veteran enters into a hypervigilant state and becomes agitated, his or her service dog leans in or uses his nose to touch the Veteran's arm, or touches/licks the hand, effectively saying, "focus on me, I have got you."*

## Operation Freedom Paws: Trainer/Dog Examples

At Operation Freedom Paws we train each Veteran to train the dog that has been matched with him/her for their specific medical needs. Having Veterans train their dog or puppy gives them a mission, versus being given a dog already trained. By training the



*Chau with Apollo (Picture Courtesy of Vicki Topaz).*

dogs themselves, Veterans gain confidence, a sense of purpose, and learn to recognize their own emotions, reduce anger, and become more engaged with family and friends. Similarly, each assigned dog learns specific commands from a single trainer/owner, forms a bond with their Veteran from the beginning of training, and does not have to retrain with the Veteran after being trained by another person. (Some service dog organizations assign dogs already trained, others do not.)

Example 1: Operation Freedom Paws Veteran Service Dog Team, Chau and Apollo. Chau suffers from military service-related PTSD. He has shared with Operation Freedom Paws that being paired with his service dog right before the COVID-19 pandemic saved his life. "Apollo is the light of my life that has pulled me out of the darkness."

Example 2: Operation Freedom Paws Veteran Service Dog Team, Kim and Artemis. Kim is a frontline healthcare worker who has experienced military service-related PTSD and a confluence of triggers due to the COVID-19 pandemic.

Kim shared, "When I am driving down the

road and she steps forward onto the center console and leans against my right shoulder or kisses my cheek, I know she is communicating. She is reminding me to stay present because I am in my head too much."

When a Veteran with PTSD is experiencing any physical, cognitive, and/or emotional symptoms listed earlier, a service dog can alert and mediate the symptom before it becomes a crisis.

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## How a Service Dog Helps

A service dog's alert system works like an early warning detection system for its trainer's changes in body chemistry. The dog prompts an individual to take action, such as taking medication or implementing coping skills they have been taught in our service dog training program. Service dogs can help Veterans with PTSD, MST, Moral Injury, and/or TBI to re-establish trust with an animal when trust of people has been severely disrupted. Operation Freedom Paws' clients often come into the program very guarded and non-communicative. When they are matched and start working with their service dogs in training, they learn to trust in the communication between themselves



*Kim with Artemis, (Picture Courtesy of Vicki Topaz).*

and their dogs, and slowly that trust expands to include people. These dogs help Veterans move toward positive outcomes in their lives. Trauma and broken trust can also be devastating to relationships and families. By establishing new trust with their service dogs, individuals can transform a cycle of trauma into a cycle of healing within their families.

emotional support dog pairing in improving the quality of life for Veterans with PTSD.<sup>4</sup> This study confirmed the benefits of service dogs over emotional support dogs, and the VA has moved forward in referring Veterans for service dogs and providing some funding for associated costs.

More research needs to be done. Operation Freedom Paws is currently participating in



*Adonis Family with Smokey (Picture Courtesy of Vicki Topaz).*

Example 3: Veteran Service Dog Team, Adonis and Smokey. Since graduating from the OFP program, Adonis has started a new job, become a mentor-trainer to new clients in the OFP Certified Service Dog Training Program, and welcomed his daughter into the world.

## Research on Service Dogs for PTSD

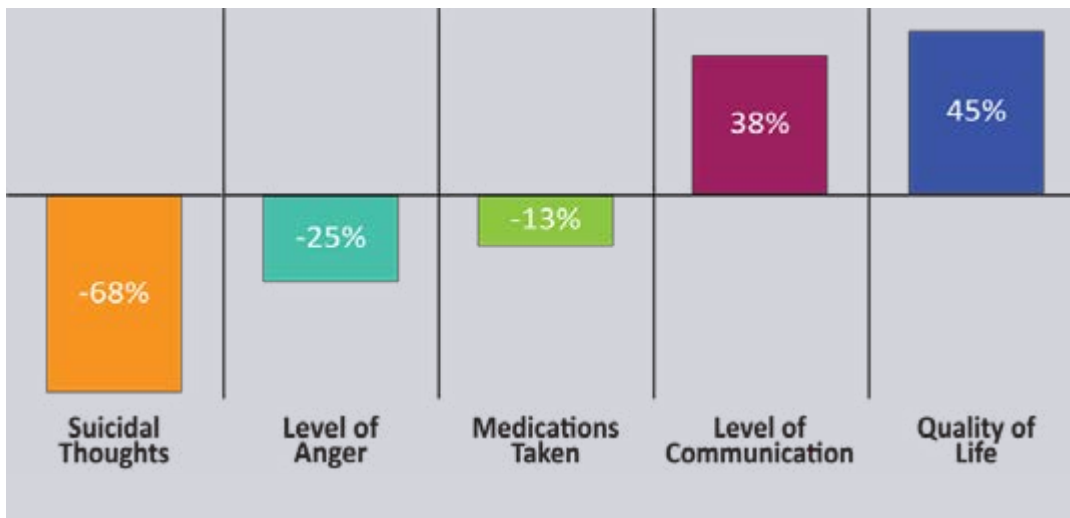
While research on the effectiveness of service dogs for PTSD is limited, a recent study conducted by VA compared service dog versus

a John Hopkins University research program with seven other service dog organizations. This study is being conducted by Jeremy Ramirez for his doctoral dissertation to determine the effects of service dogs on Veterans with PTSD. We look forward to the results of his study, due out in 2022. We also strongly encourage other researchers

to undertake such studies with Veterans with military moral injury, military sexual trauma, and traumatic brain injuries. Such studies will build a body of evidence to expand service dog programs and access within the Veterans Administration, where many Veterans go for their only source of treatment.

## OFP Outcome Data, Limitations, and Partnerships

Service dogs are making a real impact on the lives of our Veteran clients with military-connected PTSD. Operation Freedom



graduates of our program undergo this treatment with positive outcomes beyond what they have received from

Paws Post-Program Survey results from a group June 2020 documented significant decreases in suicidal ideation, levels of anger, and amount of medication being taken. The survey, completed by 75 Program graduates, also showed a self-reported increase in the level of communication and quality of life.

**Limitations:** Service dogs are just one tool that should be part of a client’s tool belt. A service dog should be used in combination with other treatment modalities such as individual and group therapy, expressive arts therapies, EMDR, and others. There is no one size fits all; service dogs will not work for everyone and should not be the only treatment. Nor are they the magic pill that will cure everything.

OFP is always looking for other services, treatments and tools that complement our program to help our clients on their healing journeys OFP has partnered with The Stella Center and its Chief Psychologist Dr. Shauna Springer, leaders in medical trauma, to advance the healing of individuals with PTSD by combining our healing modalities. According to Stella, PTSD is a biological injury where the response in the brain to an individual’s constant “flight or fight” state can be seen on an MRI.<sup>5</sup> The Stellate Ganglion Block (SGB) is a biological treatment that helps to “reset” an individual’s brain and help return it back to its baseline prior to the trauma.<sup>6</sup>

OFP supports the use of the Stellate Ganglion Block (SGB) as we have had Veteran

their service dogs. The shift to “reset” baseline appears to help restore positive imagery and quiet the internal “noise,” as indicated in the example on right.

Example 4: (client with SGB intervention): Adonis, a Veteran client referenced earlier in this article, received the Stellate Ganglion Block (SGB) after completion of our program. Adonis had already become a mentor-trainer and a father before he underwent the Stellate Ganglion Block treatment. He reported that the treatment led to his first positive dream about his military service.

This example illustrates the need for Veterans to find complementary treatment interventions beyond their service dogs in order move them forward toward hope and restoration of positive thoughts and memories. I always advise and encourage our Veteran clients to have their service dogs with them 24/7, while they must pursue other treatments for their military-related traumas.

## PTSD Dogs Fall Under Psychiatric Service Dogs

**P**sychedelic Service Dogs is a broad category describing service dogs that can provide support to individuals with a wide range of mental illnesses, and PTSD dogs are included in this classification. Psychiatric Service Dogs are often cross trained for other physical and cognitive disabilities as well.

“I was skeptical; I didn’t understand the goals, but I was willing to try anything. I experienced loss, but for the first time was supported and allowed to express myself. OFP has given me freedom to live: Live life, live emotions, live and love.” (Matt & TJ)



### **Examples of tasks:**

- Provide Medication Reminders
- Lay Across Handler to Provide Deep Pressure Therapy During Panic Attacks
- Provide Tactile Grounding via Nuzzling or Licking
- Apply Gentle Teeth Pressure to Forearm to Interrupt Dissociative Episode
- Alert Handler to Episodes of Rage or Strong Emotion
- Interrupt Repetitive Self Harm
- Retrieve Self Care Kit
- Wake Up Handler Having Nightmares
- Interrupt Flashbacks
- Provide “Reality Check” so Handler Can Verify Hallucinations Aren’t Present
- Stabilize Handler’s Routine
- Burrow Under Legs of Handler to Raise Blood Pressure
- Lay Across Chest to Help Handler Clear and Slow Breathing
- Nudge Unconscious Handler into Recovery Position
- Body Block a Dissociated Handler from Going Through Doors
- Help Provide a Physical Anchor

### **Summary and Recommendations**

**W**e have a saying at Operation Freedom Paws that “Training never ever ends.” We tell every client that the path to healing is in the journey; put all the tools in your tool belt that you might need in the future, and not just those you need in the moment. The most valuable tool for many of our graduates is the service dog who accompanies each Veteran on the rest of his/her healing journey. When clients struggle to face their pain and trauma, their service dog can help them. The nose knows; dogs don’t lie.

**Recommendation 1:** Finding a service dog. Many Veterans and clinicians have no resources for finding a service dog. There are many organizations that train dogs and match Veterans with a service dog, but there is no national accrediting board at this time that certifies organizations. Veterans need to search carefully for an organization that has a history of good “matches” and evidence of positive outcomes, just as the would select a therapist or doctor. For more information on where to find a service dog, readers are directed to contact the Operation



Freedom Paws at one of the following emails: [info@operationfreedompaws.org](mailto:info@operationfreedompaws.org). or [mcortani@operationfreedompaws.org](mailto:mcortani@operationfreedompaws.org).

Readers may also reach out to the Association of Service Dog Providers for Military Veterans at (<https://servicedogs4vets.org/>).

**Recommendation 2:** Partner with other organizations to publish more research. Research needs funding, a commitment to develop designs with measurable protocols, and subjects willing to participate in research. To move this field forward, we need to develop a body of evidence-based models.

**Recommendation 3:** Veterans need to ask their local VAs to expand service dog access and

funding of service dog nonprofits to provide dogs. Promotion of programs happens from the grassroots level as well as from the top down. Veterans already with service dogs are important partners in promoting access for those waiting for dogs.

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## ABOUT THE AUTHOR

**Mary Cortani** joined the Army and was one of the last of the U.S. Army's WACs (Women's Army Corps). She served from 1975 to 1984. She became a certified Army Master Instructor of Canine Education while serving in the military.

Mary left the Army, earned her degree in computer engineering, and worked in information technology until 2007 while still training dogs on the side and participating in K9 Search and Rescue. In 2007, Mary started a fulltime dog training business and became an American Kennel Club Certified Canine Good Citizen® Evaluator during this time.

In 2010, Mary was contacted by her first Veteran, who had been on another organization's service dog waiting list for three years. Since then, she has accepted over 462 clients and their families into the Operation Freedom Paws program and rescued over 386 dogs who needed jobs. Mary has trained sentry, patrol, narcotics, explosive detection, search, and service dogs.

Mary has been training service dogs for over eleven years and has over 45 years of dog training experience. Mary continues as an American Kennel Club K9 Good Citizen Evaluator, and has won numerous awards since 2010, including, the 2012 Top Ten CNN Hero, the Red Cross Clara Barton Award, the Loretta Scott King Award from Martin Luther King Foundation and the KSBW local and national Jefferson Award.



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