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Veterans, Families Deserve Expanded Care

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Two bills pending in the state Legislature address the needs of veterans and family members suffering from mental or substance use disorders, or both. The bills (A11054/S8062 and A11098/S7961) are vital first steps and should be enacted.

Veterans returning to civilian life from the wars in Iraq and Afghanistan suffer from tragically high rates of mental and substance use disorders. Various reports show they are twice as likely as the general population to suffer from post traumatic stress disorder, depression or substance abuse. They have twice the risk of suicide, are more than twice as likely to be homeless and 20 percent more likely to be unemployed.

Their families also suffer. The strain during deployment is tremendous and the return of the veterans requires great adaptation. Marriages too often collapse, and children are at increased risk of experiencing emotional difficulties and struggling in school.

More than half of veterans and their families do not get help to deal with their emotional challenges.

To its credit, the U.S. Department of Veterans Affairs has developed a number of programs to reduce the risk of suicide, and it has been adding to its service capacity. Recently, the head of the VA announced an initiative to end homelessness and ordered cleanup of the backlog of eligibility claims. Some of the VA's services are state-of-the-art; its efforts to integrate physical and mental health services are breaking new ground.

Still, only 25 percent of veterans use the VA for health, mental health or substance abuse services, the VA reports. More might, if it weren't for eligibility and access problems.

But many veterans simply want to return to civilian life, get a job with health benefits and use their local health care system. Many also fear losing jobs if they're known to be in treatment. And, for the most part, their family members are not eligible for VA services.

NYS has taken some steps to fulfill its responsibilities. Military families around Fort Drum are getting special attention. Some training is being provided to locally-based providers around the state via a NASW-NYS program that now needs to be refunded and via a joint training project of the VA and the state Office of Alcohol and Substance Abuse Services (OASAS). The state Office of Mental Health (OMH) is providing some specialists who are traveling around the state to help where they can.

But much more needs to be done to address suicide risk, build treatment courts, expand housing, provide training, address the special issues of women veterans, overcome the stigma of mental illness and expand and improve mental health and substance abuse services.

Obviously, this can't all be done in the current fiscal climate. But the chairmen of the veterans, mental health and substance abuse committees in the Assembly and the Senate have proposed two first steps that they have determined will have no cost to the state.

One bill requires the state to develop a comprehensive long-term plan, so that, when the economy turns around, the state will be ready to expand services.

The other bill calls for a public education initiative to overcome stigma and ignorance about mental and substance use disorders by educating service members, veterans and their families about the effectiveness of treatment and the availability of resources.

Isn't this the least that our state can do to pay its debt to the men and women who have put their lives on the line for our nation?

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(Michael Friedman's name was not included in the published version of this essay.)