



National Veterans Affairs and Rehabilitation Commission

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**STATEMENT OF
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VETERANS AFFAIRS AND REHABILITATION COMMISSION
THE AMERICAN LEGION
BEFORE THE
SUBCOMMITTEE ON HEALTH
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES
ON
MENTAL HEALTH TREATMENT FOR FAMILIES: SUPPORTING THOSE WHO
SUPPORT OUR VETERANS**

FEBRUARY 28, 2008

Mr. Chairman and Members of the Subcommittee:

The American Legion appreciates this opportunity to share its views on mental health treatment for families of veterans. Mr. Chairman, in order to ensure this nation's veterans receive a complete continuum of care, families of those injured must receive the most appropriate treatment to understand, accommodate, and transition with the veteran.

When military personnel are deployed, the families are the most tangible source of trust and disclosure. They are affected by the letters, emails and phone calls from those deployed. Although they aren't the actual personnel deployed, their love and care of those who are in the way of danger may indeed cause permanent stress related issues. When their loved one returns from deployment, there is yet another possible stressor, the transition from military duty to civilian life.

Department of Defense and Seamless Transition

According to a 2005 Department of Defense (DOD) Survey of Health-Related Behaviors among Military Personnel ((DSHRB), 74 percent of active duty personnel cope with stress by talking

with a friend or family member. Spouses and family members are often the first to recognize when service-members require assistance.

The National Defense Authorization Act for Fiscal Year (FY) 2006 directed the Secretary of Defense to establish a Task Force to examine issues relating to mental health and the Armed Forces and create a report containing an assessment of, and recommendations for improving, the effectiveness of mental health services provided to members of the Armed Forces.

The report's introduction spoke on this nation's involvement in the Global War on Terrorism (GWOT) and the unforeseen demand on military members and their families. It was also stressed that DOD must expand its capabilities to support the psychological health of its service members and their families.

According to the Task Force, data from the Post-Deployment Health Re-Assessment indicate that 38 percent of Soldiers and 31 percent of Marines report psychological symptoms. Among members of the National Guard, the figure rises to 49 percent; that includes Air Force, Army, and Navy. It further reported psychological concerns were significantly higher among those with repeated deployments.

There were also psychological concerns among family members of deployed and returning Operation Iraqi Freedom and Operation Enduring Freedom (OIF/OEF) veterans, in addition to the hundreds of thousands of children being affected by the deployment of a parent. The vision of this group of professionals was to also ensure service-members and their families receive a full continuum of excellent care in both peacetime and wartime, but particularly when service members have been injured or wounded in the course of duty.

In June 2007, The Defense Health Board Task Force on Mental Health released the report titled, "An Attainable Vision". This report derived from the Task Force's visits throughout the military community at 38 installations worldwide. According to the Task Force, the Military Health System lacked the fiscal resources and personnel to fulfill its mission to support psychological health.

Mr. Chairman, these findings also imply that if the treatment was insufficient during the military member's term of service, the veteran's issues don't vanish upon entry into the civilian community and they often affect the family as well.

However, the Task Force did make several recommendations to improve care for service members and their families, to include, ensuring a full continuum of excellent care for service members and their families, underlined by, continuity of care, which is often disrupted during transitions among providers, as well as filling gaps in the continuum of care for psychological health and address which services are offered, where services are offered, and who receives services, especially since the entire family are military health care beneficiaries.

The findings and recommendations reported by the Task Force suggest an elevation of family involvement in mental health treatment. When transitioning from military to civilian life,

veterans and their families' full continuum of care should not be stifled by excluding this proven effective treatment.

Department of Veterans Affairs

Currently, the VA does not have the authority to include veterans' family members in treatment for mental health concerns. The American Legion is in agreement with the statement by Secretary of Defense, Robert M. Gates, who stated, "care for our wounded must be our highest priority." This statement includes those affected both mentally and physically.

According to the Task Force report, the cost of mental illnesses extends beyond discharge from military service. Of the 686,306 OIF/OEF veterans separated from active duty service between 2002 and 2006 who were eligible for VA care, 229,015 or 33 percent accessed care at a VA health care facility. Of those 229,015 veterans who accessed care since 2002, approximately 83,889 received a diagnosis of or were evaluated for a mental disorder, including Post Traumatic Stress Disorder, non-dependent abuse of drugs, and depressive disorder. With the enactment of Public Law 110-181, OIF/OEF veterans' access to free VA health care has been extended from 2 years to 5 years. Therefore, additional potential mental health patients can be expected.

There was also a recognized need for extensive family involvement in the long-term process of rehabilitation and community reintegration, to include close involvement of families in the recovery process, as well as greater responsiveness in the treatment of family members' needs.

Vet Centers as an example

The VA's Vet Centers, created in 1979, were designed to provide services exclusively for veterans who served in theaters of conflict or experienced trauma within the military.

In 2007, The American Legion conducted site visits to various Vet Centers throughout this nation, to include Puerto Rico.

During these visits, it was reported that successful services provided ranged from marriage/couple's counseling to reunion debriefings. However, no mental health services for family members were provided. Also offered were family therapy for veterans suffering from mental illnesses, ensuring that the veteran's immediate support network is prepared to care for and cope with the veteran's mental health issues, but no mental health support for the veteran's immediate family members.

The success of services provided within VA and their satellite facilities as they relate to veterans and their families should be extended, to include mental health treatment for family members to fully ensure a complete and successful transition into the community.

Conclusion

The DOD and VA have initiated steps to integrate programs for treating service-members who suffer from mental illnesses. To ensure treatment is consistent, the VA's Office of Seamless

Transition assigned case managers at major Military Treatment Facilities to identify and assist service-members whose care will be extended to the VA. Currently, a memorandum of agreement (MOA) between DOD and VA provides referrals to VA Medical facilities for health care and rehabilitation for those who have sustained spinal cord injury (SCI), traumatic brain injury (TBI), and blindness.

Mr. Chairman, to ignore the need for mental health support for family members invalidates the meaning of “full continuum of care. The American Legion urges Congress to appropriate sufficient funds for VA to ensure comprehensive mental health services are available to veterans and their family members.

Mr. Chairman and Members of the Committee, The American Legion sincerely appreciates the opportunity to submit testimony and looks forward to working with you to improve the lives of America’s veterans and their families. Thank you.