

SERVICES FOR VETERANS

Position Statement

NASW, Iowa Chapter, believes Iowa should provide a comprehensive array of prevention and intervention services as well as educational and family support to assist Iowa's veterans as they transition from combat to civilian life.

Discussion

Currently there are 177,300 wartime and 57,300 peacetime veterans living in Iowa, for a total of 234,600. Of these veterans, 51,400 served in the Gulf War, 79,700 served during the Vietnam era, and 28,800 served in the Korean conflict; 14,900 were female and 219,600 were male (U.S. Department of Veterans Affairs, 2012c). About 15,000 Iowa National Guard members have been deployed to Iraq, Afghanistan, and other countries since the Sept. 11, 2001, terrorist attacks, and thousands of Iowans have been deployed with other military service branches (Red Bull Rising, 2012). These veterans are often returning home from multiple deployments, and therefore are facing different challenges than previous veterans. Behavioral health services are critical to ensuring veterans can continue to live productive and full lives.

The extended wars in Iraq and Afghanistan over the past decade have impacted the lives of approximately two million U.S. service members and their families in many different ways (Hosek, 2011, p. iii). Ellison et al. (2012) state that many veterans returning from the Gulf War and Operation Iraqi Freedom/Operation Enduring Freedom (OIF/OEF) have an increased risk for mental health problems, including posttraumatic stress disorder (PTSD), depression, suicidality, neuropsychological deficits, and alcohol and drug use. These disorders have implications for individual and unit readiness, physical, social, and emotional health of veterans and their families, and the Veterans Health Administration and other health care systems from which veterans obtain services. The Federal Department of Veterans Affairs is responsible for the distribution of benefits to U.S. veterans. The Iowa Department of Veteran Affairs, in conjunction with the U.S. Department of Veterans Affairs, serves the needs of veterans and their families at state, county and local levels. County veteran's affairs offices assist with shelter/utilities, transportation, and job placement. The Iowa Veterans Home, located in Marshalltown, "is one of the three largest of the 148 state-owned facilities for veterans in the nation" providing medical care, specialized mental health services for Alzheimer's Disease and other dementias, nursing services, residential life care, and career guidance and support. The Iowa Legislature and the Iowa Commissioners of Veterans Affairs provide guidance and oversight of the facility (Iowa Veterans Home, 2012, n.p.n.).

- *Suicide*

National statistics show that veterans make up almost 20 percent of those who commit suicides each year (Army National Guard, 2010). Multiple deployments significantly increase mental health issues and suicide risks. Depressed veterans are 7-8 times more likely to commit suicide than the general population (Zivin, Myra, McCarthy, Austin, & Hoggatt, 2007). "The VA estimates that 18 veterans a day commit suicide" (Roof, 2012, para. 3). More research is needed to assess suicide risk among rural veterans, as rural isolation may be a suicide risk factor (McCarthy et al., 2012).

- *Traumatic Brain Injury (TBI)*

Brain injury has emerged as a serious problem for many veterans over the past 10 years. Of all returning veterans from the Iraq war, 14% to 20% have experienced some form of traumatic brain injury (TBI) (Côté, Syam, Vogel, Bruce, & Cowper, 2007). TBI is difficult to detect using regular internal organ examination methods such as an MRI. Up to one-third of individuals with TBI continue to experience residual physical, cognitive, and emotional impairments (Jones, Dayle, Young, & Leppma, 2010). The Department of

Veterans Affairs reports that TBI symptoms include dizziness, fatigue, noise/light intolerance, insomnia, nausea, memory impairments, poor concentration, irritability, and increased aggression. Veterans with TBI and PTSD have a significantly increased risk for suicide (U. S. Department of Veterans Affairs, 2012a).

- *Substance Abuse and Mental Health*

Among veterans returning from Iraq and Afghanistan, there have been increased numbers of mental health issues and diagnoses. Seal et al. (2009) found higher rates of PTSD, depression, and all other mental health diagnoses in National Guard/Reserve veterans seeking care in the VA compared with other active duty veterans. They also reported that among Army soldiers screened three to four months post-deployment, 27 percent met criteria for alcohol abuse and had an increased risk for related harmful behaviors (e.g., drinking and driving, using illicit drugs).

- *Homelessness*

According to the Department of Veterans Affairs, Homeless Veterans (2012c), there were an estimated 67,495 homeless veterans sleeping on the streets across our nation on a single night. In Iowa, it is estimated 1,700 veterans will be homeless or at high risk thereof this year (Homeless Veterans Project, 2012). Epidemiologic research suggests that female veterans are at three to four times increased risk for homelessness compared with their civilian counterparts (Wallace, Sheehan, & Yinong, 2009). VA Secretary Shinseki, with the support of President Obama, has made a commitment to ending homelessness among veterans by 2015. The Homeless Veterans Initiative is guided by six pillars that address employment, housing, education, and medical treatment of veterans, in addition to the prevention of homelessness through community partnerships. The goal of the Homeless Veterans Project of Iowa is to make Iowa a footprint state in the effort end homelessness among veterans (Homeless Veteran Project, 2012).

- *Issues for Female Veterans*

Women are increasingly populating the ranks of the military. In 2011, 1.8 million (8%) of the 22.2 million veterans were women. Yet, in 2009, 30% of women veterans did not know they were eligible for VA services or benefits (Department of Veterans Affairs, Women Veterans Task Force, 2012). A critical issue for female service members is Military Sexual Trauma (MST), for which one in five women screen positively. MST has been linked to an increased risk of PTSD and substance abuse. MST includes sexual assault and sexual harassment in military settings by intimate partners and/or active duty personnel. Such violence triggers a syndrome of episodic, clustered, psychological and physiological symptoms that may be fatal (Valente & Wight, 2007, pp. 259-265). Thirty-four percent of females return from deployment with reproductive or urinary tract infections as opposed to eight percent of males (Fitzpatrick, 2010). Although there are policies to ensure that women veterans receive services and care related to PTSD and MST, women have a higher burden of proof than their male counterparts in filing disability claims (Schingle, 2009). Female veterans also report lack of childcare as a barrier to seeking treatment (Department of Veterans Affairs, Health Services Research, 2011). The Department of Veterans Affairs formed the Women Veterans Task Force in 2011, to resolve the gaps in how the VA serves women veterans.

- *Divorce and Unemployment*

The Pentagon reports that the divorce rate among U.S. armed forces personnel has risen a full percentage point since September 11, 2001 (National Healthy Marriage Resource Center, 2010). Fifty-four percent of current or recently separated veterans reported conflicts with their partners that involved “shouting, pushing, or shoving,” and 28% reported that their partner was “afraid of them” (Sayers, Farrow, Ross, & Oslin, 2009). Researchers report that the “most severely violent husbands reported the highest levels of depression” (Tanielin & Jaycox, 2008).

Families are further stressed by the instability that unemployment creates in their lives. In 2012, veterans made up 127,000 members of the Iowa workforce. The current overall unemployment rate for Iowa veterans is 6.4%, with post September 11th Iowa veterans being the most affected; 2,000 among 19,000 reported being without a job last year (U.S. Congress, Joint Economic Committee Chairman’s Staff, 2012). Unemployment creates significant barrier, especially for younger veterans as they transition to civilian life.

- *Educational Issues for Veterans*

Veterans frequently enroll in college following active duty and face issues with academic reentry, contractual and financial matters, and the need for advising and counseling services (Rumann & Hamrick, 2009). The Veterans Administration handles educational benefits and is often difficult for students to navigate; additionally, not all campuses have functioning programs to assist student veterans with this process. Currently there is nothing regarding veteran/military identification in the college registration process, which makes it difficult to identify these students unless they are using education benefits (Ellison et al, 2012). In a study of psychological symptoms and suicide risk among student veterans, Rudd, Goulding and Byra (2011) found that almost 35% of the sample experienced severe anxiety, 24% experienced severe depression, and nearly 46% reported major symptoms of PTSD. More concerning, the study found that 46% of student veterans had contemplated suicide. Although many campuses have responded with Student Veteran Service Centers, a large service gap remains. Other campus personnel and student services that have significant contact with student veterans generally are not trained or equipped to meet the needs of student veterans.

- *Iowa Legislation*

During the 2012 session the Iowa Legislature approved a number of policies addressing issues facing veterans (Legislative Services Agency, 2012):

- SF 2244: clarified the requirements – serious or very serious injury – to be eligible for the State's Injured Veterans Grant program.
- SF 2245: called for the establishment of a "Post-Traumatic Stress and Dual Diagnosis Center" at the Iowa Veterans Home in Marshalltown to provide long-term care to Iowans suffering from combat-related post-traumatic stress and substance abuse.
- SF 2336: provided home-buying assistance to veteran homebuyers.
- HF 2466: provided funding (Veterans Trust Fund) for veterans who need emergency assistance such as home repairs, urgent medical or dental care, and other pressing needs.
- SF 2097: expanded eligibility for the Iowa National Guard Civil Relief Act to prevent lease termination, eviction, or the disconnection of utilities and other services for active duty veterans.
- HF 2403: expanded employment opportunities by allowing the Iowa Department of Transportation to waive the driving skills test for a Commercial Driver's License if a returning service member has proper training and military-related work experience.
- SF 2112: allowed veterans to list their military/veteran status on their Iowa drivers' licenses or state ID cards as a means of expediting the application for benefits.
- SF 2321: ensured that returning soldiers get their promised college tuition aid by investing in the Iowa National Guard tuition assistance program.

Recommendations

The NASW Iowa Chapter supports the implementation of the policies passed in 2012 by the Iowa Legislature. Additionally, to assist veterans in their transition from combat to civilian life, we recommend the following:

- Conduct a needs assessment, through the Iowa Department of Veteran Affairs, to gain a demographic profile of veterans in the state, and to assess their unique service needs.
- Provide educational opportunities for Iowan healthcare professionals, including social workers, mental health counselors, and family care physicians, to learn about the unique issues of military culture and the particular needs of military veterans and their families.
- Challenge Iowa colleges and universities to identify students' veteran status upon admission, assist student veterans in acquiring the educational benefits to which they are entitled, hire licensed social workers/mental health professionals to provide appropriate support services, and train academic advisors and educators to address the unique military issues effecting student veterans.
- Work with the Iowa Department of Veterans Affairs to ensure the delivery of mental health counseling services to veterans living in rural areas of the state.
- Establish childcare programs/subsidies to enable veterans to enter or re-enter the workforce.

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