



Testimony of Loree Sutton, M.D., Brigadier General, U.S. Army, Retired  
Commissioner of the Mayor's Office of Veterans' Affairs  
New York City Council Committee on Veterans

**Proposed Resolution # 747-A: Resolution recognizing this and every June as Post-Traumatic Stress Disorder (PTSD) Awareness Month in New York City**

1:00 pm, Tuesday, June 16, 2015

Good afternoon, Chairman Ulrich and the members of the Committee on Veterans. My name is Loree Sutton and I remain honored as always to serve as the Commissioner of the Mayor's Office of Veterans' Affairs. Thank you for the opportunity to meet with you and address today's topic of recognizing this and every June as Post-Traumatic Stress Disorder Awareness Month in New York City.

Mr. Chairman, thank you so much for your leadership. I was proud to stand beside you on June 10 in front of City Hall, joined by members of the veterans' community and leaders of our myriad and invaluable Veteran Service Organizations; mental health professionals dedicated to PTSD prevention, treatment and recovery; and concerned citizens. Working in partnership, there is so much we can do together, focusing our efforts on today's topic as well as the entire range of issues and concerns affecting the health and wellbeing of New York City veterans and their families. We are blessed to live, lead and serve in the world's greatest city, united by the conviction held dear that our enduring advocacy on behalf of veterans must be worthy of their service and sacrifice.

During my nearly 30 years of Army service as a physician and psychiatrist, my duties included combat and peacekeeping deployments; faculty appointment at the Uniformed Services University of the Health Sciences and White House Fellowship at the Office of National Drug Control Policy; and Hospital Command tours at Fort Belvoir and Fort Hood, the nation's largest power projection platform. Selected to serve as the Command Surgeon for the Multi-national Force in Iraq during the 2007 surge, my assignment was diverted to Washington, DC upon nomination for promotion to Brigadier General, following exposure of the tragic shortfalls in caring for wounded, ill and injured troops at Walter Reed hospital. This period of turbulence and public outrage led to the necessary resources, political will and civilian/military leadership at all levels to fix the facility/leadership breakdowns and to address the unseen wounds of war – psychological, spiritual, moral and physical – whose profound impact was increasingly apparent.

Responsible for leading the Department of Defense (DoD) with respect to designing, implementing and directing the Congressionally-mandated Defense Centers of Excellence (DCoE) for Psychological Health and Traumatic Brain Injury, our team developed a 'Center of

Centers' concept, establishing standards of care for over 2.3 million service members, whether at home station or while deployed. Integrating four existing treatment, training and research centers (Deployment Health Clinical Center; Center for Psychological Health; Defense Veterans Brain Injury Center; and the Center for the Study of Traumatic Stress); we also formed two new centers: The Center for Telehealth and Technology and the National Intrepid Center of Excellence, which has become the global standard for integrative health with respect to brain injuries and the unseen wounds of war. The DCoE foundational framework – Resilience, Recovery and Reintegration – guided our strategy to cultivate a different kind of healing culture, characterized by investments in community-based peers, self-regulation skills training, sustainable holistic programs and public-private partnerships as well as technology, clinical therapies, medications, and bio-markers.

Indeed, it has been my incredible privilege, over these many years, leading to the past nine months of service as your Commissioner for the Mayor's Office of Veterans Affairs, to witness the strengths and struggles and work on behalf of myriad brave women and men returning from battlefields downrange to face what for many of us is the toughest battle of all – returning home. As veterans, we have experienced a level of closeness, cooperation and teamwork that we miss desperately when we leave the service. Our journey to wholeness starts with the experience of renewed purpose, passion and meaning that is grounded in the social support of peers, family and community. These are timeless truths: isolation kills; community heals.

The Mayor and this Administration are committed to tackling these issues head on and ensuring that veterans are connected to quality care, services and resources. The Executive Budget includes approximately \$150 million across more than a dozen agencies for programs and services that benefit veterans and their families.

When dealing with PTSD and other psychological injuries, social support is vital, and can mean the difference between recovery and growth versus despair and isolation. Approximately 70-80% of soldiers, even those who endure the most stressful ordeals of war – becoming wounded, ill or injured; killing or witnessing the death of an enemy soldier; or, toughest of all, having a friend die – will experience post-traumatic stress (PTS) yet eventually recover their ability to function as a contributing member of society, retooling their capacities for continued service to others, especially their veteran sisters and brothers. Despite the painful aftermath of experiencing the horrors of war, many will also find a path through their suffering to experience what is known as 'post-traumatic growth' – enhanced compassion and empathy for others; deeper faith and commitment to service; gratitude for being alive or a heightened sense of purpose, to name a few examples – as a positive dimension of their experiences, however harrowing.

We know that war changes everyone; our challenge is to intervene early through a continuum intervention starting with conducting community outreach and peer/family education to peer skills training and counseling programs offered by Vet Centers and other community-based organizations to clinical treatment programs and other essential services such as housing, employment, benefits eligibility, legal services, disability claims, financial counseling and education. While PTS/D can pose daunting challenges, it is by no means the only issue facing veterans as they transition from military service and begin the journey of reintegration.

We must also be aware that many veterans are wary of the attention directed towards PTSD and the psychological burdens of war, carried too often in isolation by less than 1% of our nation, the service members and families who bear this load on our behalf. Veterans frequently describe a disturbing sense of alienation, for example, when prospective employers demonstrate fear and prejudice regarding PTSD upon learning of their military background during a job interview. Or, at the school PTA meeting, when a teacher or fellow parent asks the dreaded question: how many people did you kill? Or, as a veteran recently divulged to me, he was rejected for employment because he sought mental health treatment following return from combat and was automatically disqualified from further consideration. Making matters even worse, this veteran, a former infantry squad leader who had lost one of his soldiers to suicide, had assured his team that seeking mental health treatment to deal with the loss of their buddy would not harm their future career prospects. Just take a moment to imagine the guilt and moral injury sustained by this veteran's experience. Unfortunately, stigma remains a toxic and debilitating hazard that we relentlessly must work in partnership to overcome.

Together, we face a pressing challenge to communicate, coordinate and connect veteran needs with care, services and resources throughout the City agencies as well as community-based organizations and service providers within the five Boroughs. Our vast City agency resources combined with robust community partnerships are the key elements required to effectively meet the needs and promote the strengths of our city's veterans. VA services remain essential for many of our veterans; as the 2011 New York State Needs Assessment performed by the Rand Corporation reminds us, however, roughly half of veterans in New York prefer to access their health care from community-based resources, whether due to convenience, eligibility, access or other preference. Thus, it is critical to sustain our emphasis upon connecting veterans and their families with coordinated care, services and resources that best fit their needs, which often includes a combination of private, not-for-profit and philanthropic resources in addition to federal, state and City services.

Recognizing the prevalence and impact of trauma, whether related to combat, motor vehicle accidents, punitive segregation (commonly known as solitary confinement), sexual assault or other life-threatening experiences, this Administration, under Mayor de Blasio's leadership, is committed to ensuring timely and affordable access to effective mental health treatment services and other community resources. Far too many individuals and families continue to struggle with PTSD and the stigma related to this condition — today's proposed resolution brings us one step closer toward helping these courageous New Yorkers access the help they need to reclaim lives of purpose, dignity and service to others. We must share these truths with our veteran sisters and brothers: PTSD and the unseen wounds of war are real; treatment works; the most effective intervention starts early with peers, families and communities; and reaching out is an act of real strength and courage.

Our MOVA team lives these truths every single day, in engaging with veterans, whether through walk-ins, phone/email contacts, community outreach events or correspondence messages. MOVA's constituent services experts, Latisha Russaw as Military Community Liaison, and Ines Adan, as Director of Human Services, are renowned for their tireless work on behalf of veterans and their loved ones. In addition to their individual professional expertise and organizational

contacts throughout the NYC veteran community, their reach spans across over 70 City agencies through the veteran agency liaison network.

Many veteran requests for assistance involve complex issues clustered around basic survival needs – food, shelter, safety and employment, often complicated by mental health and substance use disorders, troubled relationships and limited social support. MOVA becomes a refuge, a place where veterans know they will always find a smiling face, a listening ear, a helping hand and a resourceful network. Although most of MOVA's caseload concerns housing, employment, benefits, crisis intervention and education requests, we do assist veterans who seek mental health treatment. For the roughly 50% of veterans who are ineligible or unwilling to seek VA services, MOVA assists veterans in accessing City mental health resources and services via the LIFENET counselors, accessible through 3-1-1, who are trained to assess needs and connect individuals and families with the City's vast network of approximately 1,000 mental health service providers and community-based organizations. For example, the Department of Health and Mental Hygiene invests nearly \$4 million in supportive housing for those with mental illness and/or substance abuse disorders. Providers focused on serving veterans and their families include Jericho Project, Volunteers of America and Services for the Underserved.

Also, HHC public hospitals and community health centers in every borough offer a wide array of mental health services -- including inpatient, outpatient, partial hospital, community treatment and blended case management services -- to help with depression, anxiety, post-traumatic stress disorder and other more serious conditions such as psychosis, bipolar disorder and schizophrenia. These programs serve a large number of veterans and their families but are open to and serve all New Yorkers.

Many additional services complement the City's significant investment in veteran mental health. The City invests more than \$57 million in veteran-targeted housing programs through NYCHA, HPD and DHS. The City will be augmenting its efforts to end veteran homelessness this year by adding clinical and peer coordinator staff at DHS to better coordinate with MOVA. And to support veteran employment, SBS invests over \$1 million in workforce employment mentoring to entrepreneurial networking. In sum, New York City invests over \$150 million annually to improve the health and wellbeing of its veteran community.

Through connecting veterans and their families with the entire range of City programs as well as other public, private, and not-for-profit resources, MOVA remains committed to do whatever it takes to improve the lives of NYC veterans and their families. New York City is uniquely positioned to lead the nation in this endeavor. While much has been done, much work remains. Many veterans are thriving; many are also struggling and remain reluctant to reach out for help. For example, recent research documenting increased rates of suicide among all veterans demands our urgent attention and focused action; further, women and LGBTQ veterans, many of whom struggle with complex PTSD, are dying by suicide at staggeringly high rates compared with their civilian age-matched peers.

Over the coming months, MOVA looks forward to continuing to deepen and strengthen our relationships with our agency partners and City Hall to connect Veterans to the services they need. Our continued partnership with the First Lady will play a key role in these efforts. Further,

we look forward to working with you in the City Council and the advocate community to ensure that our veterans and their families receive the care they deserve and have earned.

In closing, let us redouble our efforts to understand the prevalence and impact of PTSD and, enlightened with this awareness and knowledge, seek to create and sustain a 'community of communities' in New York City, the largest city in the nation, in which none of us is truly alone. May all of us as New Yorkers, with veterans leading the way, commit ourselves to serving those in need and, in so doing, healing ourselves and strengthening our society as a whole. This is the work of our generation – and is worthy of our City's enduring legacy of bold imagination, heroic action and global impact . . . There simply is no greater privilege.

I thank you for your continued leadership and collaborative teamwork in bringing awareness to PTSD and other critical issues concerning NYC veterans and their families. At this time, I welcome your thoughts, questions and concerns.

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To: The Veterans' Committee of the New York City Council  
From: Military Families Speak Out New York Metro Chapter  
Date: June 16, 2015  
Re: Proposed Res. No. 747-A: Resolution recognizing this and every June as Post-Traumatic Stress Disorder Awareness Month in New York City

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Thank you for the opportunity to support the Resolution to make June PTSD month in New York City. Military Families Speak Out is a national charity originally formed as a non profit in 2002 by families of soldiers who served after 9/11 who opposed the wars in Iraq and then Afghanistan, the slogans "Bring the Troops Home Now" and "Take Care of Them When They Get Here." Resolution 747-A would be the first of a long series of steps that NYC can take to reciprocate the veterans for the consequences of their service. PTSD is treatable and can diminish, leading to a safer and happier community for all.

**THE COST OF PTSD NOW:** There are today many veterans in jail who if they had received the proper care when they got back would not be costing the taxpayers money for their upkeep and would be leading productive lives in the community. There are several states that are ahead of New York in terms of counseling and treatment for veterans with PTSD. Treatment should be more accessible in local community health centers, a NYC team led by a combat veteran officer with counseling by trained counselors who are veterans, as in the successful Chicago program. PTSD untreated leads to substance abuse, divorce, suicide, death by cop, destruction of the nuclear family and suffering of children, eviction from the family home, jail and many other effects that are expensive and sometimes dangerous to the community at large, so neglect and denial do not work. There is a veteran in Colorado today, a decorated war hero, who was given 27 years because he shot a pistol in the air at a party. If it were recognized that he was suffering from PTSD, he could have been given treatment and perhaps not be spending the rest of his life in jail.

**Confidentiality:** Veterans may be justifiably afraid to admit they have PTSD in order to keep their jobs: for example, if you are a security guard and you admit you have PTSD, you may get fired, or if you are a pilot, and get chest pains near an airplane, you may be fired. Other ways of dealing with PTSD that are inadequate, such as instead of counseling or group meetings, giving anti anxiety medications that do not work and sometimes cause suicide. One veteran from the 101<sup>st</sup> Airborne had flashbacks, was put on medications, that did not work, and then stopped taking meds, and said he just had to accept his condition and live with it the rest of his life. What kind of life is that? Will that person be able to form close relationships? Thirdly, if you admit you have PTSD they probably will not hire you if you apply for a job because they'll be afraid of unknown consequences. For this reason, any community treatment records should have physician-patient confidentiality by law. This does not always work, as we know in NYC, when the records of tens of thousands of teenagers that were supposedly confidential and thrown away after six months, were revealed and open to public inspection. It would be important to try to guarantee confidentiality to protect those who were willing to pay the ultimate price to protect our country.

Respectfully submitted,  
MFSO Metro Chapter

## Written Submission to the New York City Council Committee on Veterans

Maria Steenkamp, PhD

June 15, 2015

Chairman Ulrich and members of the Committee:

Thank you for inviting testimony from our organization today at the New York Council Committee on Veterans. I am Dr. Maria Steenkamp, a research assistant professor and clinical psychologist at the Steven and Alexandra Cohen Military Family Clinic at NYU Langone Medical Center. I am here today to provide testimony on behalf of the leadership and staff of the Military Family Clinic in support of Proposed Resolution No. 747-A declaring June as Post-Traumatic Stress Disorder Awareness Month in New York City.

The Steven and Alexandra Cohen Military Family Clinic at NYU Langone Medical Center was founded to provide high quality mental health treatment accessible to veterans, active duty service members, and their families. The Clinic is committed to removing any barriers to treatment and welcomes all military personnel regardless of their discharge status, time of service, and deployment experience. Since inception in July 2012, we have served over 500 veterans and their family members, approximately one quarter of who suffer from PTSD.

We believe that it is very important that New York City highlight the impact of post-traumatic stress by declaring June Post-Traumatic Stress Disorder Awareness Month in New York City. Affording this designation would lead to increased education for the public, including those who suffer from PTSD and their families. It would allow greater awareness regarding the disorder, its symptoms, its prevalence, and the treatments available. Increased public awareness of PTSD would also be an important step towards decreasing the stigma associated with the diagnosis. Additionally, we believe that it would lead to an increased sense of community around PTSD, leading to greater support for those impacted by this debilitating disorder.

Thank you for the opportunity to present our testimony on this important issue.

# ***The Veterans Mental Health Action Committee***

of the **Veterans Mental Health Coalition of NYC**

## **Proposed Res. No. 747-A: Resolution recognizing this and every June as Post-Traumatic Stress Disorder Awareness Month in New York City**

Honorable Eric Ulrich, Chair  
The Committee on Veterans  
New York City Council

Testimony by Jason Hansman

June 16, 2015

***The Veterans Mental Health Action Committee***  
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*A project of the Mental Health Association of NYC and NAMI-NYC Metro*

**Proposed Res. No. 747-A: Resolution recognizing this and every June as Post-Traumatic Stress Disorder Awareness Month in New York City**

Good afternoon Chair Ulrich and members of the Committee, thank you for having us testify at this important hearing on making June Post-Traumatic Stress Disorder Awareness Month in New York City. My name is Jason Hansman, and I serve as Chair of the NYC Veteran Mental Health Coalition's Political Action Committee. I'm also an Iraq War veteran having served in Mosul in 2004 – 2005 and Graduate Student at NYU.

The Coalition, which has over 1,000 diverse members was co-founded by the Mental Health Association of New York City (MHA-NYC) and NAMI-NYC Metro and promotes the mental health and well-being of New York City service members, veterans, and their families through education, information, collaboration, and promotion of a comprehensive array of services. VMHC has an established subcommittee on promoting needed policy reforms called the Veterans' Mental Health Action Committee. I am testifying on behalf of that committee today.

We count among New York City residents over 230,000 military veterans. And as more servicemembers transition back to civilian life, this number will increase by the thousands and will require additional resources in both dollars and staffing to fill the need. A range of coordinated services, from all levels of government, the private sector, and local civilian based providers is required for veterans and their families to successfully transition and thrive in their communities.

We know from a groundbreaking 2008 RAND study that nearly 20% of returning veterans suffer from PTSD. If these numbers hold for NYC, which we expect that they do, we

The Veterans Mental Health Action Committee of New York City

would have nearly 50,000 veterans in NYC that suffer from PTSD. That's roughly the capacity of Yankee Stadium.

Given the nature of our Coalition, this is a topic of great importance to us. We have a number of great mental health providers in the city, ranging from the Department of Veterans of Affairs, the Headstrong Project, and the NYU Military Family Clinic –which are represented on our Coalition. Resolving to make June PTSD Awareness Month would bring much needed awareness to the issues inside of NYC – much like it has at the national level. One of our policy priorities this year, which we have attached to our written testimony, is to work with the city to establish a city wide awareness campaign to combat stigma, and this resolution is a great step forward in making that happen.

Our Coalition has been on the front lines working to combat the often overwhelming stigma that surrounds mental health issues, and especially PTSD. We have worked to address these issues within our educational series especially which have taken on issues as diverse as Women in the Military to the Civilian Military Divide all with the intent of de-stigmatizing the issues that veterans face. We also worked last June to put together a public PTSD awareness event, just a few blocks north of here, with Honor for All. This event not only brought together New Yorkers but also representatives from city government, the military and Medal of Honor recipient SSG Ty Carter.

We are incredibly lucky in NYC to have not only a Commissioner of Veterans Affairs that has the knowledge and passion for mental health issues but also a First Lady who has taken on the enormous responsibility to make mental health accessible to every New Yorker. We are encouraged to hear that the Commissioner is working with the First Lady to integrate veterans

The Veterans Mental Health Action Committee of New York City

into the city's efforts to address mental health. Given the Commissioner's background we have no doubt that we will become a national leader in mental health efforts for veterans.

We look forward to continuing our work with this Committee and the DeBlasio administration to help make June PTSD awareness month and ensure that we are doing all that we can, every month, for those veterans who are suffering with mental health issues.

## Veteran Mental Health Coalition

### Political Action Committee

#### Policy Agenda

#### **1. Integrate Veteran Crisis Line with New York City 311**

Currently the city wide 311 service utilizes Life Net for anyone who calls in expressing suicidal ideation. Unfortunately, demand for suicide intervention resources in NYC is overwhelming and there are known wait times plaguing Life Net. Also the issues that veterans face can be unique for this community, which is why the VA established their own crisis line. For these reasons the action committee should advocate for the inclusion of the Veterans Crisis Line as the primary resource if a veteran is calling into 311 in crisis.

#### **2. Encourage City Council discretionary funds to be spent on best in class community-based emotional wellness programs**

In coordination with the other committees and the general membership of the Veteran Mental Health Coalition, a veteran programs best practices checklist should be created to assist city council offices in selecting and funding resources across the city. As the scope of our coalition is narrow, this rubric should focus exclusively on programs that support emotional wellness. In line with this rubric the action committee will advocate for more city council offices to fund programs that follow these best practices.

#### **3. Expand state funding to programs in NYC, specifically the PFC Joseph Dwyer program.**

There are a number of state programs, such as the PFC Joseph Dwyer program, that have yet to expand into NYC. In order to best serve the city of New York the action committee should advocate to have these programs expanded into the 5 boroughs of NYC.

#### **4. Train local first responders in the best practices to support veterans in crisis**

Given potential interactions between veterans and first responders (police, fire and EMS) and the unique issues that veterans face. As these interactions can be critical, ensuring that first responders are trained on the unique issues that veterans face can make these interactions more productive. For this reason the action committee should advocate for city wide first responders to be trained on the unique needs of veterans.

#### **5. Launch a city awareness campaign to combat the stigma of seeking help for combat stress injuries**

Mental health has already been identified as a major issue by the First Lady of New York City. Given the role of this coalition, veterans should be a major part of any city wide initiative on mental health. It is well known that there is a great deal of stigma surrounding mental health

## The Veterans Mental Health Action Committee of New York City

issues, and one way to combat it would be through a city wide awareness campaign. The action committee should advocate strongly for a city wide campaign to help reduce stigma around seeking help for mental health issues among our cities veterans.

### **6. Establish veteran treatment courts in all 5 boroughs**

Veterans Treatment Courts are nationally recognized as an alternative to incarceration for veterans who are charged with non violent crimes. While three out of the five borough currently have Veteran Treatment Courts, there are still two boroughs (Staten Island and Manhattan) that are lagging behind. Currently everything is on track to ensure that these two boroughs create courts over the next year plus. As these courts can keep veterans out of the criminal justice system the action committee should advocate for their inclusion in all five boroughs.



**Statement of Anthony Pike**  
**Field Director, Iraq and Afghanistan Veterans Of America**  
*before the*  
**New York City Council Committee on Veterans**  
for the hearing on:  
**Proposed Resolution 747-A: Recognizing This And Every June**  
**as Post Traumatic Stress Disorder (PTSD) Awareness Month**  
**in New York City**

**June 16, 2015**

Chairman Ulrich, esteemed members of the committee:

My name is Anthony Pike, an Iraq War veteran and the Field Director at Iraq and Afghanistan Veterans of America (IAVA). On behalf of Iraq and Afghanistan Veterans of America's 400,000 members -- 10,000 of whom reside in New York City -- I would like to extend our gratitude for the opportunity to share our thoughts on recognizing this and every June as Post Traumatic Stress Disorder (PTSD) awareness month in New York City.

Before I begin my testimony I would like to thank Chairman Ulrich, Commissioner Sutton and other key partners in the veteran community for their leadership in bringing this issue to the forefront.

Last week I stood on the steps of City Hall with many of the people in this room to highlight the importance of raising awareness of PTSD. I come before you again today equally as resolute on this topic and urge this committee to adopt the proposed resolution.

New York City is in a unique position to become a municipal leader on veterans' issues. It is crucial that the City Council and Mayor take substantial action to implement benefits and services for veterans around employment, education, and health care. These three priority areas directly impact the lives of our members, the growing body of veterans from the post-9/11 wars.

This is why IAVA supports the City Council Bill introduced by Councilman Eric Ulrich to

establish a Department of Veterans Affairs within the New York City government. The establishment of a dedicated, fully funded Department would also make our city a leader in addressing PTSD and combating veteran suicide.

PTSD has long impacted veterans from all wars. But with well over 2.8 million veterans from the Iraq and Afghanistan wars, PTSD has become a massive public health issue that no American, or New Yorker, can ignore.

An estimated 20 percent of Iraq and Afghanistan veterans are diagnosed with PTSD or depression, and most civilians are unaware that 22 veterans take their own lives each day.

These numbers highlight how critical it is that we have integrated systems, at the city, state and federal levels to seamlessly connect our veterans to support, both in moments of crisis and as they transition back to their lives stateside.

Mental health care access and suicide prevention are key priorities for IAVA. While it is important to avoid stereotyping all veterans, today's resolution emphasizes the need for those who are suffering to receive support.

IAVA works to connect vets to the help they need, when and where they need it, through our Rapid Response Referral Program. Our team of trained case managers connects veterans to a range of services as they transition from military to civilian life.

And for those who are suffering from the hidden scars of war, we let them know they are not alone.

Stepping forward to seek mental health care is a sign of strength and also one of the most effective ways to reduce the risk of suicide. This is why it is critical for services to be swift in responding to veterans when they do come forward.

All too often, veterans tell us stories of disjointed services – of moments when they asked for help only to be met with red tape and bureaucracies and confusion of care.

One of our veteran members from New York who recently came to IAVA in crisis told us of her frustration and hopelessness in trying to access care when she was not taken seriously. We were able to connect her with the Veterans Crisis Line and to someone who understood and was able to help. Since connecting this veteran to support, she has been going to counseling weekly and reports learning new coping skills in managing her PTSD.

While IAVA works to connect returning service members with support, we are also tireless advocates on the policy front. In February we were at the White House as President Obama signed into law a bill named after a friend of mine: the Clay Hunt Suicide Prevention for American Veterans Act. This historic bill will save countless lives

by improving access to quality mental health care.

With proactive efforts to implement the Clay Hunt Act and to continue emphasizing a holistic, long-term approach to mental health at the city level, we can ensure veterans no longer slip through the cracks of our existing services.

Thank you again to Councilmember Ulrich for your tireless efforts on behalf of our veterans, and we look forward to continuing to work with all of you to ensure our veterans suffering from PTSD and depression know they are not alone.

I thank the committee for their time and welcome any questions.

#### **Anthony Pike Short Bio**

As Field Director, Anthony manages local events, leadership cultivation and member experiences. Anthony enlisted in the Marine Corps in March 2000. He served his first Iraq tour in Baghdad beginning in January 2004. In March 2006, Anthony deployed for a second tour to Ramadi, Iraq. He recently completed his bachelor's degree in Aviation at Westminster College in Salt Lake City.

Operation Warrior Wellness  
A DIVISION OF THE DAVID LYNCH FOUNDATION  
*"Healing the Hidden Wounds of War"*

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**NYC COUNCIL HEARING JUNE 16, 2015**

**Oversight: Resolution to Recognize June PTSD Awareness Month**

Good afternoon and thank you all for the opportunity to discuss our Foundation and the need for connecting NYC Veterans with the benefits of our program.

I am Chief Master Sergeant (ret) Edward Schloeman and National Chairman of The David Lynch Foundation's (DLF) Operation Warrior Wellness (OWW).

The product that we provide is a simple, data driven, non-religious modality, which has been shown to rapidly and profoundly reduce symptoms of Post-Traumatic Stress and Depression. It is called Transcendental Meditation or TM.

TM is a form of meditation, taught by a qualified teacher, and is practiced twice a day. It allows the active thinking mind to settle inward to experience a naturally silent, peaceful level of awareness during which the brain functions with greater coherence and the body enjoys a profound rest.

**WHY THE URGENCY TO HAVE NYC VETERANS BE AWARE OF THIS SERVICE? BECAUSE THERE IS AN EPIDEMIC OF MENTAL HEALTH INJURIES AMONG OUR VETERANS.**

- DoD reports in 2014, 434 Active Duty/Reserve/National Guard members took their lives due to a breakdown in their mental health.
- Every 65 minutes a Veteran commits suicide and that number has been constant for many years:
- Estimated 20 to 30% of all veterans suffer from some form of PTS.
- 225,000 NYC Veterans would mean from 45,000 to 67,500 of our veterans are at risk.

## WHAT ARE THE PROVEN RESULTS OF USING TM

Key findings from studies of TM on Veterans suffering from PTS include;

- 45% decrease of PTS symptoms
- 50% reduction in symptoms of depression
- 35% decrease in insomnia
- 30% improvement in satisfaction with quality of life
- Dramatic reduction in substance abuse and alcoholism.

Some of our NYC partners include; Jericho Foundation, The Headstrong Project, Wounded Warrior Project, Fountain House, Cornell, Family Justice System, Vietnam Veterans of America/Chapter 126, Rikers Island Prison, John Jay College, NYU, Veterans Lifeline, and others.

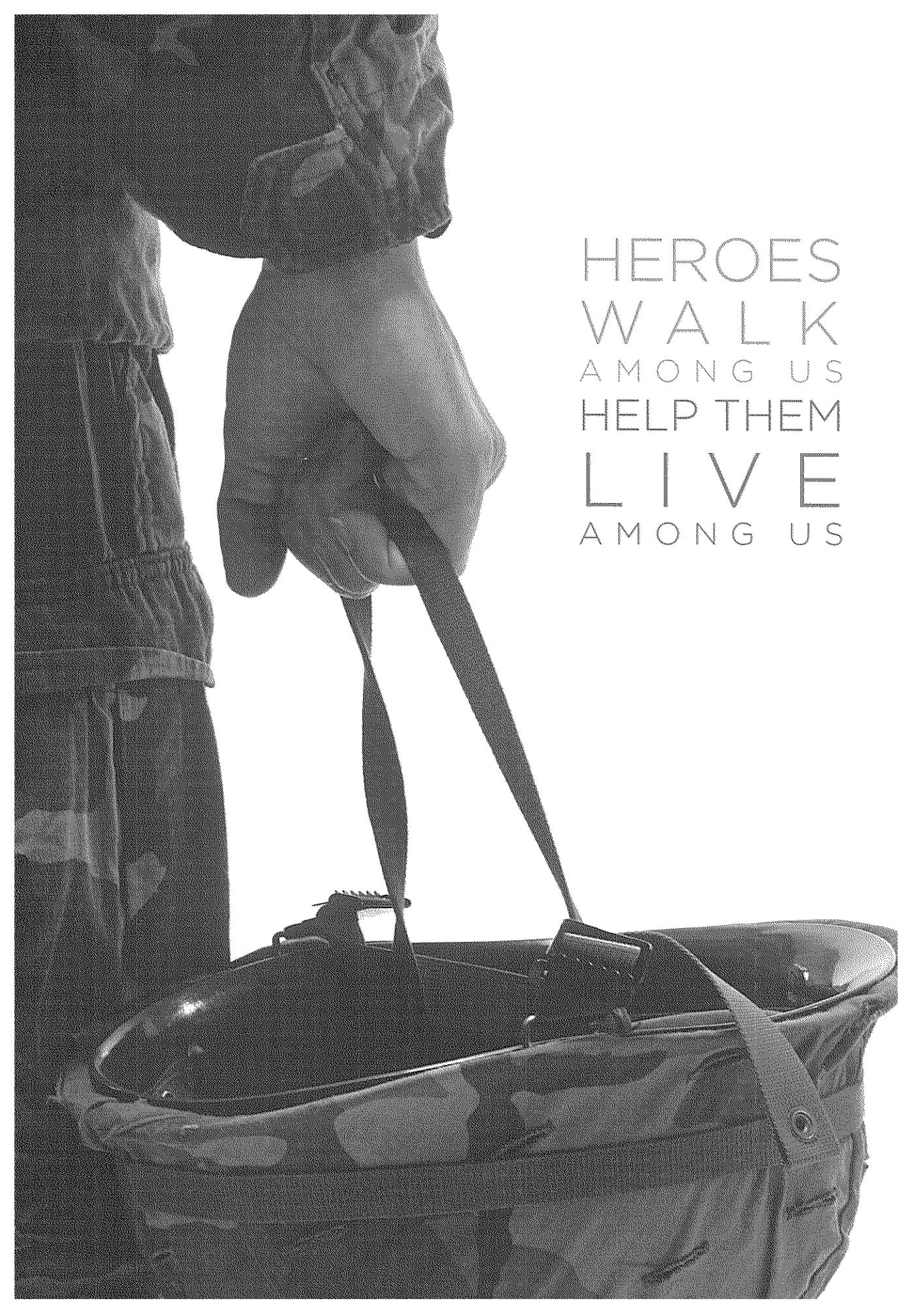
The City Council has questioned the ability of MOVA to handle our veterans' needs due to MOVA's budget... Here is a way to make a positive effort and assist MOVA. Would the City Council support a NYC wide initiative and provide the resources to MOVA to help control an epidemic? Or these resources can be made to the DLF and we can coordinate with MOVA the implementation of a program.

There are 18 steps which epidemic experts use to help prevent the damages of an epidemic. I shall mention a few of them which appear to be logical in my request;

- Encourage behavior change before an epidemic can take hold and cause more damage
- Government departments must co-ordinate to stop the epidemic
- Re-think training for community health workers
- Allocate funding for training on risk management and methods of control
- Connect local initiatives to make communities MORE RESILIENT

## OPEN FOR QUESTIONS

CMSgt (ret) Edward W Schloeman, National Chairman  
Marine Vietnam Veteran 1966



HEROES  
WALK  
AMONG US  
HELP THEM  
LIVE  
AMONG US

# AN EPIDEMIC OF MENTAL INJURY AMONG OUR VETERANS

**22**

VETERANS

**DIE FROM SUICIDE**

EVERY DAY

**1,000**

VETERANS

**ATTEMPT SUICIDE**

EVERY MONTH

**19,000**

FEMALE MILITARY PERSONNEL WERE

**SEXUALLY ASSAULTED**

IN 2010

**400,000**

VETERANS

**EXPERIENCE HOMELESSNESS**

EVERY YEAR

**500,000**

IRAQ AND AFGHANISTAN VETERANS

**SUFFER FROM PTSD OR DEPRESSION**

**ONLY 25%**

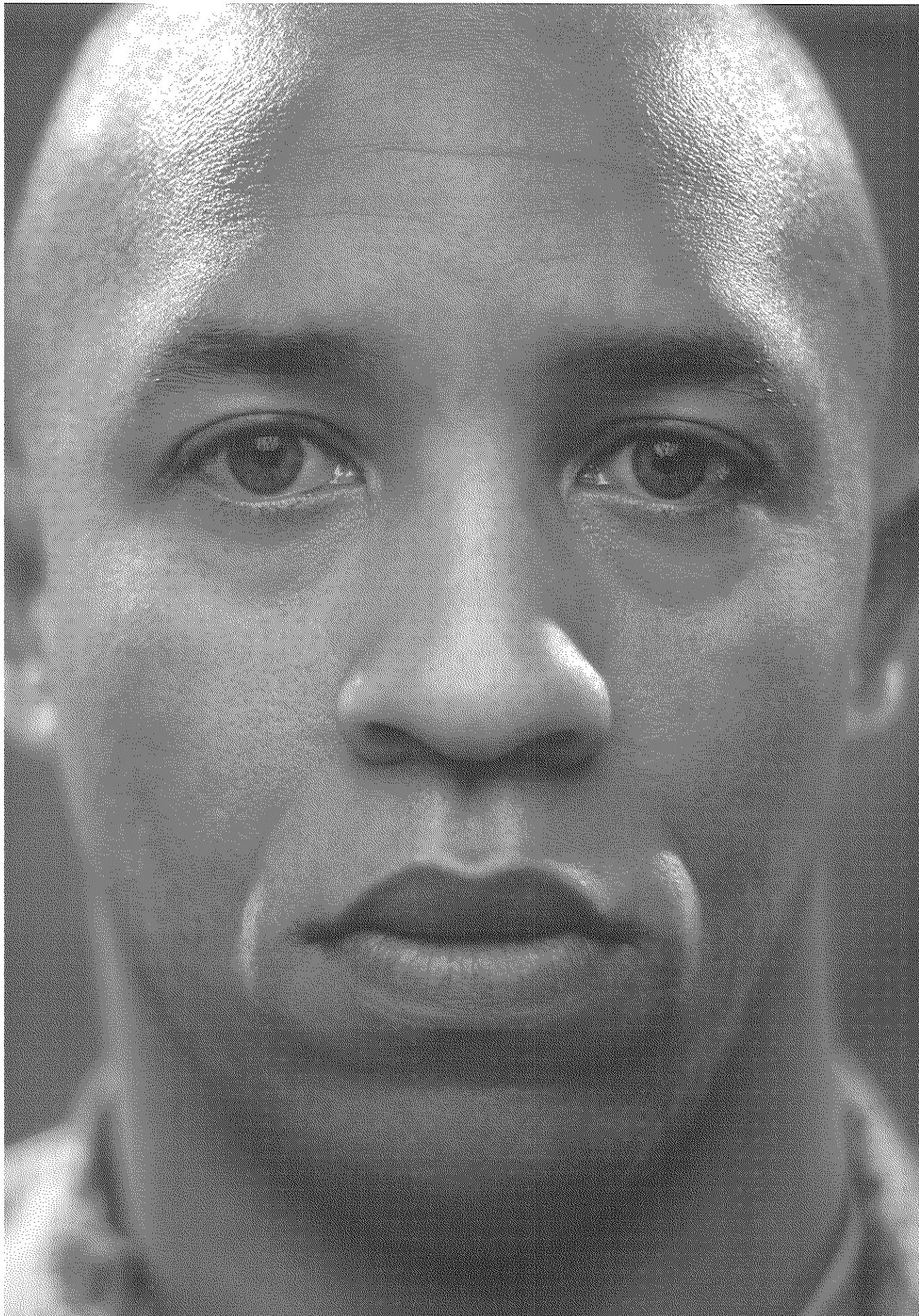
OF VETERANS WITH PTSD

**RECEIVE EVEN THE MINIMUM  
STANDARD OF CARE**

DAVID  
LYNCH  
FOUNDATION

For Consciousness-Based

Education and World Peace





**“TM HELPS YOU DE-STRESS AND RELAX. IT TAKES THE EDGE OFF. I USED TO BE ON 20 PILLS A DAY THAT WERE PRESCRIBED BY MY VA MEDICAL CENTER, MANY OF WHICH WERE NARCOTICS THAT I BECAME ADDICTED TO. NOW I’M NO LONGER ON THEM, AND TM HAS TRANSFORMED MY LIFE INTO SOMETHING SANE AGAIN.”**

Sgt. Lou Tavares, Special Forces, United States Army

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# COMBATting THE EPIDEMIC THROUGH EVIDENCE-BASED TRANSCENDENTAL MEDITATION

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Operation Warrior Wellness (OWW), the armed services and veterans division of the David Lynch Foundation, provides a simple, systematic, and data driven, meditation-based approach that has been shown to rapidly and profoundly reduce symptoms of PTSD and depression. Easy to learn and enjoyable to practice, the Transcendental Meditation (TM) technique has transformed the lives of thousands of veterans, military personnel and first responders across the country.

Over 340 peer-reviewed studies and \$26 million in grants from the National Institutes of Health establish the efficacy of the TM technique. Key findings from studies of TM on veterans suffering from PTSD include:

- 45% decrease in PTSD symptoms
- 50% reduction in symptoms of depression
- 35% decrease in insomnia
- 30% improvement in satisfaction with quality of life
- Dramatic reduction in substance abuse and alcoholism

These positive research findings have motivated both the U.S. Department of Defense (DOD) and U.S. Department of Veterans Affairs (VA) to fund their own large-scale research on the effectiveness of TM for relieving PTSD symptoms. In fact, the DOD recently provided \$2.4 million to conduct a four-year study on TM at the San Diego VA Health Care System.



**“AFTER STARTING TM, MY MIND AND EMOTIONS WERE CALMED. I HAD MY FIRST FULL NIGHT OF SLEEP IN 21 YEARS. I HAVE NEW GOALS IN MY LIFE, AND I HAVEN’T STOPPED SMILING EVER SINCE MY FIRST MEDITATION.”**

Carlos, veteran of Operation Desert Storm and Liberation of Kuwait

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# HELP OUR VETERANS AND THEIR FAMILIES

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One in three service personnel return from war with hidden, crippling wounds. They urgently need our help.

Support from donors helps Operation Warrior Wellness provide the stress-reducing, healing benefits of Transcendental Meditation to veterans, active-duty personnel, cadets and first responders in need.

## COMPARE THE COST

### CONVENTIONAL TREATMENT

**\$20,000**

Four-year treatment cost  
for a veteran with PTSD\*



### HEALING THROUGH TM

**\$1,000**

Lifetime cost to provide  
a veteran with TM



# ABOUT TRANSCENDENTAL MEDITATION

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## WHAT IS THE TRANSCENDENTAL MEDITATION TECHNIQUE?

It is a simple, natural, effortless procedure practiced 20 minutes twice a day while sitting comfortably with the eyes closed. It's not a religion, philosophy or lifestyle.

## WHAT HAPPENS WHEN YOU MEDITATE?

Transcendental Meditation allows the active thinking mind to settle inward to experience a naturally silent, peaceful level of awareness during which the brain functions with significantly greater coherence, and the body enjoys a profoundly rejuvenating rest.

## HOW DOES TM DIFFER FROM OTHER FORMS OF MEDITATION?

Other forms of meditation typically involve either:

- focused attention (concentrating on a thought or object)
- open monitoring (observing breath, thoughts, or the environment)

In comparison, the Transcendental Meditation technique involves neither concentration nor passive observation. It is an effortless procedure that allows the mind to “transcend,” to experience what neuroscientists call a unique state of “restful alertness.”

## HOW DO YOU LEARN THE TECHNIQUE?

TM is taught in a personal course of instruction by a specially-trained, certified teacher. For more information, see [www.TM.org](http://www.TM.org).



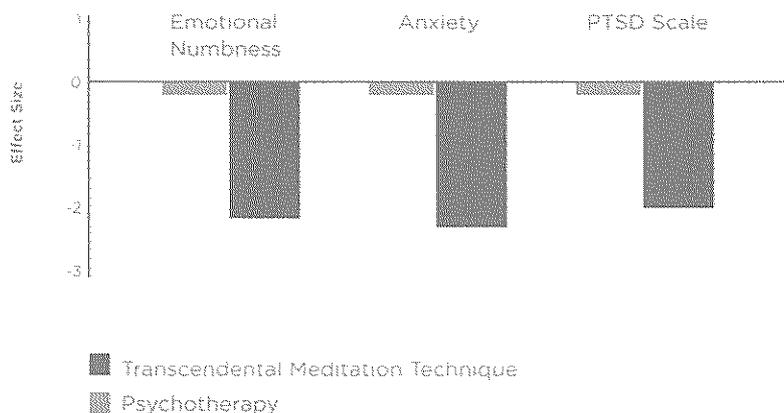
TM CALMED MY MIND, HELPED RESTORE MY NURTURING NATURE,  
AND HELPED ME BECOME A CLEAR THINKER. ONCE I LEARNED TM,  
I REALIZED I DIDN'T HAVE TO DEPEND UPON ANYONE OTHER THAN



## DECREASED SYMPTOMS OF PTSD AMONG VIETNAM VETERANS

In this randomized-controlled trial, meditating participants exhibited significant reductions in symptoms of post-traumatic stress disorder, including anxiety and emotional numbness, as compared to controls who received psychotherapy.

Reference: Journal of Counseling and Development 64: 212-215, 1985

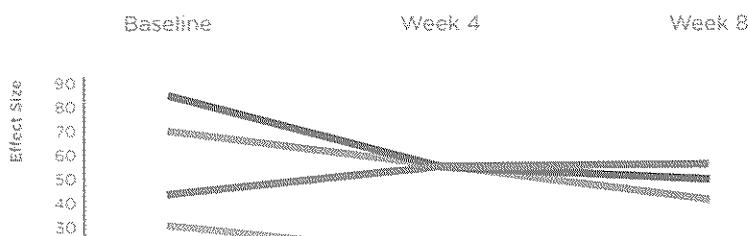




## DECREASED SYMPTOMS OF PTSD AMONG IRAQ AND AFGHANISTAN VETERANS

Over eight weeks, veterans practicing the TM technique exhibited significant reductions in PTSD symptoms according to the Clinician-Administered PTSD Scale (CAPS) and the PTSD Checklist–Military Version (PCL-M). They also exhibited reductions in depression (Beck Depression Inventory) and improvements in overall satisfaction with quality of life (Q-LES-Q).

Reference: *Military Medicine* 176 (6): 626-630, 2011



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## **Testimony by New York Legal Assistance Group (NYLAG)**

### **before New York City Council Committee on Veterans:**

Proposed Res. No. 747-A: Resolution recognizing this and every June as Post-Traumatic Stress Disorder Awareness Month in New York City

**June 16, 2015**

Chair Ulrich, Council Members, and staff, good afternoon and thank you for the opportunity to testify about the Proposed Resolution No. 747-A, recognizing this and every June as Post-Traumatic Stress Disorder (PTSD) Awareness Month in New York City. My name is David Falcon and I am the Staff Attorney for the Veterans Legal Assistance Project at the New York Legal Assistance Group, a nonprofit law office dedicated to providing free legal services in civil law matters to low-income New Yorkers. I am also a Tech Sergeant in the New York Air National Guard at the 109<sup>th</sup>. NYLAG serves immigrants, seniors, the homebound, families facing foreclosure, renters facing eviction, low-income consumers, those in need of government assistance, children in need of special education, domestic violence victims, persons with disabilities, patients with chronic illness or disease, low-wage workers, low-income members of the LGBTQ community, Holocaust survivors, veterans, as well as others in need of free legal services.

According to the United States Department of Veterans Affairs (VA), up to 20% of veterans returning from wars ranging from Vietnam to the conflicts in Iraq and Afghanistan have PTSD from their combat experience. Left untreated, and often undiagnosed, PTSD and its symptoms can have a truly devastating effect on the lives of veterans. Veterans suffering from undiagnosed or untreated PTSD have trouble integrating into civilian society and often succumb to addiction and homelessness. Furthermore, proper screening can lead to diagnosis of other sustained injury or disability. Presently, I am assisting a veteran who received a diagnosis for PTSD, which ultimately led to the discovery of a previously undiagnosed Traumatic Brain Injury. For every veteran that receives proper screening for PTSD, we increase the likelihood of diagnosing other illnesses, thereby improving the veteran's quality of life. Veterans who risked their lives to serve our country deserve better than that and it is critical that returning veterans receive the mental health care they need to ensure that they are able to reintegrate with their communities.

NYLAG is proud to be part of the City Council's Veterans Legal Services Initiative, which is aimed at providing comprehensive services to veterans, including mental health, job training, and legal services. Without mental health services, many veterans would be unable to access and leverage the other services provided by City agencies and nonprofit organizations. Veterans whose PTSD has been properly treated are able to maintain jobs, contribute to their communities, and live normal lives. It is important to recognize the necessity of services for PTSD victims and NYLAG strongly encourages the Council to vote to recognize this and every June as Post-Traumatic Stress Disorder Awareness Month in New York City.

Respectfully submitted,

David Falcon

Staff Attorney, Veterans Legal Assistance Project

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Appearance Card

I intend to appear and speak on Int. No. 747 A Res. No. \_\_\_\_\_  
 in favor  in opposition

Date: 6/16/2015

(PLEASE PRINT)

Name: Maria Steenkamp

Address: 1 Park Avenue, New York, NY

I represent: MV Langone Medical Center

Address: 1 Park Avenue, New York, NY.

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Name: Anthony Pike

Address: 292 Madison Ave, 10th Fl. New York 10017

I represent: IAVA

Address: 292 Madison Ave 10th Fl. New York 10017

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Name: Jason Hansen

Address: \_\_\_\_\_

I represent: Veteran Mental Health Coalition

Address: 50 Broadway 14th Fl

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Name: Kristen L. Rouse

Address: 182 Franklin St, Apt 2E Brooklyn NY

I represent: NYC Veterans Alliance

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Name: Lionelle Hamanaka

Address: 66 W 95th

I represent: Military Families Speak Out

Address: \_\_\_\_\_

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(PLEASE PRINT)  
Name: LOREE SUTTON

Address: 346 BROADWAY NY, NY

I represent: MOVA

Address: PER ABOVE

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in favor  in opposition

Date: June 16, 2015

(PLEASE PRINT)  
Name: EMSGT (Ret) EDWARD SCHLOEMAN

Address: 59 EAST 2 ST BROOKLYN NY 11218

I represent: DAVID LYNCH FOUNDATION, OPERATION WARRIOR WELLNESS

Address: same

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