

Feature

Operation mend

Psychological healing is central to care at a UCLA program for veterans and their families.

By Tori DeAngelis

June 2014, Vol 45, No. 6

Print version: page 46



In 2006, Army Sgt. Richard Yarosh was serving as a gunner on an armored vehicle in Iraq when a roadside bomb hit the vehicle and engulfed it and its crew in flames.

Yarosh jumped from the vehicle, his face and body on fire. Sixty percent of his body was burned, and he lost both ears, part of his nose, some fingers and the use of both hands. One leg had to be amputated below the knee.

Yarosh is one of about 50,000 service members wounded in action in Iraq or Afghanistan since 2003. But unlike some of his comrades, he has received extensive, ongoing help for his problems, thanks to a comprehensive integrated-care program at the University of California, Los Angeles. Called Operation Mend, the program aims to heal not only the physical wounds of war, but psychological and familial ones as well.

The program was launched in 2007 by UCLA philanthropist Ronald A. Katz and his late wife, Maddie Katz, after they saw a wounded service member on a late-night talk show. It began with UCLA's top plastic surgeons volunteering to help repair and re-create the faces of the wounded, but it soon became apparent that less obvious issues needed to be addressed as well. These included service members' post-traumatic stress and traumatic brain injury symptoms, as well as their families' psychological needs, says psychologist Jo Sornborger, PsyD, who directs Operation Mend's psychological health program.

"We were seeing this incredible caregiver burden that the family members were experiencing," says Sornborger. "The family dynamics — especially with a family member who has had a catastrophic injury that is now a chronic injury — can become pretty entrenched." A common scenario is a woman earning most of the family income, caring for a disabled and depressed spouse, doing most of the household duties and child care, and feeling traumatized herself.

Operation Mend's psychological health care component includes prevention, intervention and treatment services for patients and their families. A team led by psychiatrist Patricia Lester, MD, of UCLA's Nathanson Family Resilience Center, worked with Sornborger to adapt a successful family resilience program, FOCUS (Families OverComing Under Stress, see December 2013 Monitor), for Operation Mend patients and their families.

The Operation Mend-FOCUS model includes physical and mental health screenings, psychoeducation and immediate feedback, among other elements, says Lester. It also makes mental health professionals an integral part of the team. "Embedding psychological health approaches into medical and surgical care settings helps to destignatize and improve access to psychological health care for both veterans and their family members," Lester says.

For the psychology team, part of that care means providing wraparound services for patients and their families. Families are greeted at their airport gate and taken straight to a hotel, half a block from the Operation Mend offices. The team takes care of all appointment details, including escorting patients and families to and from their sessions.

Meanwhile, some 350 volunteers — including local families, UCLA students and high school students — serve as buddies. They cook, shop for families, take kids to Disneyland, babysit — whatever is needed while the service member is in surgery or recovery.

So far, the program has treated 98 service members for facial, hand and orthopedic surgery.

Patients return to UCLA as often as needed for surgery or follow-up appointments and are members of the program for life. Surgeries can number a few, or as many as 40, although one service member has gone through more than 100 procedures. Each time patients and their families come to UCLA, they meet with Sornborger, who also keeps in regular touch with them through a telehealth component. To ensure there is continuity of care, she links families to medical, psychological and practical services in their communities and is available to field any problems that may arise.

Because of the intense nature of these families' difficulties and the practical, no-nonsense culture of the military, Sornborger favors good psychological strategies that are embedded in a direct, strengths-based approach.

"In a heartbeat, their lives changed profoundly as a family," she says. "They survived against all odds." Reminding them that the team is with them for the long haul, and that they have positive coping strategies of their own, can help, she says.

"My job is to help them maximize their strengths and supports during what is often a lengthy and painful process."

Tori DeAngelis is a writer in Syracuse, N.Y.