

Close to Home: Supporting Vet Centers in Meeting the Needs of Veterans and Military Personnel

Feb 03, 2022

Statement of

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Before the

United States House of Representatives
Committee on Veterans' Affairs
Subcommittee on Health

With Respect To

“Close to Home: Supporting Vet Centers in Meeting the Needs of Veterans and Military Personnel”

Washington, D.C.

Chairwoman Brownley, Ranking Member Bergman, and members of the subcommittee, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, thank you for the opportunity to provide our remarks on this important topic.

Vet Centers are an incredibly valuable yet oftentimes overlooked resource for service members, veterans, and their families. They were created in 1979 to assist Vietnam-era

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veterans with the psychological and social effects of combat. Over the past 43 years, these services expanded to all combat veterans, active duty members, and their families. Therefore, all VFW members are eligible to receive services at Vet Centers at some point in their lifetimes.

Vet Centers offer a wide range of non-traditional psychosocial services. According to the Veterans Health Administration (VHA) Handbook, in the first six years after Vet Centers were established, approximately 305,000 clients obtained services. As the United States continues to engage in combat zones, the number of eligible veterans, active duty members, and families increases. VHA Directive 1500 (1) states in fiscal year 2019 alone, Vet Centers assisted over 307,000 clients. Meanwhile, between 1979 and 2018, the number of Vet Center sites grew from 91 to 300. With the recent end to the United States combat mission in Afghanistan, the number of service members returning to the states will increase and they will eventually transition out of service. This will add to the number of eligible clients that may use the services of Vet Centers.

The VFW urges Congress to work with the Department of Veterans Affairs (VA), states, and the United States Census Bureau to calculate Vet Center use population and increase the number of Vet Centers. There are different ideas and calculations that could determine the best model for Vet Center coverage, and while the VFW does not have an exact formula in mind for the new coverage model, we do know more Vet Centers are needed. In addition, Congress must also ensure funding to cover the replacement of the aging Vet Center mobile fleet that provides a necessary supplement to the existing Vet Centers.

Telehealth has played a large part in the accessibility and timeliness of connecting veterans with mental health professionals. The continuum of care could carry on in the virtual world and build on existing trust between a veteran and their mental health provider. The VFW was the first partner with VA and Philips to roll out our five ATLAS sites, which provide telehealth services including mental health counseling to rural veterans. We propose reviewing the intent of ATLAS and possibly repurposing the project in the next phase of the pilot to serve other areas where there is an increased demand for other VA services. ATLAS may not be an entire replacement option for areas lacking VA Clinics or Vet Centers, but it might be an adequate supplement in areas where services are lacking.

The VFW urges Congress to require VA to create a report on the status of Vet Centers

throughout VA. The report will evaluate the efficacy of readjustment counselors, the ability of Vet Centers to provide their services, employee feedback, and the need and location of additional Vet Centers. In addition, VA needs to create a plan to review and implement recommendations by both the Government Accountability Office (GAO) and the Office of Inspector General. Understanding who uses Vet Centers and why helps to coordinate adequate staffing, resources, and funding.

Vet Centers already serve a niche population and there are other populations of veterans, active duty service members, and family members that can benefit from their services. The VFW is encouraged by the proposals in Congress to expand Vet Center services to student veterans and family members of a service member or veteran who died by suicide. However, with all expansions of eligibility, there also needs to be an expansion of resources to handle the increased workload.

Recently, a VFW Auxiliary member reached out to the VFW offices regarding a disturbing experience at the Vet Center where they are receiving bereavement counseling. While in the beginning stages of counseling, the Auxiliary member's counselor was asked to inform the Auxiliary member of other counseling resources and mentioned Vet Center counseling was "short-term." Just months prior to this conversation, the Auxiliary member was asked to cut down their sessions to every other week due to a waiting list and staff vacancies. Counseling is one of the very few actual services that VA provides survivors. Responses like these are troubling to hear about, and we must strive to remedy problems like this so individuals are never again turned away from services. Similar to other VA programs, Vet Centers need to be held accountable to providing their services in a timely manner within their mission.

Suicide leaves behind scars for those who were close to the deceased, especially family members. Loss survivors may feel a wide range of emotions including rejection, desertion, embarrassment, blame, isolation, and self-destruction. The grief they experience is often compounded with helplessness and unanswered questions. The VFW supports expanding Vet Center eligibility to family members of a service member or veteran who died by suicide. Providing postvention access for readjustment counseling and related mental health services can reduce suicide risk and promote healing.

Student veterans face unique challenges beyond their schoolwork. According to our partner, Student Veterans of America, the majority of student veterans are non-traditional students

over the age of 24 years old. More than half of student veterans are parents, and half of them are married. In addition to pursuing their degrees, the responsibility of securing child care and providing for their families leaves little time for the veterans themselves. The American Psychological Association released a study stating nearly half of student veterans have had suicidal ideations, and 20 percent had a plan to follow through with those ideations. Expanding eligibility to Vet Centers to include certain veterans who are using education assistance benefits gives added mental health support during exciting but often stressful times.

The VFW is very grateful this committee is highlighting Vet Centers and we have a suggestion to help promote that effort even further. *H.R. 4601, Commitment to Veteran Support and Outreach Act*, seeks to push resources toward Veteran Service Officers (VSO) in areas where there is an increased volume in referrals to the Veterans Crisis Line. We recommend adding language to also include pushing resources to Vet Centers in these areas. Accredited VSOs do a fantastic job in assisting individuals to receive their earned care and benefits, but they are not mental health professionals. We appreciate the outside-the-box thinking of this bill, and we believe using this information to identify areas of need and refocusing resources is important. However, we believe VSOs alone cannot accomplish this mission, but combined with increased Vet Center resources this effort can be achieved.

Lastly, the VFW urges Congress and VA to be mindful that the resources and staff of Vet Centers are not pushed to their limits while they carry out their mission of providing readjustment counseling toward a successful post-war adjustment in the 21st century. In order to properly provide these critical services for service members, veterans, and their families, staffing and resources need to be in place for every Vet Center.

However, as much as we urge Congress to provide additional resources, it is difficult to gauge what specifically is needed in order to accomplish the mission. Vet Centers need a model on which to base their staffing and resource needs, but right now that does not exist. The VFW strongly implores Congress to pass H.R. 3575, *Vet Center Improvement Act of 2021*, which would evaluate productivity expectations for readjustment counselors and set guidelines for what type of workload each Vet Center counselor should maintain. Once we have this information, we can more accurately identify what is needed in each specific location.

Chairwoman Brownley, Ranking Member Bergman, this concludes my testimony. Thank you for the opportunity to provide our remarks. I look forward to engaging in further discussions on this subject.

Information Required by Rule XI2(g)(4) of the House of Representatives

Pursuant to Rule XI2(g)(4) of the House of Representatives, the VFW has not received any federal grants in Fiscal Year 2022, nor has it received any federal grants in the two previous Fiscal Years.

The VFW has not received payments or contracts from any foreign governments in the current year or preceding two calendar years.