





# WELCOME HOME, SOLDIER

**Local agencies team up  
to help wounded war veterans heal.**

By Roxanne Hawn

**G**oing to war is hard. Coming home injured is harder. Even as wounded soldiers heal, they face the daunting tasks of reconnecting with their families, reintegrating into their communities, and re-imagining their lives.

For example, what is the new “normal” when post-traumatic stress disorders (PTSD), traumatic brain injuries (TBI), loss of limbs or limb function, and spinal cord injuries dominate the future?

**Local park and recreation agencies can help a wounded soldier find answers. With the help of NRPA, the U.S. Army's Fort Lewis in Washington began reaching out to agencies in May 2007 so that wounded soldiers could go home sooner.**

In the process of regaining their strength, community programming and contacts open up the world for soldiers and their families at a time when it feels like everything else is closing in.

“It’s about the whole family healing together and becoming reintegrated, which, of course, will speed up the healing process both mentally and physically for the soldier,” explains Sgt. First Class Robert Frasier.

“And, quite frankly,” adds Lt. Col. K.C. Bolton, “(These local agencies) have capabilities we cannot provide. One of the things we’re finding is, hometown America embraces these soldiers and families. They go above and beyond and give us more than we were asking for so that there is a holistic program for the whole family and not just

the warrior.”

Founded in June 2007, the Fort Lewis Warrior Transition Unit (WTU), named Task Force Phoenix, is made up of about 250 staff members who serve approximately 800 wounded soldiers, roughly 80 percent men, 20 percent women. It’s the second largest WTU of the 37 such units in the country. Sol-



diers often get assigned to WTUs after receiving emergent medical care in the war theater, at European military bases and at military hospitals in the United States. For some, it can be more than a year between the injury and returning home.

Rather than allow wounded soldiers to slide into a netherworld between active and inactive Army life during recovery, these WTUs serve as healing grounds, where teams of people plan, execute, and support each person's get-well plan.

"Basically, their mission is to get healthy," says Heidi Melancon, NRPA's senior manager for health and wellness, who, as a result of NRPA's partnership with U.S. Paralympics, serves as liaison between the Army and hometown agencies.

Doctors, physician's assistants, regis-



tered nurses, physical and occupational therapists, military police members,

and others complete this unit, which is structured more like a combat battalion

## 2008 Paralympic Games

### Veterans Win Medals, Provide Hope

By Phil DeMeo

**F**ifteen military veterans and one active duty service member participated in the 2008 Paralympic Games in Beijing, China in September. These 16 competitors brought home a total of 10 medals, including four gold. Active-duty U.S. Navy Petty Officer First Class Casey Tibbs (San Antonio, Texas), who in 2004 made history by becoming the first American active duty military member to compete in a Paralympic Games, won gold in the men's track and field 4 x 100m relay (T42-T46) and a bronze medal in the long jump (F42/F44). Although Tibbs is proud of winning a gold medal for the second consecutive Games, giving hope to other injured service men and women means the most to him.

"By competing in the Paralympic Games I feel like I'm setting a new benchmark for any injured athletes - whether they were in the military or not," Tibbs said. "Hope-

fully we can broaden people's perceptions of what a physically disabled person can achieve."

Army veteran Jennifer Schuble (Homewood, Ala.) came away with an impressive medal haul, winning one gold and two silver medals in cycling while setting a new world record by more than two seconds in the women's 500m time trial (LC 1-2/CP 4). Fellow cyclist Oscar "Oz" Sanchez (San Diego, Calif.), a Marine Corps veteran, raced to his first-ever gold medal in the grueling men's individual time trial (HC C). In wheelchair rugby, retired Navy serviceman Will Groulx (Portland, Ore.) led Team USA to the top of the podium by scoring 16 goals in the gold medal match against Australia.

The final two medals were won by Kari Miller (Washington, D.C.), who helped the women's sitting volleyball team to a silver medal, and Laura Schwanger (Elkins Park, Pa.), who won bronze in the women's single sculls (A).



Other retired service men and women who competed in Beijing included Army veterans Scot Severn (Caro, Mich./track & field), Melissa Stockwell (Chicago, Ill./swimming), Kevin Stone (Kodak, Tenn./archery), Scott Winkler (Grovetown, Ga./track & field) and Russell Wolfe (Williamsburg, Va./archery). Chuck Lear (Lee's Summit, Mo./archery), Carlos Leon (N. Lauderdale, Fla./track & field), Angela Madsen (Long Beach, Calif./rowing), and TJ Pemberton (Edmond, Okla./archery), who are retired members of the Marine Corps, and retired Navy veteran Lee Hinson (Brunswick, Ga./wheelchair tennis) also competed in the 2008 Paralympic Games.

As Tibbs explains, the success and competitiveness of the U.S. Paralympic Team is imperative in providing hope to athletes with physical disabilities across the country. "Our accomplishments give athletes with physical disabilities something to strive for and show them that they can still perform as elite athletes."

instead of a typical military hospital. Behind the scenes, there might be a half-dozen people seeking solutions and opportunities for each soldier, including preparing them for a career change, if necessary.

According to Sean Smith, a COTA-certified occupational therapist, the training often involves regular work that builds job-related skills such as memory through filing or computer and technology tasks.

"This is a new concept," explains Bolton, who commands the battalion. "It was a by-product of some of the challenges we had as we continue to fight the wars in Iraq and Afghanistan, of soldiers getting back-logged in their medical evaluation board process. There wasn't a comprehensive or synchronized approach."

Task Force Phoenix includes a pilot program called Remote Warrior Care, where soldiers go home to complete their recovery. With feedback from Army case managers, local park and recreation agencies meet with returning

soldiers and develop customized programs to help them heal and find their new path.

"These soldiers have a variety of injuries," explains Melancon, "but one of the common denominators is that we look for things that make them feel more 'normal.' Typically, that's sports and recreation."

**Sometimes the local agency helps a soldier return to a beloved sport or activity, albeit modified. Other times, it's giving them an opportunity to try something new.**

The level of commitment, the length of the relationship, and the breadth of the programming is up to the local agency and the soldier.

Because using military appropriated funds for non-military services is cumbersome, bordering on impossible, the Army does not pay agencies for providing soldier services. Such outreach, therefore, is mostly a donated or greatly discounted endeavor. If costs exceed what agencies can absorb, NRPA

encourages them to reach out to community funding partners or nonprofits.

The goal of reintegration can mean:

- Return to a deployable unit in either their current or a new work position.
- Rejoin their guard or reserve system or origin.
- Retire with a medical discharge and possibly retrain for a new career.

Those transitioning out of the military move into the Veterans Administration system and other assistance programs. The goal, says Maj. Heidi Kelly, an officer in charge of the remote program, is a seamless transition. That can include job training and counseling for the soldier's spouse, who now might need to support the family financially.

The local recreation component aids this transfer from the military family into the community family. "I've talked to leaders of some of these organizations," says Bolton, "and they have wanted to help but haven't known how. Now, they have a venue by us connecting them with a soldier, so it's win-win-win."

## ONE SOLDIER'S STORY

**A**rmy Reserve E4 Spec. William Strickland drove long-haul trucks between his stint in the National Guard and returning to the Reserves two years ago to better provide for his wife and four sons. When he deployed to Iraq in December 2006, Strickland protected convoys of civilian truckers who shuttle supplies across the war zone.

During Mother's Day weekend 2007 he took part in a convoy between two military bases in Iraq. "We got hit (by road-side bombs) twice going up," Strickland says. "Nobody was injured either time with those. But they were close enough to ring our bells and get our adrenalin going."

On the way back, however, just south of Tikrit, Strickland's truck took a direct hit. "I don't remember hearing it," he says. "I remember feeling the heat. Then, honestly, my first thought was that I'd lost my arm because I was

in excruciating pain. I was really afraid to look."

Strickland suffered shrapnel injuries in his left arm and leg. The explosion broke several ribs, herniated three disks in his spine, and caused a traumatic brain injury, which has resulted in memory problems and migraines. "All in all," he says, "I'm very fortunate."

After being flown out of Iraq, Strickland spent a couple of weeks at an Army hospital in Germany. Once in the States, he spent several months at Fort Sam Houston in Texas before moving closer to home at Fort Lewis in Washington. His path was not always easy. He and his family often felt frustrated, discouraged, and a little lost in the sys-

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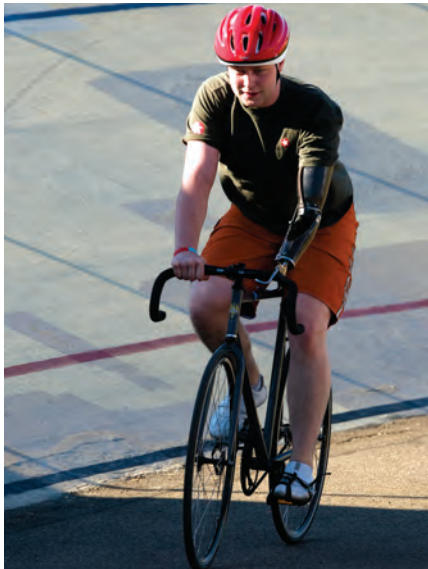


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tem. He is grateful for the innovative Warrior Transition Unit and the experimental Remote Warrior Care program.

The Richland Community Center in Strickland's hometown of Richland, Wash., became one of the first local, park and recreation agencies to take part in this program. Laurel Strand,

recreation program and facilities manager, met with Strickland and his wife, Haili.

"They just absolutely won my heart," she says. "It was not only his mild-mannered nature, but her obvious and complete joy in having her husband back home. It was so wonderful to be near such observable joy."

While the initial conversation focused on Strickland's exercise and fitness, Strand noticed that the family required broader opportunities. "I was very blunt about it," Haili admits. "When he first came home, we were stingy with our time. We hadn't had him home in a long time."

So, Strand arranged services for the entire family. The package, which was funded in part by the Richland Senior Association, included:

- Swimming pool passes for the entire family
- Tickets to themed events at the pool during the summer

- Tickets to Cinema Under the Stars events
- A personal trainer for both Strickland and his eldest son
- Dance classes for Strickland and his wife
- Computer classes.

Strand is currently working on adding home-improvement or gardening classes, where community members could learn skills to help improve their homes.

In addition to the fitness component, which Strickland says is helping him lose weight gained since the injury and from medications, he admits feeling the pull to get out into the community. "My own comfort level (because of the PTSD) would be to just sit at home and close the blinds and lock the world out," Strickland says. "This gets me out."

Such invitations take pressure of Haili too. "He can go out, and I don't have to push," she says. "These are fun things he can get out and do. His mind

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doesn't have to be constantly what happened and the injuries."

It helps their budget as well since taking a family of six out for dinner and a movie can top \$200. "It gives you lots of options," Haili says. "The program allows him to come home and have remote care. Working side by side (with people at the community center) gives him family time, and it makes that a priority. He doesn't have to choose between the military and his family."

Strickland's eldest son, Taylor, enjoyed his one-on-one workout time. "It was really fun working out with my dad and stuff," he says. "Now that he's home, that's our new normal."

The community connections forged through the Remote Warrior Care program opened up the Stricklands' world. Haili admits never really knowing what went on at the community center, despite signing the boys up for T-ball or other activities. "It's hard for me to take

help from others or anything free," she says. "I like knowing what's going on down there now. I'm constantly taking mental notes where I can, at some point, give back. There are so many things I just did not know were going on in my community."

The Army in tandem with NRPA and its local park and recreation agencies


did that. "To be sitting in the driver's seat as this whole thing goes along is pretty awesome," says Strickland, adding that Lt. Col. Bolton, who heads up Task Force Phoenix, is "a step above, a real visionary."

As for being a guinea pig, Strickland says, "If you're sending me home, you can call me whatever you want." **P&R**

### **NRPA Also Helps With Military Base Sports and Fitness Programs**


U.S. Paralympics and NRPA have teamed up to consult with several Army bases around the country to develop adapted sport and recreation programs for wounded soldiers. Morale, Welfare, and Recreation programs (MWR) are the military version of recreation as most NRPA members know it. Lt. Col. Bolton wanted to expand fitness programs beyond what's known in the Army as the "daily dozen": pushups, sit-ups, jumping jacks, running, and so forth. With NRPA's and U.S. Paralympics help, Bolton's staff added things like aquatics, sit volleyball, and spinning classes.

"(NRPA and U.S. Paralympics) helped us build a holistic, a comprehensive fitness program with some competition built in as well to inspire our soldiers," Bolton says.



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