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Promoting The Whole Health for Life Model



From Science to Practice

Using Research to Promote Safety and Prevent Suicide

Issue

The Veterans Health Administration (VHA) has adopted a whole health approach to provide Veterans with patient-centered, personalized, and proactive health care.¹ Whole health is an approach to health care that empowers and equips people to take charge of their health and well-being and to live their life to the fullest.² It emphasizes the need to connect self-care activities with a person's mission and aspirations or purpose in life. It affirms that the components of health and well-being (e.g., self-care) are interconnected and that effective interventions target multiple components simultaneously. Whole health also emphasizes the importance of the relationship between patients and their community, including their health care providers, as well as the power of self-care strategies. This approach is informed by evidence and makes use of all appropriate therapeutic approaches, health care professionals, and disciplines to achieve optimal health, healing, and well-being, at all points along the spectrum of health and disease.¹

Key Findings

VHA's whole health approach includes eight components that Veterans can use to improve their health and well-being.¹ While these studies primarily relate to clinical health concerns, it is important to note that these self-care components may also be useful for improving overall well-being.

Working the Body

Researchers found that a higher frequency of past-month physical activity was associated with lowered depressive symptoms among Veterans. Additionally, their analysis found that higher depressive symptoms are associated with higher levels of suicide ideation, leading researchers to believe physical activity indirectly impacts suicide risk by influencing the severity of depression.³ A VHA study that compared cognitive behavioral therapy (CBT), CBT plus aerobic exercise, and exercise alone found that both CBT interventions improved physical functioning. The study also found that among Gulf War Veterans, CBT plus exercise and exercise alone led to significant reductions in fatigue and distress as well as

significant improvements in cognitive functioning, treatment adherence, and broad mental health functioning compared to treatment as usual.⁴

Surroundings

A study of neighborhood socioeconomic status (SES) and its relationship with health status and mortality found that lower neighborhood SES among Veterans was associated with poorer physical and mental health status and a higher risk of mortality when controlling for one's personal SES.⁵ Research has also shown that larger quantities of available green space have a positive effect on people's perceived mental health.⁶

Personal Development

One study examined a civic service volunteering program designed for Veterans, in which participants volunteered at a nonprofit of their choice. At the conclusion of the program, participants had decreased symptoms of posttraumatic stress disorder (PTSD), increased self-efficacy, and decreased feelings of social isolation and loneliness.⁷

Food & Drink

According to one study, 32.7% of U.S. Veterans have a body mass index score that is considered obese.⁸ Research on Veteran weight management has suggested that when clinicians ask patients about their health behaviors, it may prompt changes in lifestyle that are associated with positive changes in quality of life, weight, and blood pressure.⁹

Recharge

Several studies of the Veteran population have shown associations between sleep quality and the presence or severity of suicidal ideation.¹⁰ In a VHA pilot study, researchers assessed an intervention that combined CBT for insomnia and imagery rehearsal therapy for nightmares. The study found improvements in sleep and a reduction in the severity of PTSD symptoms, depression, and distressed mood.¹¹

Family, Friends, and Coworkers

Social support, and perhaps especially perceived social support, may have a protective effect against suicidal behavior, including among individuals with PTSD, depression, and anxiety. A study of Veteran perspectives on peer support groups found that there is strong Veteran interest in peer support. Veterans reported that the benefits of peer support include social support, hope, purpose, and meaning.¹²



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Spirit & Soul

A systematic review of studies on the relationship between spirituality and mental health in Veterans found that spirituality had both positive effects (i.e., positive spiritual coping) and negative effects (i.e., negative spiritual coping) on PTSD symptoms, suicide, depression, anger and aggression, anxiety, quality of life, and other mental well-being outcomes.¹³ Researchers have suggested that VHA can better integrate spirituality into mental health care by expanding the current clinical assessment to include questions designed to better understand the Veteran's relationship with spirituality, as well as by incorporating chaplains into the care model.¹³

Power of the Mind

The overarching goal of mindful awareness is to practice being present in the moment and acknowledge thoughts in a nonjudgmental way. A systematic review of studies on the Veteran population found that mind-body therapy, including mindfulness and yoga interventions, reduced symptoms of PTSD, depression, and anxiety and also increased mindfulness and improved sleep quality.¹⁴

Implications

The current research demonstrates the positive effects of therapies that target components of whole health when they complement traditional clinical care. Most important, many studies found that combining therapies had a compounding

effect, lending more evidence that a whole health approach with multiple complementary and traditional therapies can lead to better overall health and well-being.^{3,8} However, more studies that investigate the relationship between multiple whole health interventions and mental health and suicide-related outcomes are needed.

Ways You Can Help

- Familiarize yourself with VA Whole Health resources and share them with Veterans. <https://www.va.gov/patientcenteredcare/explore/about-whole-health.asp>
- Learn about the whole health services offered at your health care facility, within VA, and in the community, and provide Veterans with educational material about them.
- Discuss Veterans' personal health goals and work together on a plan to meet their unique objectives. Present possible whole health therapies that can be used to complement Veterans' traditional clinical care.
- Champion whole health therapies at your facility. Engage with fellow clinicians on the merits of complementary approaches and how they may be integrated into care models.
- Familiarize yourself with the VA Modernization 10 Lanes of Effort, including Engaging Veterans in Lifelong Health, Well-Being, and Resilience, that are propelling VHA toward the goal of becoming an integrated, enterprise-wide, and high-reliability organization.

There is no single cause of suicide. It is often the result of a complex interaction of risk and protective factors at the individual, interpersonal, community, and societal levels. To prevent Veteran suicide, we must maximize protective factors and minimize risk factors at all of these levels.

References

- 1 Krejci, L., Carter, K., Gaudet, T. 2014. Whole health: The vision and implementation of personalized, proactive, patient-driven health care for veterans. *Medical Care* 52, no. 12:s5-s8.
- 2 U.S. Department of Veterans Affairs. Be Involved in Your Health Care: Whole Health: It Starts with Me. Retrieved May 31, 2019 from https://www.veteranshealthlibrary.org/healthyliving/beinvolved/142,41540_VA
- 3 Davidson, C., Babson, K., Bonn-Miller, M., Souter, T., and Vannoy, S. 2013. The impact of exercise on suicide risk: Examining pathways through depression, PTSD, and sleep in an inpatient sample of veterans. *Suicide and Life-Threatening Behavior* 43. no. 3:1-11.
- 4 Donta, S., Engel, C., Peduzzi, P., Guarino, P., and Clauw, D. 2003. Cognitive behavioral therapy and aerobic exercise for gulf war veterans' illnesses. *Journal of the American Medical Association* 289. no. 11:1396-1404.
- 5 Nelson, K., Taylor, L., Lurie, N., Escarce, J., McFarland, L., and Fihn, S. 2011. Neighborhood environment and health status and mortality among veterans. *Journal of General Internal Medicine* 26. 8:862-867.
- 6 van den Berg, M., Wendel-Vos, W., van Poppel, M., Kemper, H., van Mechelen, W., and Maas, J. 2015. Health benefits of green spaces in the living environment: A systematic review of epidemiological studies. In *Urban Forestry and Urban Green*, 806-816.
- 7 Lawrence, K., Matthieu, M., and Robertson-Blackmore, E. 2017. Completion of a veteran-focused civic service program improves health and psychosocial outcomes in Iraq and Afghanistan veterans with a history of traumatic brain injury. *Military Medicine* 182. 7:1-13.
- 8 Stefanovics, E., Potenza, M., and Pietrzak, R. 2018. The physical and mental health burden of obesity in US veterans: Results from the national health and resilience in veterans study. *Journal of Psychiatric Research* 103. :112-119.
- 9 Tessier, J., Erickson, Z., Meyer, H., Baker, M., Gelberg, H., Arnold, I., Kwan, C., and Chamberlin, V. 2017. Therapeutic lifestyle changes: Impact on weight, quality of life, and psychiatric symptoms in veterans with mental illness. *Military Medicine* 182. 9:1738-1744.
- 10 Pigeon, W., Bishop, T., and Titus, C. 2016. The relationship between sleep disturbance, suicidal ideation, suicide attempts, and suicide among adults: A systematic review. *Psychiatric Annals* 46. 3:177-186.
- 11 Margolies, S., Rybarczyk, B., Vrana, S., Leszczyszyn, D., and Lynch, J. 2013. Efficacy of a cognitive-behavioral treatment for insomnia and nightmares in Afghanistan and Iraq veterans with PTSD. *Journal of Clinical Psychology* 69. 10: 1026-1042.
- 12 Hundt, N., Robinson, A., Arney, J., Stanley, M., and Cully, J. 2015. Veterans' perspectives on benefits and drawbacks of peer support for posttraumatic stress disorder. *Military Medicine* 180. no. 8:851-856.
- 13 Smith-MacDonald, L., Norris, J., Raffin-Bouchal, S., and Sinclair, S. 2017. Spirituality and Mental Well-Being in Combat Veterans: A Systematic Review. *Military Medicine* 182. no. 11:1920—1940.
- 14 Cushing, R. and Braun, K. 2018. Mind-Body therapy for military veterans with post-traumatic stress disorder: A systematic review. *Journal of Alternative and Complementary Medicine* 24. no. 2:106-114.

