



Veterans Mental Health May 2009

Increasingly, our nation's veterans with serious mental health needs— primarily those returning from combat service in Iraq and Afghanistan – are turning to county mental health departments because they are either not eligible for or are not able to access mental health services through the United States Department of Veterans Affairs (USDVA) in a timely manner.

Background

It is not uncommon for veterans serving in combat to return home with emotional and/or psychological difficulties that occurred as a result of traumatic impacts of war. We have learned that veterans with untreated mental distress are often at increased risk of other serious problems such as substance abuse, unemployment, homelessness, strain on families, domestic violence, incarceration, depression, Post-Traumatic Stress Disorder (PTSD) and other anxiety disorders, and suicide.

For most veterans, accessing mental health services through the USDVA is challenging. All veterans, except for those that served in combat post 9/11, must provide proof of the claimed disability, followed by an assessment to determine the extent to which the disability is “combat related.” Numerous reports by veterans point to the following challenges: (1) USDVA assessment process involves extensive wait times; (2) USDVA is incredibly short-staffed; and (3) USDVA healthcare is available only in limited geographic locations. Other barriers to accessing services include that veterans must be diagnosed within two years of leaving the military, and are excluded from services if they have a criminal record or were dishonorably discharged.

Post-9/11 combat veterans are subject to a different set of regulations in accessing services. Specifically, they are eligible for 100% medical and mental health coverage for five years after being honorably discharged, and are not required to prove their disability is “combat related.” Currently, families are not eligible to receive care at VA Medical Centers; however, the veteran and his or her family can get free counseling at VA Veterans Centers. Thus, it is easier for this group of veterans to access health and mental health services. Unfortunately, many of the veterans in this post-9/11 group still do not access care because they do not know they are eligible, or their current health or mental health status creates a barrier. They also may be concerned about the stigma associated with seeking mental health care and the impact it may have on their careers -- both civilian and military.

The California Mental Health Directors Association (CMHDA) and individual counties have and will continue to work collaboratively with California policy makers and veterans' groups to address access problems for veterans who are either waiting for federal evaluation and determination by the USDVA for mental health services, or are eligible for available public mental health services.

County Commitment to Veterans Mental Health

In 2005, CMHDA worked with the late Assembly Member Mike Gordon on AB 599 (Chapter 221, Statutes of 2005), a law that specifically states that California veterans in need of mental health services who are not eligible for care by the USDVA or other federal health care providers, and who meet the existing realignment (W&I Section 5600.3) "target population" eligibility requirements, should be provided services *to the extent resources are available*. The law also requires counties to refer a veteran to the county veterans' service officer to determine the veteran's eligibility for, and the availability of, mental health services provided by the USDVA or other federal health care providers.

In 2006, CMHDA worked with Assembly Member Joe Nation on AB 2844 (Chapter 618, Statutes of 2006), which prohibits county mental health authorities from denying mental health services to veterans based solely on their status as a veteran. In the same year, CMHDA worked with Assembly Member Nicole Parra on AB 2586, which includes veterans returning from Iraq and Afghanistan among those eligible for alternative sentencing programs if they allege that the crime committed was the result of PTSD, substance abuse or psychological problems associated with service related combat. The measure allows the judge to refer such an individual to mental health treatment through the county mental health system, to the extent that resources are available and the services are within the scope of county mental health services. To date, Orange and Santa Clara counties have already established these alternative sentencing programs for veterans.

In 2008, CMHDA worked with Assemblymember Mary Salas on AB 3083 (Chapter 591, Statutes of 2008), which clarifies that PTSD is among the serious mental disorders that may qualify an individual for county mental health services. The bill also states that counties "should assist veterans who may be eligible for federal United States Department of Veterans Affairs benefits to access those benefits."

The Mental Health Services Act (MHSA) has recently provided resources to communities for un-served and under-served populations with mental illness. Particularly in counties with a high concentration of veterans and their families (such as those with military bases), this population has been identified as having a high priority need for MHSA-funded services. Examples are described below.

- A new MHSA-funded housing program is expected to create thousands of new supportive housing units over the next few years to address the needs of individuals with serious mental illness who are homeless or are at risk of homelessness, a significant percentage of whom are veterans.
- Counties are in the process of developing and implementing plans for the Prevention and Early Intervention component of the MHSA, and have developed some very innovative "outreach and engagement" strategies for veterans. For example, Kings

County developed and funded billboards specifically encouraging veterans to access county mental health services.

Counties have funded (through MHSA funds) a “Network of Care” for Veterans website that will include specific information in each county for how veterans and their families can find local veterans resources – including where they can get mental health care. The Veterans Network of Care website (www.networkofcare.org) is currently available for each county that subscribes to NOC (almost all do), with specific information regarding mental health services for veterans and their families. This month, Governor Schwarzenegger proudly participated in the launch of this new resource supported by counties.

CMHDA worked with the California Institute for Mental Health in the development of a training film about veterans mental health needs entitled “Another Kind of Valor.” The film is currently being used very effectively to help train community mental health staff in identifying and dealing with the mental health needs of veterans – particularly those returning from the Iraq and Afghanistan wars – and their families.

County Mental Health Resources

Despite the exciting developments described above, county mental health authorities do not have anywhere near the financial resources necessary to serve all those in need who meet the eligibility criteria for public mental health services, including those who are veterans. Eroding core mental health funding (Medi-Cal, Realignment revenues) over the past few years has resulted in many counties having to actually reduce already inadequate mental health services. In fact, based on the current economy, it is projected that county Realignment revenues for mental health (which are comprised of sales tax and vehicle license fees) will decrease by 17% from Fiscal Year 2007-08 to 2008-09. Additionally, Mental Health Services Act (Prop. 63) revenues (which come from personal income taxes) are projected to decrease by 30% from Fiscal Year 2009-10 to 2010-11. These trends are expected to continue for the foreseeable future, significantly eroding the most reliable and flexible funding counties have.

CMHDA Recommendations

Our nation has a responsibility to address the health and mental health needs of its veterans. To accomplish that goal, the federal government should:

- Expedite access for veterans to their rightfully earned U.S. Department of Veterans Affairs benefits;
- Be held accountable for providing adequate funding for health, mental health and substance abuse services for California’s veterans;
- Invest significantly more resources in earlier mental health screening and treatment services for veterans with mental illness and substance abuse treatment, as many of these young veterans self-medicate with alcohol or other drugs; and
- Allow county and community-based mental health providers to contract with the federal government to provide mental health and substance abuse services to veterans.

At the same time, county mental health departments should:

- Ensure that veterans and their families have the same access to county mental health services as other eligible members of the community, to the extent resources are available;
- Refer veterans to their county veterans' service officer, to assist them in determining eligibility for federal veterans' benefits;
- Continue to work collaboratively with veterans' advocacy groups to help address the growing unmet mental health needs of the veterans in our communities, including advocating together for more state and federal funding; and
- Include veterans and veterans' organizations in their local MHSA community stakeholder processes.

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