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CONFRONTING CHALLENGES ASSOCIATED WITH VETERAN OVERDOSES

Many Veterans, both within the community and within The Journey Home (TJH) facility, have for years struggled to manage their mental health issues (specifically with depression and anxiety), medical issues, substance abuse disorders and a heightened experience of Posttraumatic Stress Disorder symptoms. Some can manage on their own, but others depend on professional services for support. Yet, many others isolate themselves. It was revealed in a 2016 study released by the Veteran Health Administration (VHA) that overdose death among Veterans increased from 14.47 in 2010 to 21.08 in 2016. Since 2016, suicide deaths among Veterans continues to hover around 22 on average per day. Issues of PTSD, combined with a Substance Abuse Disorder or extreme substance use to regulate symptoms, challenges the recovery process of Veterans in very specific and exclusive ways. Communities like Randolph County and others from the surrounding region, mental health services and the VA are stepping up to the plate in ways never before experienced to assist Veterans with these specialized challenges.

This struggle is real for many of our Veterans at TJH. The challenges are not easy and the solutions are not always simply achieved. Some Veterans lose the battle. With the economic stresses, social isolation, decreased access to community and religious supports, and new barriers to mental health and medical treatment created by, a sense of hopelessness and fear has intensified the risks that impact Veteran suicide, drug overdose, and homelessness. Important and valued social interaction of going to a movie, going for a walk and saying hello to neighbors, or going out to eat ended for most. Prior to the COVID-19 lockdown in March of 2020, TJH traveled over 4,000 miles a month taking Veterans from both the facility and the community to medical, psychiatric and mental health appointments throughout the region. That travel and those appointments stopped virtually overnight. Since the COVID-19 lockdown, symptoms of depression, anxiety, and mental illness with PTSD and substance abuse amongst our TJH Veterans have increased. Though the VA and the medical and mental health treatment communities have done a phenomenal job in providing telehealth support, the comparison of support given to Veterans since the COVID-19 lockdown cannot be equalized.

TJH, our Veterans and partners in the mission to “end Veteran homelessness” have recently experienced the human impact of Veterans struggling with PTSD and substance abuse, with two of our Veterans that overdosed. One overdose resulting in the death of a 30-year-old combat Veteran.

The Journey Home (TJH) organization provides “Housing First,” shelter plus programming and services to either homeless Veterans or Veterans at risk of becoming homeless. “Housing First” means that programs are tied to specific transitional services that values flexibility, individualized transitional supports, Veteran choice, and autonomy. Housing First programs and services for homeless and/or those at risk of becoming homeless is considered best practice by the US Department of Housing and Urban Development (HUD), Veterans Services Administration (VA), and by many serving the homeless population.



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In addition, TJH operates with “Low-Barrier” program policies and procedures. Low-Barrier in programming and services is defined by TJH as “Working with Veterans through their individual issues of recovery, with appropriately lowered barriers for intake, entry into services, and discharge.” Low-Barrier programs and services demand reliable and valid harm reduction policies and procedures. The recent impact of the COVID-19 social isolation and lockdown on TJH Veterans emphasizes the importance of low-barrier programming and services; enforcing, locking down, or demanding heightens symptoms and puts a stressed population at greater risk.

TJH takes the harm reduction of decisions and behaviors of our Veterans and staff very seriously. In October of 2015 TJH entered into a contract partnership with VA Northern Indiana Health Care System (NIHC). This partnership has provided TJH with nearly untethered access to resources, collaboration and oversight in supporting our Veterans’ transitional needs and addressing harm reduction issues not previously available to Randolph County Veterans. TJH is in daily, and at times hourly if needed, contact with VA Social Workers, Case Managers, and Medical and Mental Health Providers throughout the region to address the transitional, treatment, and harm reduction needs of TJH and local Veterans.

The Mission of the TJH is *“To make Veterans our priority. To end Veteran homelessness. To provide stability, support and interventions so that chronic homeless Veterans attain housing and independence.”* Being sober and clean is not a prerequisite to placement at TJH, but TJH does not allow or support the use of illegal substances in their facility or on the property. Our mission, our Board of Directors and our community partners, with the VA are united in the position that if we do not help homeless Veterans with PTSD and Substance Abuse Disorders transition off the streets, who will? If we reject them and send them away, to live on the streets or under bridges, what then? Who helps them and who will address their harm reduction needs?

TJH Board of Directors, our staff, the VA and our Veterans are grateful and immensely proud of the support received from individuals and communities throughout the region for our Mission and in our efforts to support homeless Veterans with dignity and respect. They proudly served and protected us despite our faults, our values or individual belief. Partnering of Randolph County, the surrounding region, and many throughout the country are now doing the same for them.

Eldon Solomon, M.S., LMHC, LCAC
Clinical Director/CEO

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