**Case Study for Chapter 15: Veterans, Their Families, and Military Social Work**

Carl is a 65-year-old dad of three whose 26-year-old son, Kevin, an OIF/OEF combat veteran and sergeant in the U.S. Marine Corps, committed suicide by a public, self-inflicted gunshot wound to his head while at his camp base. Kevin enlisted in the Marine Corps at age 20. Carl had served in combat in Vietnam, and Kevin’s granddad served in World War II, thereby making Kevin a third-generation U.S. Marine.

While in the Marine Corps, Kevin served in a reconnaissance unit, otherwise known as a Special Forces Unit, and he completed two combat tours in both Afghanistan and Iraq. Kevin experienced multiple blasts during both his deployments, and he had symptoms of posttraumatic stress disorder (PTSD) and traumatic brain injury (TBI). Although his dad wanted Kevin to be hospitalized, Kevin only sought outpatient treatment. After Kevin’s wife, Meg, threatened to leave him, Kevin finally went to the medical clinic and told the health care providers he felt “hopeless and confused.” The wait in the clinic felt like hours to Kevin; instead of waiting to be admitted, he left the hospital, got in his car, and drove to a local park where he proceeded to shoot himself.

Kevin’s dad Carl was driving through a scenic byway in southern Virginia when he got a life-altering phone call that no parent ever wishes to receive. His youngest child had taken his own life. Carl was in a daze, not believing what the caller had just told him. Carl felt numb and conflicted.

Carl must now be responsible for making military funeral arrangements. Amidst his planning and phone calls, Carl feels a sense of shame, given his son died from what many may consider less than honorable circumstances.

Two months after his death, Kevin was buried in Arlington National Cemetery. Carl continues to have great difficulty feeling his emotions and he focuses on caring for his deceased son’s spouse and children. Carl has withdrawn from his own personal friendships and he experiences crying spells when he least expects them. Carl blames himself for ever encouraging Kevin to enlist in the military. Carl is also having a hard time sleeping and his work life is suffering. Carl is losing weight and he now turns in to sleep around 7:00 p.m. most evenings. Carl’s wife finally insists that he get counseling from a community social worker and his insurance company is willing to pay for the counseling.

1. If you were Carl’s social worker, what would you focus upon first? How would/did you make that determination?

2. Would you want to involve Carl’s wife in your counseling with Carl as well? If so, how would you do it, and what would be your goal? If not, why not?

3. If Carl didn’t follow through with counseling, what outcome would you expect?