



Pastoral Care and Counseling with Military Families

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Abstract

The complex human experience of military service and the stress suffered by millions of military families each time a loved one deploys present unique challenges and opportunities in providing pastoral care and counseling. War and military service impact many facets of our society, as well as generational and interpersonal relationships. This article speaks to both academic and practitioner communities, and provides a vision for effective pastoral care and counseling with military families drawing on resources from family systems theory.

Keywords

military families, deployment, combat, family systems, Post-Traumatic Stress, veterans, military service

Introduction

We've all seen the disturbing headlines: sudden, unexplained violence perpetrated by those who have served our country in uniform. Instances of suicide, domestic violence, and even mass killing have become a part of our public consciousness and social concern. But these critical events emerge from complex situational contexts that few civilians comprehend. The ability to effectively and compassionately respond to veterans and military families requires more than treating the most extreme and obvious behaviors.

As communities of faith and pastoral care providers, we must go deeper in our understanding and in our response. This paper explores three critical care-giving challenges particular to a military context and proposes useful applications for each: family systems relational triangles, complex impact of multiple stressors, and transgenerational mapping.

A Case Study

The particular intersectionality of social identities contributes to one's response to and meaning-making of traumatic experiences (Ramsay, 2013; Doehring, 2015a). This is a piece written by Lori Volkman, a deputy prosecutor, mother of two and military spouse. Given her profession, she has attained a graduate level education. Her racial and ethnic identities and economic status are not known. Her story, rooted in her personal experience, should not be generalized, but it is included here to test the proposed approach to pastoral care.

One of my most difficult struggles during this year's reintegration process has been giving my husband the space he needs to merge gracefully back into our lives after a year-long military deployment. Since I had to get by without him for so long, it seemed natural that his return would signal the green light for me to freely paw him and breathe on him and smother him to death. Oh sure, he likes it for about a New York minute. Then he delicately requests a little space. I frequently respond just as delicately.

'Space?! I just had 15 months of space, Jackwagon!' Ahem. I mean, 'Didn't you miss me, Dearest?'

This idea of keeping my words to myself and my mitts off him really offended me when the requests for space dragged on and on into the sixth and seventh month after his return. In fact, it really made me feel angry. Let's just say I bought a kick-boxing DVD. Let's just say I particularly enjoyed the mental vacation I took whenever the neck-chop segment came on.

After I stumbled my way through the anger like a bull with a wrecking ball tied to its tail, I was left feeling horribly insecure. I stood in front of the mirror wondering what in the world was wrong with me. Homecoming was supposed to mean reunion. It was supposed to mean romance. It was supposed to mean rekindling. Not stupid unemotional idiotic time-wasting illogical dispassionate friggin' space.

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I tried being nicer (fake). I tried being a supermom and superwife (exhausting). I tried being demanding (annoying). I tried twice a day workouts and a vegan cleanse (cranky). I even tried being funny, which actually worked for me from a mental health standpoint until I realized I was the only one laughing. Then it was just sad.

The bottom line is that I tried everything, and everything I tried just created more space between us. As the months rolled on, my husband seemed farther and farther away. Enter, the hookah.

This was something he had occasion to do Over There. This was something he enjoyed doing with his other friends. This was what he wanted for Christmas: a hookah. And the winning model wasn't a little table-top variety, either. Noooo. It had to be the big four foot high, four-hose type contraption with colored glass and velvet tubes and rich wooden handles. It almost didn't even fit in our car.

The grape-mint and melon shisha smells filled the car and he smiled as we drove away with the huge incriminating device in our trunk. He unloaded it gingerly once we arrived home but there it sat in our living room for the next eight months, collecting dust and requiring explanation whenever a police chief's child or a housekeeper or a church friend came over. 'It's a hookah,' I'd volunteer. 'Um. My husband brought it home after his deployment.' Fast-forward. It has now been ten months since my husband's return and five months since the hookah came to gather dust in my living room. It also marks my complete and utter resignation to feigned resiliency and contrived optimism. I started coming home each night in a daze. I fixed dinner, managed what little housework I could stand, loved on my kids, and went to bed. I quit staying up late, quit waiting for him to come to bed, and quit wandering into his office to see what he was up to. I quit lingering near him waiting for a kiss. I quit asking him about his day. I quit volunteering to tell him about mine.

It just sort of happened.

And then, it was husband's birthday this week, and after we came home from a birthday dinner there it sat, mocking us: the hookah. My husband was suddenly polishing it, disassembling it, checking the seals, igniting the coconut shell coals, packing gooey sweet shisha into a ceramic bowl and filling the psychedelic glass bulb with just the right amount of hot water. I joined him on the deck, surprised by his level of conversation and engagement with me, and took my first reluctant suck of the foreign-smelling tube and I choked.

But as we sat there, the smell got sweeter and I learned to go slowly. I breathed in the melon tobacco and let it soak into my senses. I watched my husband as the smoke curled around his lips and he released more than just a breath. We talked in a way that we rarely do as the sun set and my husband's feet brushed against mine, propped up on the table between us. He told stories without that faraway stare, not reminiscing so much as sharing them with me.

And he smiled, and his shoulders dropped into a comfortable curve. It was like time stood still for a little while. And I looked over at him. Even the silence was comfortable, now.

'What was it like? Is this similar to what you had over there?'

'Yeah, pretty much. I'm glad you like it. Not everyone does.'

'Why did you like it so much?'

'It was one of the only times we really relaxed.'

'Relaxed?'

'When we worked, we were scrambling. The idea of sitting for hours was a luxury. The idea alone was relaxing.'

The space between us seemed to disappear, and the outstretched hand that has kept me at a distance so many times was laid open on his lap. He used it to hold the fear of rejection and the ire of reintegration at bay.

The days since we found the hookah have felt different. I've been able to leave space and he's been able to walk into it. So whatever it is that is standing between you and connection, whatever phase of reintegration you're in, I hope you can read a story like this that inspires you to find your hookah. I hope you can learn from my mistakes, and be unselfish enough to create the space necessary to allow your military spouse to find whatever it is that connects your two worlds. And I hope you can be smarter and braver than I was in realizing that the process of finding that thing, that hookah, just takes time.¹

Triangles: Military Institution as Force in Relationships

Relational triangles are a familiar concept to many of us who have been exposed to family systems theory. This concept asserts that all relationships are held in tension not between two but among three parties, and that 'the triangle begins with one person distancing from the other out of anxiety' (Richardson, 2010, p. 48). Working to resolve an issue between two persons may succeed to an extent, but without considering the role of the third, any resolution between the pair may prove temporary and/or unsound. There are triangles everywhere. Each time a counselor meets with a couple, the presence of three persons in the session means that a triangle is operating and must be attended to responsibly.

These triangles exist not only between three persons, but also between persons and institutions. Just like a person, an institution enacts needs, wants, boundaries, and evokes emotions, reactions, and responses from the persons who are involved in its jurisdiction. As pastoral theologian Larry Kent Graham reflects, 'all pastoral situations involve a bewildering set of interconnections between the psyches of persons and the larger forces influencing them' (Graham, 1992, p. 13). Just as a counselor would want to be aware of how persons are relating to

members of their family and important friends, it is critical to investigate the role of one's employment, membership organizations, and religious communities as formative and impacting forces in people's lives.

The institution of the military, in my experience both personally and professionally, is by design the most engrossing and demanding institution in American society. It encompasses the most forceful elements of institutional power: service members are subject to the most sudden and life-altering demands that employment responsibility could entail, 24 hours a day, 7 days a week; one's personal sense of identity is deeply formed in the culture and ethos of the institution to the extent that it is sometimes hard to tell where the service member ends and the person begins; and one's personal choices and alternative thinking are sacrificed for the higher purpose of defending one's nation and freedom itself in the most sanctified sense possible. The military is a total institution, demanding all and providing all. As Goffman said of such encompassing situations: 'A total institution may be defined as a place of residence and work where a large number of like-situated individuals cut off from the wider society for an appreciable period of time together lead an enclosed formally administered round of life' (Goffman, 1968, p. 11). Or as Marines are fond of saying: 'If the Marine Corps wanted you to have a wife, they would have issued you one.'

Providing effective pastoral care with military personnel and their families requires working attentively with the total institution of the military and its impact as an actor in relational triangles. Every service member has a personal and professional relationship with the military institution, as does his/her spouse, partner, parent or child. Whenever there are military family members working on their relationships, there is the overt or covert involvement of the military institution.

Because the service member chooses to meet the demands of the military, what sailors know as 'the needs of the Navy', that in some form take him/her physically and energetically out of proximity and connection with the family unit, a spouse, partner or child will construct narratives that make meaning of their loved one's absence. The military wants families to be as devoted to the cause as the service member, explicitly honoring their sacrifice and implicitly communicating that this absence serves a greater purpose. However, such a narrative leaves little room for the anger and grief that naturally emerge from the temporary, or permanent, loss of the loved one.

Perhaps the most common metaphor that emerges as an alternative to the military-promoted interpretation is some version of adultery. This narrative – where one partner has gone outside the partnership and chosen another lover – authorizes the experience and expression of both anger and grief. The phrase 'my husband is married to the military' sounds absurd but demonstrates the complexity of this relational triangle. By constructing an adultery

narrative, a couple may endure the same consequences of an actual adultery: anger, accusation, self-blaming, grief, reprisal, and separation or divorce. In this scenario, the third party present in the relationship – the military – cannot be ignored if the feelings of anger and grief are to be successfully processed.

Reflection on Case Study

Lori's husband's deployment was functioning in a triangle in their relationship to each other. He seemed changed by the experience and less available to her, their marriage, and the family. It was as though the deployment stood in-between Lori and her husband. Because this loss of connection was not desirable to Lori, she pursued him, seeking to get closer, only to see him withdraw and remain at arm's length. The deployment was made the scapegoat of what had come between them, and by denying and/or resisting the real impact of this force in the relational triangle they arrested themselves in this place of disconnection.

But then something transformative happened that broke them out of this stalemate: he asked her to buy him a hookah for Christmas. As she says 'This was something he had occasion to do Over There. This was something he enjoyed doing with his other friends'. The hookah, which represented his deployment and his emotional connection to that experience, makes visible the triangle between Lori, her husband, and the deployment. In a way Lori's husband was asking her permission to maintain a relationship with his deployment, and by doing so, to share it with her.

Look at some of the phrases she uses after the hookah is allowed to enter their lives as a participant, and not just a piece of furniture: 'I joined him on the deck, surprised by his level of conversation and engagement with me'; 'I learned'; and, 'I watched'. Instead of forcing things, Lori responds to the invitation of the situation and seemingly magically, after months of stand still, they are talking and sharing in a relaxed and intimate manner. The deployment was no longer a menace to their relationship, because the hookah's invitation brought integration and acceptance of the dynamics of the triangle.

And the change was not only momentary; it shifted their relational dynamic going forward. 'The days since we found the hookah have felt different. I've been able to leave space and he's been able to walk into it. So whatever it is that is standing between you and connection, whatever phase of reintegration you're in, I hope you can read a story like this that inspires you to find your hookah'. This is great advice to all who are stalled-out, fighting against the impact that deployment, or military service itself, has had on the relationship. Rather than fighting it, 'find your hookah' – whatever access point that will allow the relational energy to flow within that triangle with integrity and integration.

Key Principle of Providing Care

It is not enough to identify relational triangles operating in the worlds of our clients; care-providers also participate and impact those relational dynamics, and so we must consider our role in this context. Among these considerations is how the military institution imposes itself not only on our clients but on us, and how we relate and respond to the military institution. Our notions, thoughts, assumptions, and beliefs about the military culture, its processes, its power structures, as well as particular international policies and actions that utilize our nation's military, may be triggers that produce emotional content of one kind or another. These reactions, conscious and unconscious, may influence our responses to our clients and their presenting issues.

It is necessary to do the extra background preparation before entering this context: What are my beliefs about the military and feelings about those who serve in uniform? What are my beliefs about war and its justifications? What sources inform these thoughts, feelings, and beliefs (personal experiences, family lineage, religious traditions, political perspectives, and so on)? These questions may generate the kind of reflection that clarifies our operative lens and its impact within a care encounter.

War on Two Fronts: Coping with Stress in the Military Context

There are many valuable written resources that explore combat trauma. The trauma studies literature, particularly the work of Judith Herman (1997), and the developing literature on moral injury provide frameworks to recognize and engage military combat stress injuries (Brock & Lettini, 2012; Kinghorn, 2012; Sherman, 2015). The ideas offered here are meant to complement this existing work and broaden our understanding of how stress impacts persons and relationships within a family context.

Ronald Richardson provides an excellent vision for understanding the impact of stress on a family. Within each relationship there are coexisting forces: the force of fusion, namely to be near and connected to another person; and the force of differentiation, namely to be apart and independent from another person. As Richardson states, 'We want to be together with others, and we want to be our own person' (Richardson, 2010, p. 21). Every meaningful relationship is managing these dynamics, but as stress increases in the relationship these dynamics can become chaotic and, at times, toxic – forcefully pulling and pushing persons into unstable interactions.

With this basic lens of understanding of stress, it is important to recognize the unique stressors commonly found within military families in addition to the normal stress of living one's life. Compared to the general

population, military families endure a much higher rate of relocation, tend to have younger, larger families with more dependents, are more likely to be complex (with higher rates of blended families due to remarriages), and have lower educational and income levels. All of these potential complexities pose particular vulnerabilities to the stress of military service, even before any combat deployment experience.

Richard Ridenour (1984) enumerated the sources of stress that comprise the reality of military families today:

- (a) frequent separations and reunions;
- (b) regular geographic household relocations;
- (c) living life under the 'mission must come first' dictum;
- (d) a need for the family to adapt its natural growth and development to rigidity, regimentation, and conformity;
- (e) early retirement from a career in comparison to civilian counterparts;
- (f) omnipresent rumors and background threat of loss during a mission;
- (g) feelings of detachment from the mainstream of non-military life;
- (h) the security of a vast system that exists to meet the families' needs;
- (i) work that more than likely involves travel and adventure;
- (j) the social effects of rank on the family;
- (k) the lack of personal control over pay, promotion, and other benefits.

These stressors constitute what passes as normalcy for military families. Caring for military families requires that we enter into this reality, whether we have been subjected to it or not.

If we inventoried the most intense sources of stress on a family, among those at the top of the list would be illness/incapacitation, death, and separation. Consider that every time a service member deploys, all three of these are operative: separation for an uncertain amount of time; the threat of illness and loss of physical and/or cognitive capacity; and the threat of loss of life.

The deployment cycle is fraught with dynamics with which very few civilian families would be familiar. During the pre-deployment stage the family is preparing for the departure (temporary, but also possibly permanently) of their loved one, and may express their anxiety and concern through anger and more frequent confrontations, acting out in other ways, and emotionally withdrawing. During deployment, the family 'back home' and the service member are both adjusting to this new reality of separation. They may experience loneliness, depression, anxiety, emotional avoidance and other forms of distancing. The crisis of homecoming, with its uncertainty and excitement, usually includes an immediate 'honeymoon' phase of joy

and recommitment and a longer – and often challenging – readjustment phase in which the service member is either reintegrated or expelled from the family system.

The service member will be changed by his or her deployment experience, and the family will have changed during the service member's absence. This is the real challenge of reintegration: to recognize, receive, and integrate those big and small changes into a thriving family system. With all change comes loss, and so homecoming involves grief as the family faces the changes. Military family members need support in setting expectations, communicating their needs, and authorizing a process of genuine grieving. Unfortunately, because homecoming is automatically deemed to be a joyful blessing, these real needs for support often go unattended.

Richardson writes that we can understand a family system as a sensitive hanging mobile, wherein 'each piece connects with the other pieces in a delicate balance. The movement of any one piece affects all of the others' (Richardson, 2010, p. 15). Stress creates movement to one or more pieces, putting the hanging mobile into flux. If the stress comes and subsides, things may well settle on their own, but if the stress is persistent and/or intense, that instability can threaten to tear apart the delicate balance those pieces hold together. Each deployment can be different, with different stressors activated, and different adjustments and changes occurring; now consider this is a process navigated not once, but for this generation of military families who have endured deployments again and again, this is a reality that is survived multiple times during military service.

From the perspective of the pastoral counselor, returning home post-deployment may seem to present an opportunity to begin to do the work of readjustment and reintegration of past griefs and other traumas. However, such thinking may miss the stressful challenges of making the transition itself. As pastoral theologian Homer Ashby writes, 'the loss of cultural identity, the demise of a sense of connectedness, and the absence of a vision for the future jeopardize a people's capacity to determine a new and better life for themselves' (Ashby, 2003, p. 71). While Ashby is writing about a different cultural reality than that of the military, his insights are true to the post-deployment transition. Moving between the worlds of military and civilian realities may as commonly feel like an exiling as it does a return to safety and familiarity.

There may be circumstances that demand referral to mental health professionals, as in the case of PTSD and Major Depressive Disorder. In some cases effective pastoral care and counseling will not be possible until severe trauma responses are addressed. However, it is important that pastoral care providers do not become overly reliant on medical treatments in these cases, as we would miss the many instances where spiritually-grounded and relationship-oriented support is uniquely needed (Doehring, 2015a; Kinghorn, 2012).

Reflection on Case Study

The deployment created stress for Lori, her husband, and their family. Although she doesn't go into detail about that stress, or indicate that her husband has significant injuries from his deployment, she does share her efforts to reconnect in the reintegration phase. This work, to reintegrate a returned service member back into their family unit, is a universal challenge for military families and worth considering by those who wish to care for such persons. Lori does what seems very natural to her, and to most of us, in pursuing his attention and affection: 'Since I had to get by without him for so long, it seemed natural that his return would signal the green light for me to freely paw him and breathe on him and smother him to death'. When she is not effective in gaining ground, she tries in many other ways to accomplish the same goal.

But the more she pursues, the more ground he concedes in his retreat, and she is left feeling scorned. 'I was left feeling horribly insecure. I stood in front of the mirror wondering what in the world was wrong with me'. Eventually this fatigue-burdened reality became the new normal as Lori came 'home each night in a daze. . . fixed dinner, managed what little housework I could stand, loved on my kids, and went to bed. I quit staying up late, quit waiting for him to come to bed, and quit wandering into his office to see what he was up to. I quit lingering near him waiting for a kiss. I quit asking him about his day. I quit volunteering to tell him about mine'.

Many military families have experienced this kind of distance and chronic disconnect, and in some instances it has led to the further deterioration of their partnership and family. Without finding release from this stress during the reintegration phase, the disempowerment and disillusionment can lead to self- and relationship-harming behaviors and issues like adultery, addiction, and domestic violence. Perhaps the stress of separation seems easier to understand, but the failed expectations of reunion can be just as devastating, or more so.

Key Principle of Providing Care

The military context is a complex system with a thick history of traditions, language, and customs. Special terms, and the corresponding acronyms, are used by each branch of the military, some of which are shared, but many of which are distinct to that branch. This can be daunting when seeking to provide care as an outsider to service members and their families. Those who have undergone military training have been indoctrinated into this cultural and linguistic structure, and family members have necessarily adapted to the parlance and expectations. This is the cultural framework that military families inhabit.

I have found it helpful at times to reorient my expectations for myself by considering that I am attempting to

provide care in a foreign country, where I am new to the language and the cultural habits. As you enter the context of the military it may be useful to approach this work as an intercultural encounter. You might want to enter into that world as a learner rather than an expert, not rushing yourself or your clients to an outcome defined in your world, even if you are anxious in facing how much you don't understand about their world. Allow those you meet to be your teachers, and provide yourself with the room to misunderstand and then try again.

Family of Origin: The Impact of Transgenerational Military Experiences

Mapping the family of origin is a central practice of family systems therapy. Such mapping can illuminate generational patterns, abusive relational behaviors and addictive disorders that may have been transmitted. This process of identification can help the subject to recognize the systemic dynamism of his/her identity.

Many service members are the children and/or grandchildren of military veterans. In these instances one's military service is a generational legacy and may pose a series of complicating dynamics that wouldn't otherwise be present; therefore, mapping these elements may be very instructive in the care-providing process. What was the nature of a parent's military service and how was it transferred to the next generation? Was it spoken of openly and honestly, or was the experience shrouded in secrecy? One's motivation to join the military and the meaning-making one constructs from that experience may be deeply connected to a past generation.

John Henry Parker, a Marine Vietnam veteran, remembers what it was like to grow up with his veteran father:

All I knew about my father's experience is that he was in the Marine Corps, and he was in Korea . . . Recently I did talk to him about his experience. He said that he went to go seek help initially, but the therapists seemed like they were more concerned with things that were important to them; they didn't really relate to him, so he immediately went into shutdown mode and never went back. Consequently, I was raised around a guy who I knew loved me, but who was very volatile, very scary. It was terrorizing. He didn't even realize how he was affecting us as children. He was always very angry, very volatile. (Parker, 2005, pp. 201–2)

When the adverse effects of combat stress are not treated with compassion and vigilant care, the terror and pain of those experiences are passed down to the spouse and children, even without awareness or intention. When a child like John Henry Parker grows up, he may enlist to impress his father (in an attempt to connect through making a similar sacrifice) or he may do so to prove to himself or others

that he can be a better, more resilient Marine than that volatile terrorist of a father (in an attempt to differentiate by proving his father's example does not apply to him).

These dynamics are also often visible in the immediate family system, where this inheritance can create healthy and unhealthy expectations. Whether growing up in a military context or not, many service members and their partners have endured higher than average levels of stress as children and young adults, as they may 'be poorly differentiated from their families of origin, or originate from failed (or abusive) family backgrounds, placing them at higher risk for developing complex problems in the face of their already stressful lifestyles' (Everson & Figley, 2010, p. 21). While life in the military provides a great deal of intense stress, it also promises a high degree of order and discipline; therefore, it is reasonable to appreciate that persons who have come of age in conditions of intense stress without responsible structures, order, and authority could see this promise as desirable.

Reflection on Case Study

While Lori does not explicitly explore her family of origin, there are places of connection that could be reflected on by mapping her family and her spouse's. Look at what she says about her responses to his behavior during the reintegration period: 'I tried being nicer (fake). I tried being a supermom and superwife (exhausting). I tried being demanding (annoying). I tried twice a day workouts and a vegan cleanse (cranky)'. Each of these attempts to change the relational dynamic through her presentation and behavior are likely rooted in models she witnessed in her own family. As her counselor, you could explore with her how niceness, over-functioning, overbearing, and purity behaviors were exhibited in her family of origin and the meaning each incarnation represents to her. For her, these behaviors didn't prove effective in changing her husband and their relationship, but does she carry embedded assumptions around these behaviors given her experience?

It could also be instructive to explore the husband's interpretations of these various attempts. When he was faced with these behaviors, were they familiar presentations of persons in his family of origin? How did that shape his understanding and response to his wife? And what about his response overall? Lori complains of his distancing and inability to sustain intimacy and proximity for more than short intervals. Where did he acquire this response mechanism? Who was the family figure who pursued and who distanced? Because our personhood wishes interdependence and healthy connection, our behaviors comprise more and less effective attempts to attain the longed for relationality. From our families of origin, we learn how to get these needs met and most of us also learn what it feels like to not get our needs met at times, shaping our coping strategies.

Key Principle of Providing Care

As mentioned in the section on the military institution impact within relational triangles, our respective families of origin shape how we react and respond in the midst of providing care in this context. John Henry Parker finally learned who his father was only when his son communicated his fears in becoming a parent given his experience in combat. Parker wanted to be a good parent to a son in need, but to do that, Parker had to recognize both his own needs as a son and confront a father who had not been too good a parent.

There is work there for each of us who provide care in the military context. How has my family of origin shaped who I am in this regard and how does it impact my work? Through this kind of exploration, it is possible to find some buried pain that needs our attention and the space to grieve, and it is also possible that these experiences become great assets to our care-giving.

Conclusion

Whether a care-provider serves in uniform or not, we are always outsiders to another's experience, and so it is essential that we learn about a person's experience from the person. One's experience is shaped by the cultural ecologies one participates in. While the military is a total institution, it is not monolithic. Each branch of the military has its own vocabulary, symbols, and traditions. And while deployment has some universal aspects to it, no two deployments are the same. As Richardson states, 'Our work is like being a *researcher* of relationships rather than being a *fixer* of relationships. It involves being curious about how the couple actually function with each other' (Richardson, 2010, p. 119).

The persons we care for are immersed in the continual process of making meaning of their lived experiences. 'The search for understanding and meaning is a generative process in that the search itself creates understanding and meaning. Hence, true understanding and final interpretation of an event or a person can never be reached' (Anderson & Gehart, 2007, p. 13). As care-providers, we are invited into that process, but we must resist the impulse to take control and force it forward. While our education and experience may appear to qualify us, we are not experts of another's life and must not behave as such. We are guests accompanying another for some time on a journey. '[T]he therapist is only in relationship and conversation with a client for a split second in the client's life. It is impossible to become fully acquainted with a client in that time period. The therapist is often faced with the temptation and associated risk of filling in the gaps or creating missing parts of a story with their own knowledge' (Anderson & Gehart, 2007, p. 46). If we see our clients as problems, or even as having problems, we are likely to

cast ourselves as problem-solvers or at least problem-solving instructors. Such an approach degrades the client's experience and agency, and likely nurtures dependency on the care-provider that cannot be healthfully sustained. Instead, let us put our efforts into approaching one another with humility, curiosity, and reverence, and allow ourselves to hope in the midst of uncertainty to be met with surprises and respond with compassion.

The costs of war should not be the burden of the few who serve in uniform; it must be the collective responsibility of the whole of society. Our pastoral care engagement therefore rightly follows the lead of Melinda McGarrah-Sharp, who advocates for 'a *participatory model of healing*. . . both are in need, both give, and both receive' (McGarrah Sharp, 2013, p. 131). By considering these concepts, the pastoral counselor will be better equipped to address the complex and urgent challenges facing veterans and military families, thereby bringing us, as a nation, closer to reciprocal responsibility and relational healing.

Note

1. Excerpt used with permission of author (http://spousebuzz.com/blog/2012/08/how-a-hookah-helped-us-reintegrate.html?ESRC=sm_spbuzz.nl).

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