

Committee on Veterans
Hon. Robert Holden, Chair

Committee on Mental Health, Disabilities, and Addiction
Hon. Linda Lee, Chair

Hearing—Oversight: Supporting the Families of Veterans with PTSD
Tuesday, October 29, 2024
1:00 p.m.—Committee Room at City Hall

Testimony by James Hendon, Commissioner of NYC Department of Veterans' Services

Introduction

Good afternoon, Chair Holden and Chair Lee, committee members, and esteemed stakeholders. My name is James Hendon. I am honored to serve as the Commissioner of the New York City Department of Veterans' Services (DVS). I am accompanied today by Dr. Lauren D'Mello, our Executive Director of Mental Health, and Jason Loughran, Senior Advisor for Intergovernmental Affairs. Together, we are here to address the challenges families face when supporting Veterans with Post Traumatic Stress Disorder (PTSD) and to discuss the strategies and resources DVS has developed to assist these families, as well as additional resources required to better serve them.

Part 1: Understanding Mental Health Challenges in Veterans

We deeply appreciate the Council's attention to the needs of families affected by the mental health challenges faced by Veterans, including PTSD. Living with or caring for a Veteran who has PTSD can have significant emotional, psychological, and even physical impacts on family members. A recent RAND study, commissioned by the New York Health Foundation, provides important insights: more than 60% of New York State Veterans has a disability, and roughly 1 out of 4 surveyed have probable depression or PTSD. Nearly 1 in 5 (17%) have both. This study, based on responses from 1,225 New York State Veterans discharged from military service

between January 2018 and January 2023, also revealed that almost 60% of these Veterans are married or partnered, underscoring the extensive reach of PTSD's effects on loved ones.

On a national level, according to the National Center for PTSD, approximately 6% of Americans are expected to experience PTSD at some point in their lives. Comparatively, roughly 7% of US Military Veterans will experience PTSD at some point in their lives. However, this rate – the proportion that will experience PTSD at some point in their lives – can be significantly higher among Veterans with direct combat exposure, such as those who served in Vietnam (10%), Desert Storm (21%), and Operations Iraqi Freedom and Enduring Freedom (29%). The National Center for PTSD highlights how PTSD can manifest in ways that challenge even the most resilient families. Veterans may be easily startled, have disturbing nightmares, or avoid social situations—behaviors that can strain family relationships and lead to feelings of isolation.

Children of Veterans with PTSD are also at risk of being indirectly impacted. Studies suggest that these children may be more prone to behavioral issues, challenges in school, and difficulties forming relationships with peers. Parents report seeing their children as more anxious, aggressive, and prone to sadness or hyperactivity than those whose Veteran parents do not have PTSD. Some research also indicates a correlation between PTSD in a parent and an increased risk of domestic violence, though it is essential to note that most Veteran households do not experience domestic violence.

It is crucial for family members to be able to recognize PTSD symptoms and encourage their loved ones to seek help through the VA or a mental health provider knowledgeable about military culture. Family members and children themselves can benefit from therapy sessions

with culturally competent providers to help manage the stress and emotional toll that PTSD may create within a family.

A key takeaway: these issues are important to our community, but we must avoid a victim-hero narrative. Do not infantilize us or assume as soon as you see a US Military Service Member – past or present – or a member of their family that they are broken. The PTSD rate in the Veteran community as a whole (remember, 7% have experienced PTSD at some point in their lives) is similar to the PTSD rate in the entire country (the same metric for America is 6%). Likewise, the levels of depression in the Veteran community as a whole (as mentioned, 25% of Veterans in New York State have experienced PTSD or depression) is similar to the levels of the depression in the nation (according to a 2023 Gallup study, 29% of Americans have experienced depression at some point in their lives).

The Need for Blast Exposure Research

I would also like to bring attention to a related concern that holds a strong correlation with PTSD in Veterans: the impact of blast exposure. Panning back: military personnel, construction workers, police, firefighters, commercial fishermen, industrial farmers, miners, auto mechanics, prisoners, domestic violence victims, and contact sports athletes are often exposed to blasts. Examples of blasts are: the firing of weapons, operation of heavy machinery, proximity to demolitions, explosions or crashes, and violent physical contact. All of these blasts release various forms of energy. Examples include, but are not limited to: overpressure, radio frequency, infrasound, and piezoelectricity. One or more blast energies is suspected to impact the brain. While research has shown that there is a correlation between these blasts and negative brain-related behaviors (for example, increased incidents of suicide), little is known about

causation. Scientists have yet to pinpoint which energies of those released are doing the damage and the exact ways in which these energies affect the brain.

The mechanisms through which blast energies cause brain damage are poorly understood. This hinders our ability to prevent, measure, or treat said injuries effectively. Research into identifying the types of energy involved, their specific impacts on brain function, and reliable biomarkers for brain health is urgently needed. Such research would improve our ability to assess injuries and ultimately develop protective measures that can mitigate the effects of these exposures. This will potentially benefit millions of individuals in at-risk populations. If we can solve what leads to many mental and behavioral health issues upstream, then we reduce the number of our brothers and sisters – and their families – whom we will need to assist downstream. As a society, we largely focus on the symptoms of blast exposure – and treating those symptoms from a mental health standpoint. From an engineering standpoint, we need to study and mitigate the cause.

Part 2: Mental Health Support for Veterans' Families

To better address PTSD and the complex, interconnected mental health needs of our Veterans and their loved ones—including spouses, children, caregivers, and survivors—DVS has prioritized military family outreach and support. We have collaborated with our City partners and utilized New York City's rich network of community mental health and social service providers to create a robust support system for military families.

Military Family Advocate (MFA) Program

To expand our outreach and engagement to military families, DVS partnered with NYC Public Schools to create the Military Family Advocate Program. This effort aims to have one military family liaison in every public school, giving principals the option to designate a staff or faculty member for this role. The Military Family Advocates receive training on military culture, how to identify military families, how to engage with them to understand their needs, connect them to DVS care coordination, and work within their school community to reduce the stigma around military Service Members. The pilot program in Staten Island saw 55 public schools opt-in, identifying 242 military families. Building on this success, we are now expanding city-wide, onboarding schools from more boroughs and reaching Military and Veteran families in the largest public school system in the nation. Details can be found at nyc.gov/vetmfa.

Expanding Family Resources

DVS has diligently worked to expand our resources to consider all aspects of military family life and the challenges that may arise throughout. In lieu of a universal approach, we have diversified our offerings to encompass various mental health care modalities. In addition to traditional talk therapy, we offer Support Groups, the Reconsolidation of Traumatic Memories (RTM) Protocol, Yoga and Holistic Care, Peer-to-Peer support, Animal and Wilderness Therapy, and various specialized care. We have also expanded family resources to include programs that support children's mental health and developmental needs, such as connecting families to after-school programs and community resources such as the Girls Scouts of America and Boys Scouts of America, and the NYC Department of Youth and Community Development. We have also partnered with NYC Public Schools' Special Education Service to ensure a continuum of care for military families that are either in-bound to or have recently arrived in New York City.

DVS also promotes resources for comprehensive women's care. In addition to resources for mental and primary health care needs, we promote cancer screenings and breast imaging, fertility and reproductive care, and maternity supports. We utilize the array of program and services to support victims of intimate partner violence, and substance use disorders and other addictions. We recommend numerous socialization, fitness, food, and mental health programs to our elderly Veterans through the NYC Department for the Aging. We work closely with community partners such as New York Presbyterian's Military Family Wellness Center, the NYU Langone Military Family Center, Blue Star Families, and Goldstar Wives.

Details can be found at nyc.gov/vetparents, nyc.gov/vethealth, and nyc.gov/vetmentalhealth.

The National Center for PTSD offers a wealth of resources to help families better understand Post Traumatic Stress Disorder, including an informative guide that is available at ptsd.va.gov. They have also created the PTSD Family Coach app, which offers valuable insights on supporting a loved one with PTSD and tips for self-care. This app is accessible on both Apple and Android devices and serves as a valuable tool for family members to better understand PTSD and locate supportive resources.

To make these mental health resources easily accessible, we have created several one-page documents featuring QR codes that link to VA Mental Health Resources, Peer Support Resources, and Counseling Services. These resources are available for download on our website at nyc.gov/vetwellness.

Peer Support and Community-Based Programs

DVS has issued a Request for Proposals for the **PFC Joseph P. Dwyer Peer Program**, designed to promote socialization and connectivity among Veterans and their families through arts, culture, health, and outdoor activities. This program is rooted in the belief that peer-to-peer support can be a first step for many Veterans to engage with the community, fostering a sense of belonging and well-being. We have encouraged elected officials to promote this funding opportunity within their districts to broaden program outreach. The deadline to apply for the Dwyer Program has been extended to Monday, November 25th at 2 pm. Details can be found at nyc.gov/vetdwyer.

In partnership with Operation Warrior Shield, DVS is also helping to recruit Veterans for a promising therapy known as **Reconsolidation of Traumatic Memories Therapy** (or RTM Therapy). RTM Therapy was developed by Dr. Frank Bourke. This innovative treatment has shown effectiveness in reducing PTSD symptoms within just four sessions, conducted virtually or in person.

Local Laws, Mental Health Programs, and Military Cultural Competency

Following the enactment of Local Law 39, which requires DVS to submit an annual report on the mental health services provided to Veterans by city agencies, DVS has begun collecting critical data across New York City government relevant to programs and services our Veterans' and their families are utilizing. Local Law 39 provides DVS a level of collaboration and awareness relevant to the unique needs of Veterans and their families, like never before.

Additional DVS Programs

1. **Veterans Mental Health Coalition:** This coalition brings together researchers, advocates, clinicians, and organizations monthly to discuss mental health issues affecting Veterans. These meetings foster collaboration and allow DVS to stay informed of developments and potential partnerships that could benefit the Veteran community.
2. **Mission: VetCheck:** Launched in 2020, this buddy check wellness calling program helps Veterans with issues such as food insecurity, housing, and mental health. In the lifespan of Mission: VetCheck, DVS has collaborated with volunteers to conduct more than 40,000 calls (16,000 of which occurred during the last fiscal year). The program has connected Veterans to necessary services and served as a critical support link in times of need. More details can be found at nyc.gov/vetcheck.
3. **GetCovered NYC Vet:** In partnership with the Mayor's Public Engagement Unit, this program assists Veterans in navigating health coverage options, including the New York State of Health, VA, and Tricare systems. Healthcare enrollment can be a complex process, and this initiative connects Veterans with specialists who can help them select the best coverage options, factoring in both civilian and military healthcare eligibility. To learn more, please visit nyc.gov/coverednycvet.

Part 3: Recommendations for New York City Council Support

We are grateful to the Council for enacting legislation that connects Veterans, caregivers, families, and survivors with mental health resources. The Mental Health Roadmap Legislation, which outlines evidence-based solutions to improve mental health outcomes, enables DVS to strengthen community-level prevention services and raise public awareness about the mental health programs available.

Recently enacted legislation includes:

- **Local Law 37 of 2024:** This local law enhanced and expanded the collection of demographic data about Veterans.
- **Local Law 38 of 2024:** This local law optimized community outreach and engagement on mental health resources for Veterans.
- **Local Law 39 of 2024:** Establishes an annual report on the provision of mental health services by city agencies to Veterans.
- **Local Law 40 of 2024:** Facilitates an online resource tool and pamphlet for Veterans.

To complement the great work done historically, when it comes to new initiatives, we encourage the Council to consider the following:

- **Dwyer Program Amplification:** Council members can help broaden the reach of the Dwyer Program by promoting its application deadline, now extended to November 25th, within their districts. Once again, details can be found at nyc.gov/vetdwyer.
- **Coordination with Council-funded Veterans Efforts:** We recommend the Council require all entities that receive Schedule C funding for Veterans events or services provide details about said activities with DVS so that we may amplify their work. This will enhance coordination, expand outreach, and maximize the impact of every Veteran-focused dollar the Council spends.
- **Veteran Indicator Question in Constituent Forms:** Adding a Veteran Indicator question to all Council constituent intake forms – that is, the forms that you use when meeting constituents you serve in your office – would support data sharing, help connect

more Veteran and military families to resources, and bring more of our brothers and sisters (and their loved ones) out of the shadows.

Conclusion

Thank you for this opportunity to discuss the mental health challenges faced by Veterans and their families. DVS is committed to providing supportive services that empower Veterans and their loved ones to thrive, and we appreciate the City Council's ongoing partnership in achieving this goal. We are here to answer any questions you may have.

For more information on DVS's mental health resources, please visit nyc.gov/vetmentalhealth or engage VetConnect NYC at nyc.gov/vetconnect. You can call DVS at 212-416-5250, email us at connect@veterans.nyc.gov, visit our website (nyc.gov/vets) and follow us on social media using the hashtag [@nycveterans](https://twitter.com/nycveterans).

Lastly, if you or someone you know is experiencing a mental health crisis, then please contact the Suicide and Crisis Lifeline at **988**. Members of the Military and Veteran community can reach the Veterans Crisis Line by dialing **988** and pressing 1.

Thank you.



Department of Veterans' Services

Follow Us on Social Media @nycveterans



For Questions, Comments, and Concerns Please CALL or EMAIL:

212-416-5250

connect@veterans.nyc.gov

VA Mental Health Resources

www.nyc.gov/vetwellness

Sometimes life is tough. The Veterans Crisis Line can help.



Visit our wellness webpage

VetConnectNYC

NYC Veterans are able to connect to services from our partner organizations through the VetConnectNYC platform. Our Care Coordinators receive all requests made through VetConnectNYC and process them within 3-5 business days. Visit nyc.gov/VetConnectNYC to learn more.

VA Vet Centers

VA Vet Centers provide a range of social and psychological services, including readjustment counseling to eligible Veterans and active duty servicemembers. Vet Center services are also provided to family members of Veterans and servicemembers for military-related issues when they aid in the readjustment of those who have served. VA Vet Center services are provided at no cost and do not require someone to be enrolled in VA health care or have received care for conditions caused by military service. Services are also provided regardless of the nature of the Veteran's discharge status.

Find a VA Vet Center



VA's Mental Health Website



The VA App Store



VA Women Veterans Call Center

This support line helps Women Veterans navigate the VA and connects them with the Women Veterans Program Manager at their local VA medical center. The service is free and confidential.



VA Caregiver Support Line

This support line is a toll-free number that provides information on services available to those caring for Veterans. Caregivers are also connected to a Caregiver Support Team at their local VA center.



Make The Connection.net



MakeTheConnection.net provides information, resources, and videos for challenging life events and experiences with mental health issues. Developed and operated by the VA, Make the Connection aims to reduce barriers and stigma associated with mental health challenges that may prevent Veterans from seeking mental health care.



Department of Veterans' Services

Follow Us on Social Media

@nycveterans



For Questions, Comments, and Concerns Please CALL or EMAIL:

212-416-5250

connect@veterans.nyc.gov

Counseling Services

www.nyc.gov/vetwellness

Sometimes life is tough.
The Veterans Crisis Line can help.



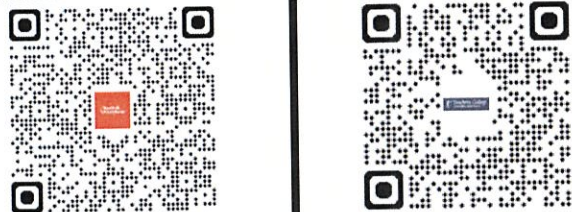
Visit our wellness webpage

VetConnectNYC

NYC Veterans are able to connect to services from our partner organizations through the VetConnectNYC platform. Our Care Coordinators receive all requests made through VetConnectNYC and process them within 3-5 business days. Visit nyc.gov/VetConnectNYC to learn more.

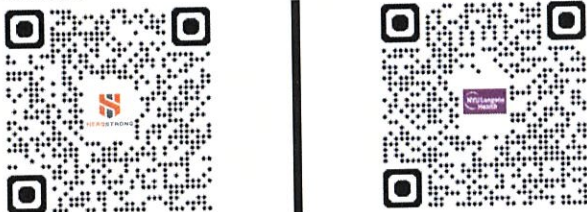
New York-Presbyterian Military Family Wellness Center

Helps address the unique health challenges of servicemembers and their loved ones in a confidential and secure environment.



Headstrong

Veteran-founded in 2012, The Headstrong Project is a non-profit mental health org. providing confidential, barrier-free, and stigma-free PTSD treatment to Veterans, servicemembers, and families.



NYU Steven Cohen Family Center

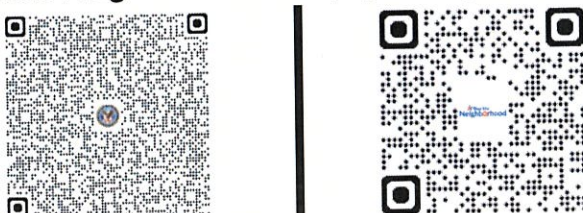
Provides free, compassionate, high-quality, accessible mental healthcare for Veterans and military families. Also virtual through their NYU Langone Health App.

Resilience Center for Veterans & Families

From Columbia University's Teachers College, this program pairs groundbreaking research on human emotional resilience with clinical training of therapists to assist Veterans and their families.

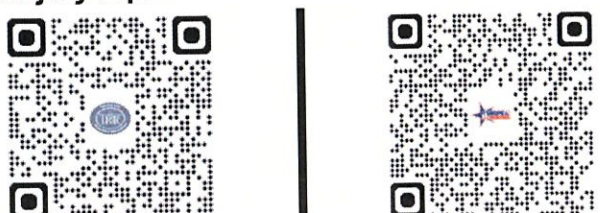
VA Vet Centers

Community-based counseling centers which provide a wide range of social and psychological services.



Trauma and Resiliency Resources

TRR provides free behavior health services for combat Veterans of all eras, as well as training for professionals. "Warrior Camp," is a weeklong, intensive, residential suicide prevention and trauma resolution program with an emphasis on Military Moral Injury repair.



Operation Family Resiliency

Operated by Blue Star Families Neighborhood program, OFR offers free subscriptions to the following meditation and wellness resources: Headspace, SPIRITUNE and Thrive Market.

Hope For The Warriors

HFTH's Clinical Support Service identifies and fills gaps in mental health care for post-9/11 combat injured servicemembers, Veterans, and caregivers.



Department of Veterans' Services

Follow Us on Social Media @nycveterans



For Questions, Comments, and Concerns Please CALL or EMAIL:

212-416-5250

connect@veterans.nyc.gov

Peer Support Resources

www.nyc.gov/vetwellness

Sometimes life is tough. The Veterans Crisis Line can help.



Visit our wellness webpage

VetConnectNYC

NYC Veterans are able to connect to services from our partner organizations through the VetConnectNYC platform. Our Care Coordinators receive all requests made through VetConnectNYC and process them within 3-5 business days. Visit nyc.gov/VetConnectNYC to learn more.

Vets4Warriors

Vets4Warriors provides Veterans, family members, and caregivers with 24/7 help from a confidential peer support network. Receive immediate, free, and long-term peer support through private chats, emails, phone, and text conversations.



Objective Zero

Objective Zero offers an app which provides Veterans with access to mental health resources and a peer support network.



Hope For The Warriors

Hope For The Warrior's Military Veteran Peer Support (MVPS) program mentors Veterans throughout their post-military journey and connects Veterans with new opportunities through HOPE's programs and HOPE's strategic partners.



Guardian Revival

Guardian Revival is a 501(c)(3) not-for-profit organization that improves the mental health & well-being of military and first-responders - guardians - and their families, at no cost to them. They provide gatherings, direct peer support, and a 24/7 talk line to provide peer-to-peer connection and support.



Wounded Warrior Project

WWP's small, warrior-led support groups connect Veterans with each other in their communities. Through shared experiences, discussing personal challenges, and supporting one another, these Veteran support groups can provide connection, camaraderie, and new solutions to challenges.



PROVE

Project for Return and Opportunity in Veterans Education (PROVE) enables student Veterans to more easily access resources to successfully transition from military to student life.





MILITARY FAMILY ADVOCATE PROGRAM



Use the QR code to register

WHAT IS THE MILITARY FAMILY ADVOCATE PROGRAM?

Military families face very unique challenges and may require specialized resources and support. The MFA program identifies one staff member within a school as the school's Military Family Advocate to support military families. The program will help the Military Family Advocate identify military families and provide them with dozens of comprehensive military-specific resources to meet their needs.



Why is a Military Family Advocate beneficial for my school?

 You're actively supporting our military community

 You understand unique challenges military families face

 You can provide dozens of free specialized resources

 You're reducing stigma and building a more empathetic environment

For more information please contact:

Dr. Lauren D'Mello Phone **646-901-4948** E-mail **ldmello@veterans.nyc.gov**





JUMAANE D. WILLIAMS

**TESTIMONY OF PUBLIC ADVOCATE JUMAANE D. WILLIAMS
TO THE NEW YORK CITY COUNCIL COMMITTEE ON VETERANS
OCTOBER 21, 2024**

Good morning,

My name is Jumaane D. Williams, and I am the Public Advocate for the City of New York. I thank Chair Holden and the members of the Committee on Veterans for holding this important hearing today.

Post traumatic stress disorder (PTSD) affects millions of Americans every year; it affects 3% of adults in the United States and approximately 8% of adolescents aged 13 - 18.¹ But rates of PTSD are even higher amongst veterans, stemming from traumatic events experienced while in the military, including violent combat and sexual assault. The U.S. Department of Veterans Affairs cites that 7 out of every 100 veterans (or 7%) will have PTSD whereas 6 out of every 100 civilians (or 6%) will have PTSD in their lifetime.² Despite this prevalence, many veterans go untreated for PTSD as well as numerous other mental health issues. In 2022, more than half of veterans experiencing mental illness did not receive treatment in the previous year, and more than 90% of those with substance use disorder did not receive treatment.³ This is unacceptable.

VA hospitals are a vital resource for veterans living with PTSD, but planned closures of VA hospitals, two of which are here in New York City, threatens to derail access to this vital care. Amongst veterans who rely on VA care, 23 out of every 100 (or 23%) had PTSD at some point in their lives, compared to 7 out of every 100 (or 7%) of Veterans who do not use VA for health care.⁴ This discrepancy in diagnosis is a result of the mandatory screenings VA hospitals do and further indicative of the number of veterans who go without diagnosis.

Outside of the VA hospitals, there are a number of programs and resources that we should be doing more to uplift like the VA crisis hotline and the PTSD Coach app. The VA crisis hotline, open 24/7 365 days a year, is connected to the federally mandated 988 Suicide and Crisis line. Launched in 2022, the hotline connects users—via phone, text, or chat—to a network of over 200 local and state-funded crisis call centers for crisis counseling, resources, and referrals.⁵ Since its

¹ <https://www.psychiatry.org/patients-families/ptsd/what-is-ptsd>

² https://www.ptsd.va.gov/understand/common/common_veterans.asp

³ <https://www.samhsa.gov/blog/supporting-behavioral-health-needs-our-nations-veterans>

⁴ https://www.ptsd.va.gov/understand/common/common_veterans.asp

⁵ <https://www.kff.org/mental-health/issue-brief/988-suicide-crisis-lifeline-two-years-after-launch/>



JUMAANE D. WILLIAMS

launch, “988 has received 10.8 million calls, texts, and chats” including 1.4 million to the veteran crisis extension.⁶ But polling shows that public awareness of 988 remains low with 18% of adults reporting they’ve heard about it.⁷ Similarly, the PTSD Coach app developed by the Departments of Veteran Affairs and Defense, a self-management platform to learn about PTSD and how to cope with it, is not very well-known despite promising results thus far. An investigation by the National Institute of Health found that the “initial release of PTSD Coach was found to have a positive public health impact”.⁸ The app is commonly used to augment clinical care.

In order to further support veterans and their families, we must not only increase outreach and public education on available resources but furthermore, we must invest and expand the current infrastructure to better assist those impacted by PTSD. Thank you.

⁶ Ibid.

⁷ Ibid.

⁸ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9006138/>



BRONX BOROUGH PRESIDENT VANESSA L. GIBSON

Submitted Testimony of Bronx Borough President Vanessa L. Gibson

Committee on Veterans & Committee on Mental Health, Disabilities, and Addiction

Joint Hearing on Supporting the Families of Veterans with PTSD

October 29, 2024

Thank you to Chair Holden, Chair Lee, and the members of the Committee on Veterans and the Committee on Mental Health, Disabilities, and Addiction for convening this important hearing. The beginning of November, which is Veterans Appreciation Month in our city, gives us the opportunity to highlight not only the sacrifice that veterans have made in the service of our country, but also the sacrifice that their families have made as well.

Too many of our veterans, particularly combat veterans, struggle with mental health issues, including post-traumatic stress disorder (PTSD). One estimate says that 30% of post-9/11 veterans nationwide have been diagnosed with PTSD. While our city, state, and federal governments have made significant investments in the treatment of veterans' mental health, we can and must do more. There remain many veterans who are eligible for mental health services but who are not currently enrolled in them or seeking treatment. This has resulted in too many of our veterans being at risk of serious complications from their mental health struggles, including an elevated risk of suicide and addiction, as well as the co-morbidities that arise out of these conditions. Our city must increase its efforts to ensure that all veterans get the healthcare that they deserve.

However, we must also remember that families of individuals with serious mental health struggles often face their own challenges coping with their caregiving and other responsibilities. This includes spouses, children, and parents, among others. Many family members, particularly the 2.3 million children nationwide living with a disabled veteran, have become "hidden helpers" and have experienced issues such as isolation, problems at school, and health challenges, including mental health struggles such as anxiety and depression. We cannot forget these knock-on effects, and our city must be cognizant of these problems as well and work to close the gaps in care for families.

While we are incredibly grateful for the services provided at the James J. Peters Department of Veterans Affairs Medical Center here in The Bronx, we also must bring more healthcare into the communities where our veteran families live and work. Supporting our veterans and their families starts by making sure that everyone is safe in their home and in their neighborhoods. Bringing more services geared towards veterans and their families into community health centers, mobile units, and home visits will enable a more robust response to mental health challenges. Additionally, we need more programs geared specifically toward family members of veterans with PTSD. There are some programs that are designed for family members of people with PTSD but often these programs are not specifically designed for family members of *veterans*. There must be more options for these families, with emphasis on the particular circumstances surrounding the veterans' experiences and how the family members relate to them.

I have been proud to support initiatives to expand mental health first responders in emergencies relating to mental health crises. We must train these responders to be particularly sensitive to the specific needs of and challenges faced by veterans and their families. Helping our veterans in crisis must be a priority to both care for the veterans themselves and to relieve the burdens on families in an emergency situation.

Further, the continued successful implementation of Veterans Treatment Courts provides a lifeline to veterans whose mental health struggles have resulted in legal issues. By focusing on treatment instead of punitive action, we can ensure that our veterans have the best chance to get on the right track and remain in their communities with their families where they can get help in a supportive environment. The Veterans Treatment Court in The Bronx was established in 2013 and was specifically geared towards veterans who are experiencing PTSD, traumatic brain injury (TBI), and addiction. This has been a successful program that must continue to be expanded.

I fully support the Department of Veteran Services' outreach efforts through our public school system to identify children from veteran families and working to connect their families with the resources that they need.

The city must continue to promote the 988 suicide prevention hotline that has been operating nationwide since July 16, 2022. The 988 system has a dedicated Veterans Crisis Line to help connect veterans to immediate care as well as ongoing counseling and other services.

Our veterans and their families are resilient. I will continue to stand with and support our veterans, ensuring that they get all of the services that they need to thrive as they return to civilian life here in The Bronx and across our city. Our city owes a debt of gratitude to them and to their families, and we will not rest until every veteran and their family members receive the care that they deserve.



Advocacy &
Services for
LGBT Elders

We refuse to be invisible®

National Headquarters
305 Seventh Avenue, 15th Floor
New York, NY 10001
T: 212-741-2247
sageusa.org
lgbtagingcenter.org

TESTIMONY

New York City Council – Committee on Mental Health, Disabilities,
& Addiction & Committee of Veterans

Oversight - Supporting the Families of Veterans with PTSD

Tuesday, October 29th 2024

Good afternoon, Chair Lee, Chair Holden, and esteemed members of the Committees. My name is Bryan Ellicott-Cook, and I serve as the Director of Government Relations at SAGEServes, part of SAGE—the nation's oldest and largest organization dedicated to advocating for LGBTQ+ older adults. I am also honored to work closely with **SAGEVets**, our program that specifically supports LGBTQ+ veterans aged 50 and older. Today, I stand before you to highlight the critical need for more funding and investment in programs like SAGEVets that serve LGBTQ+ veterans and their families—whether blood or chosen.

LGBTQ+ veterans, who have served this country with distinction, face a unique and complex set of challenges upon returning to civilian life. These veterans often experience heightened levels of stigmatization, discrimination, and cultural insensitivity, which compound the trauma many endured during military service. The result is a higher prevalence of mental health challenges such as PTSD, anxiety, and depression, particularly among older LGBTQ+ veterans. Unfortunately, their chosen families, who often provide the only source of support, are frequently excluded from resources and services that prioritize blood relatives.

At **SAGEVets**, we work tirelessly to address these disparities, offering critical services such as mental health support, assistance with VA benefits, and housing resources for older LGBTQ+ veterans. However, the demand for these services far exceeds our current capacity. Our LGBTQ+ veterans deserve more—more support, more recognition, and more investment in programs that directly address their specific needs.

Research has shown that LGBTQ+ veterans face disproportionate rates of homelessness, social isolation, and mental health struggles compared to their non-LGBTQ+ peers. For those without the support of traditional blood families, chosen families are often the primary caregivers and emotional anchors. Yet, many of our current policies fail to recognize the validity and importance of these chosen families. We must address this gap if we are to provide the comprehensive support that LGBTQ+ veterans deserve.

Today, I urge the Committee to prioritize funding for programs like **SAGEVets** and to champion legislation that expands support for LGBTQ+ veterans and their families—both blood and chosen. Specifically, I am asking for increased investment in:

1. **Culturally competent mental health services:** LGBTQ+ veterans face unique mental health challenges that require specialized, culturally competent care. **SAGEVets** connects veterans to mental health providers who understand their experiences, but we need additional funding to expand this network and serve more veterans.
2. **Housing assistance for LGBTQ+ veterans:** Many LGBTQ+ veterans experience homelessness or housing insecurity, often due to estrangement from their biological families. Programs like **SAGEVets** work to secure housing for these veterans, but we need more resources to ensure that all veterans can find safe, affordable housing, including options that recognize chosen family structures.
3. **Support for chosen families and caregivers:** For LGBTQ+ veterans, chosen families play a vital role in caregiving, yet they often lack the resources and recognition given to traditional family members. We ask for investment in programs that provide financial, emotional, and respite support for the chosen families who care for our veterans.
4. **Inclusive healthcare services:** LGBTQ+ veterans often avoid seeking care due to fear of discrimination. We need funding to support **SAGEVets** in ensuring that healthcare providers are trained in LGBTQ+ cultural competency and that veterans receive the inclusive care they deserve.

SAGE and **SAGEVets** are committed to addressing the challenges faced by LGBTQ+ veterans, but our efforts can only go so far without the necessary resources. With increased funding and targeted policies, we can expand our reach and ensure that no LGBTQ+ veteran is left behind.

In closing, I urge the Committee to invest in the future of LGBTQ+ veterans and their families by providing additional funding to programs like **SAGEVets**. These veterans have given so much to our country; now it's our turn to ensure they receive the support and respect they deserve. Thank you for the opportunity to speak today, and I look forward to working together to uplift and protect our LGBTQ+ veterans.

TESTIMONY

New York City Council – Committee on Mental Health, Disabilities,
& Addiction & Committee of Veterans

Oversight - Supporting the Families of Veterans with PTSD

Tuesday, October 29th 2024

Good afternoon, Chair Lee & Chair Holden, and members of the Committees. My name is Ron Reid, and I am the SAGEVets Program Manager at SAGE, the nation's largest and oldest organization dedicated to advocating for LGBTQ+ older adults. As an Army veteran, I stand here today to emphasize the urgent need for support for families of veterans living with PTSD. Thank you for the opportunity to testify on this vital issue.

I am here today as a staff member who leads the SAGEVets program, which provides critical support for LGBTQ+ veterans aged 50 and older. Mental health is a significant concern for this population, particularly for those who have served in the military and may be grappling with PTSD. The unique challenges faced by LGBTQ+ veterans often go unrecognized, leading to a heightened risk of mental health issues, including depression, anxiety, and suicidal thoughts.

Research from the Journal of Traumatic Stress indicates that LGBTQ+ veterans are more likely to experience PTSD than their heterosexual counterparts, often stemming from both combat-related experiences and the stigma they face due to their sexual orientation. This dual burden can lead to feelings of isolation and despair, making it even more crucial to provide tailored mental health resources.

The issue before us today—supporting families of veterans with PTSD—is deeply important. Veterans, especially those who identify as LGBTQ+, often struggle to access the mental health care they need due to barriers such as discrimination, lack of culturally competent providers, and a general lack of awareness about their specific experiences.

This issue significantly impacts LGBTQ+ older adults, who often face compounded challenges, including health disparities and a lack of affordable housing. Many veterans grappling with PTSD feel trapped in silence, unable to seek the help they desperately need due to fear of rejection or misunderstanding. I've listened to veterans share heart-wrenching stories of isolation, where their pain is magnified by the very community they fought to protect.

A veteran I work with opened up about his feelings of invisibility. He described nights spent alone, longing for connection yet paralyzed by the fear of judgment and daily night terrors. Another veteran confided in me that the

weight of his traumatic experiences was crushing, yet the fear of being misunderstood kept him from seeking help. His eyes filled with tears as he spoke about flashbacks of horrors, sleepless nights and the internal battles he fights daily, illustrating the critical importance of creating safe spaces where veterans can share their burdens without fear of judgment. Another veteran faced the heartbreaking reality of homelessness after returning from service. After losing his job, he found himself on the streets, feeling utterly abandoned. He shared with me the gut-wrenching experience of waking up each day without hope, battling not just the elements but also the deep-seated belief that he was unworthy of help. It took immense courage for him to reach out, and with support, he is slowly rebuilding his life, but his journey highlights the urgent need for community resources.

These stories illuminate the profound need for compassion and understanding within our community, ensuring that every veteran knows they are not alone and that there is hope and help available. It is our responsibility to stand together, to listen, and to provide the support that every veteran deserves.

I urge the City Council to support initiatives that enhance resources for veterans dealing with PTSD, including specialized mental health services and community support programs tailored to LGBTQ+ individuals. By taking this action, you will profoundly impact the lives of LGBTQ+ veterans and their families, ensuring they receive the compassion and care they so desperately need.

In conclusion, I ask the City Council to prioritize the needs of LGBTQ+ veterans by advocating for comprehensive support for families affected by PTSD. Let us work together to create a community where no veteran feels alone in their struggles. Thank you again for this opportunity.

Community Healthcare Network Testimony
For Committee on Veterans

October 29th, 2024

Thank you for the opportunity to testify. Community Healthcare Network, otherwise known as CHN, is a federally qualified health center with 14 sites citywide that provide critical primary care and social services for patients in underserved communities. Reaching well over 50,000 patients annually, CHN welcomes individuals of all ages, regardless of their ability to pay.

While our services are many, I would like to highlight the work we do for Veterans, particularly for Veterans mental health. CHN's Military Family Wellness Program connects active and former service members to health and social services. Each participant is screened and assessed for mental health needs, including Post Traumatic Stress Disorder, by a licensed clinical social worker and can receive referrals for services like individual and family counseling, psychiatry, and medication management, as well as medical care, dental services, and other social services, including legal support services provided by our program partner, the Veterans Advocacy Project (VAP).

With the Veterans Advocacy Project, our program participants can receive assistance for public benefits, VA claims, discharge upgrade applications, housing support, and other civil legal issues. The Veterans Advocacy Project works closely with CHN staff to ensure continuity of care and provides CHN staff training on cultural competency when working with Veterans and understanding their legal needs.

To speak to our program's impact, in one example, a 44-year-old Army veteran was referred to our program given his mental health concerns and housing instability. A CHN social worker provided a mental health assessment, identified the need for a higher level of care, and helped him schedule an initial intake appointment at the VA for treatment. The social worker also referred the patient to the Veterans Advocacy Project for assistance with rental arrears. The patient is now attending regular talk therapy and psychiatric appointments at the VA, while receiving legal representation for his housing concerns.

In another example, a 33-year-old U.S. Navy veteran and single mother of two was referred to our program given her childcare and employment concerns. With CHN, she learned how to apply for a childcare voucher, and how to contact the Veteran Center for employment assistance. The patient is now approved for childcare vouchers and is working closely with the Veteran Center to attend career events and build relations with future employers.

CHN is proud and honored to work with our Veteran community and greatly appreciates City Council's support for our program. We are committed to its continuation. Thank you.



GallopNYC Veterans Program Impact Report

Executive Summary

The GallopNYC Veterans Program has transformed the lives of military veterans by providing therapeutic experiences with horses that foster physical, emotional, and social growth. This program, in operation since 2012, offers veterans and their families access to therapeutic horseback riding, groundwork, and opportunities for workforce development, all at no cost. By engaging with horses, veterans develop crucial self-regulation skills, improve their well-being, and rebuild a sense of community that many miss after their service. This report outlines the program's impact, the importance of continued funding, and the transformative outcomes it has achieved for veterans.

Program Overview

Mission of GallopNYC

Empowered by the collective support of our staff, volunteers, donors, and participants, GallopNYC provides therapeutic experiences with horses to facilitate personal development for New Yorkers with disabilities and others who benefit from our life-changing programs. We leverage the power of horses to support people in learning new life skills and to thrive within their communities and families.

Veterans Program

The Veterans Program operates at GallopNYC's two locations in New York City: Sunrise Stables in Queens, and Bowling Green in Prospect Park, Brooklyn. The program is available to veterans and their families at no cost, seven days a week, with lessons lasting 30 minutes each, facilitated by PATH Intl. certified instructors and supported by trained volunteers. The veterans work toward specific life goals, and their progress is monitored and evaluated regularly. Veterans are also welcome as volunteers and many enjoy horse care volunteer work.



Funding Overview and Utilization

Funding Overview

Donors are critical to the delivery of our mission and gifts help to support the costs associated with delivering therapeutic services to veterans, including instructor salaries, horse care, lesson materials, and operational expenses.

What Funding Supports

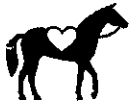
- **Therapeutic Riding Lessons:** Weekly 30-minute sessions designed to improve physical, emotional, and social skills.
- **Groundwork Sessions:** Non-riding sessions focused on building mindfulness and non-verbal communication with horses, helping veterans develop better interpersonal skills and manage PTSD or trauma-related symptoms.
- **Workforce Development:** Veterans can participate in the job skills program, which offers job training in equine care, creating pathways to employment as grooms or instructors.
- **Free Access:** All services for veterans and their families are provided at no cost, eliminating financial barriers and promoting inclusivity in the program.

Program Impact and Outcomes

Veterans Learn New Skills

The Veterans Program equips participants with a variety of skills that contribute to their overall well-being:

- **Physical Development:** Veterans regain physical strength, balance, and coordination through riding, which is particularly beneficial for those recovering from injuries.
- **Emotional and Psychological Benefits:** Engaging with horses fosters emotional regulation, reduces PTSD symptoms such as anxiety and depression, and promotes mindfulness. Groundwork activities require veterans to focus on their body language, enhancing their communication skills, and improving relationships.
- **Teamwork and Community Building:** Many veterans report missing the sense of teamwork they experienced during their military service. This program



GallopNYC

reintroduces that element through riding and working together with horses and peers, helping to rebuild a sense of belonging.

Quantifiable Results

- **PTSD Management:** Veterans who participate in the program consistently report reduced symptoms of PTSD. Groundwork exercises, in particular, have proven effective in helping veterans focus on their present moment, thereby alleviating anxiety and stress.
- **Physical Rehabilitation:** Participants in the program often demonstrate measurable improvements in physical strength and coordination, vital for those recovering from service-related injuries.
- **Increased Confidence:** By setting and achieving personal goals, veterans regain confidence and a sense of purpose, which translates into other areas of their lives, including employment and family relationships.

Testimonials

“Our family all gets to ride together in GallopNYC’s Veterans Program. Not only is it a fun and unique experience for our two children and ourselves, it also helps us bond and brings us closer together as a family.” - Camille, Juan, Gabriella, and Brandon, Veterans Program

“The military is mission-based. It’s important to maintain that feeling of accomplishment afterward, and that’s what I get when I ride a horse. GallopNYC’s program for veterans is a lot more beneficial to me than forms of talk-based therapies I’ve tried in the past.” - Josh, Veterans Program

My well-being has been completely transformed by working with horses, pulling me out of depression and empowering me to live a full and healthy life. - Noel, Veterans Program

Program Demographics and Outreach

Demographics

The Veterans Program serves military veterans and their families from diverse backgrounds, including those from low-income and underserved communities.



GallopNYC's commitment to inclusivity ensures that veterans from all walks of life have access to our life-changing programs.

Outreach Initiatives

GallopNYC actively reaches out to the veteran community through partnerships with local veteran organizations, word of mouth, and targeted outreach efforts. We also leverage our existing veterans, social media presence, website, and public events to raise awareness of the program and invite veterans to participate.

The Importance of Continued Funding

GallopNYC's Veterans Program has a proven track record of success, but continued funding is essential to its sustainability and expansion. As the demand for veteran services grows, GallopNYC is committed to scaling its operations to serve more veterans across New York City. Without crucial funding, many veterans could lose access to these life-changing services, which play a vital role in helping them reintegrate into civilian life, manage PTSD, and develop the skills needed for future success.

Conclusion

GallopNYC's Veterans Program continues to make a profound difference in the lives of military veterans, offering them an opportunity to heal, grow, and thrive. The combination of therapeutic horsemanship, mindfulness practices, and workforce development provides veterans with the tools they need to manage the challenges of post-service life. Through continued funding and community support, GallopNYC is poised to expand its impact and reach even more veterans in need.





Thank you, Chair Holden and the Committee on Veterans, and Chair Lee and the Committee on Mental Health, Disabilities, and Addiction **for holding today's hearing** on supporting the families of veterans with PTSD. My name is Margaret Gambaro, and I am the manager of access initiatives at the Intrepid Museum. In this position, I have the privilege of planning and coordinating a range of programs for current and former service members and their families. I want to take a moment to acknowledge the generous support of the City Council. Our programs would not be possible without this support. Thank you to Chair Holden and the Committee members and staff for your efforts to connect veterans with one another and with cultural resources like the Intrepid Museum.

The mission of the Intrepid Museum is to advance the understanding of the intersection of history and innovation in order to honor our heroes, educate the public and inspire future generations. **Through the Museum's veteran's access initiative**, we offer exclusive specialized programs for veterans and veteran communities as well as unique museum experiences for military and veteran families, in recognition of the sacrifices these families have made. These experiences include free admission for the whole family during Kids Week, an annual festival the Museum conducts during the public schools' mid-winter recess, as well as special access to private events and special benefits during public programs. For example, at the larger events such as Astronomy Night, we provide forums such as a small astronaut meet and greet for members and veterans and their families before the public event. Since it is smaller, the families have the opportunity to ask the astronauts questions and speak with them longer than during the general session. It also gives any veterans who find crowds overwhelming the chance to have a memorable and low-stress experience with their families.

Through our programs, exhibitions and collections, Intrepid Museum fosters community and connection among veterans, including those who are not connected with or may feel excluded from other veteran spaces. Active military families have an opportunity to explore the city and recently returned veterans have a way to spend time and reconnect with family. **The Museum's exhibitions and tours give families an entry point to talk about their veteran's service.** For example, after seeing the bunks in the enlisted berthing during a tour, a veteran started talking to his family for the first time about his sleeping quarters during his service. We have an ongoing partnership with Exit12 Dance Company to host therapeutic workshops for veterans and family members, culminating in a public performance on the flight deck. Every June we host a luncheon for veteran and military families before the Museum's **Inclusive Family Day**. **We** host screenings of films about military and veteran experiences, including PTSD, for veterans and their loved ones. Most recently we partnered with the Met Opera for a program about women and mothers in the military, based on their opera, *Grounded*.

Since 2015 Intrepid Museum has been offering programs like the ones I just mentioned and many others to veteran families free of charge. Additionally, the Museum is a Blue Star Museum, which offers free admission to current service members and their families during the summer. By taking away a financial barrier, we give more families the opportunity to connect with both one another and cultural opportunities. Thank you again for your support and for the opportunity to speak here today.

Testimony of Derek Coy, Senior Program Officer, New York Health Foundation**Submitted to the New York City Council Committee on Veterans
Oversight: Supporting the Families of Veterans with PTSD
October 31, 2024**

Thank you for the opportunity to testify on behalf of the New York Health Foundation (NYHealth) regarding the urgent mental health needs of veterans and the essential role of family support. NYHealth is a private, independent, statewide foundation dedicated to improving the health of all New Yorkers—including more than 133,000 veterans who call New York City home. My name is Derek Coy; I'm a Senior Program Officer at NYHealth. I am also a proud veteran, having served as a Sergeant in the United States Marine Corps.

The Foundation has worked for more than 15 years on behalf of veterans by engaging in grantmaking, policy analysis, advocacy, and convenings to understand and support military veterans' health needs. Our work has found gaps in services and helped develop effective, promising programs to address them. We have supported a range of community-based organizations, health care providers, and peer mentor programs to ensure New York's veterans receive high-quality, culturally competent care and support that meets their health needs and preferences. NYHealth has supported the work of organizations like Military Family Clinics, the Headstrong Project, and partnerships with the Unified Behavioral Health Center because of their unique focus on serving veterans alongside their families and caregivers. By addressing the mental and behavioral health needs of those who support New York's veterans, these programs help create a more resilient and capable network of support for those who have served.

Understanding the Mental Health Challenges Facing New York City's Veteran Population

Recent research highlights the mental health challenges veterans face and the need for family-centered approaches to mental health care, especially for those dealing with post-traumatic stress disorder (PTSD). According to an NYHealth-commissioned study published by RAND in October of this year, 26% of New York State veterans who recently separated from the military have a probable PTSD diagnosis—a 60% increase since 2010. (One caveat: it is important to consider that factors like improved screenings, reduced stigma related to mental health, and greater access to care may have contributed to this increase.) Almost two-thirds of these veterans reported having a disability and 20% rate their health as “fair” or “poor”—meaning that veterans have more health problems than their civilian peers. Additionally, more than one in five veterans reported an unmet need for mental health care. For those with suicidal ideation in the past year, 43.4% had unmet mental health needs.¹

The invisible wounds of war—PTSD, suicidal ideation, and substance use—contribute to poor outcomes for veterans. An NYHealth analysis found that New York City veterans had a 2.5 times higher rate of “deaths of despair” (suicide and alcohol- and drug-related deaths) than civilians in New York City from 2012–2021. Substantial disparities in deaths of despair exist across different demographic groups. For example, the Bronx reported the highest rates of any borough—nearly double the citywide average. Citywide, deaths of despair rates were highest among veterans ages 55–64, particularly among Black and Hispanic veterans.

¹ RAND. 2024. “Understanding Veterans in New York”. New York Health Foundation. New York, NY. Available at: https://nyhealthfoundation.org/wp-content/uploads/2024/10/RAND_Understanding-Veterans-in-New-York.pdf.

Secondary Trauma: The Overlooked Mental Health Burden on Veterans' Families

Mental health challenges often extend beyond veterans, to affect their families, who may experience “vicarious trauma” or secondary trauma, which mirrors PTSD symptoms and places families under significant strain.² Veterans’ families, especially caregivers, often bear additional emotional and mental burdens. U.S. Department of Veterans Affairs (VA) studies highlight that children of veterans with elevated PTSD symptoms show increased behavioral issues and emotional distress.³ Children of combat veterans with PTSD can feel sadder and more anxious compared to children of non-combat veterans without PTSD.⁴ Caregivers are also heavily affected: according to the Elizabeth Dole Foundation, nearly half of caregivers of veterans under age 60 meet the criteria for depression. One in three caregivers sought mental health care in the past year but could not access it; 78% of them cited time constraints as the main barrier to care.⁵

The Importance of Inclusive Research on Veteran and Family Needs

It is crucial that research on veterans’ mental health include diverse samples that reflect the veteran population. A 2012 review revealed that most studies focused on male veterans and their female partners, which may mask important differences in risk factors and outcomes by gender and sexual orientation.⁶

There is promising research on interventions to support veterans with PTSD and their families. Research on interventions for caregivers of veterans with PTSD—particularly those focused on coping strategies and managing PTSD-related concerns—found that, after the intervention, caregivers reported reduced burdens, lower levels of depression and anxiety, less stress, and decreased time spent providing care, among other outcomes.⁷ Furthermore, having families involved in a veteran’s treatment can reduce their potential for dropping out of care.⁸

To support veterans with PTSD and their families, we offer the following recommendations:

1. **Expand and invest in integrated services for veterans and families.** Programs that support both veterans and their families (such as Military Family Clinics, the Headstrong Project, and partnerships with Unified Behavioral Health Center) should be expanded and replicated. These models provide holistic mental health care that addresses the interconnected needs of veterans and their loved ones, reducing PTSD symptoms and alleviating family stress for improved household wellbeing.

² Diehle, J. Brooks, S. K. Greenberg, N. 2016. “Veterans are not the only ones suffering from posttraumatic stress symptoms: what do we know about dependents’ secondary traumatic stress?” *Social Psychiatry: Psychiatric Epidemiology*. doi: [10.1007/s00127-016-1292-6](https://doi.org/10.1007/s00127-016-1292-6)

³ Lambert, J. E. Holzer, J. Hasbun, A. 2014. “Association between parents' PTSD severity and children's psychological distress: A meta-analysis.” *Journal of Traumatic Stress* 27(1). <https://doi.org/10.1002/jts.21891>

⁴ U.S. Department of Veterans Affairs, “PTSD: National Center for PTSD. When a Child’s Parent has PTSD,” https://www.PTSD.va.gov/family/effect_parent_PTSD.asp#:~:text=Some%20children%20of%20combat%20Veterans,nightmares%20about%20the%20parent's%20trauma., accessed October 2024.

⁵ Ramchand, R. Dalton, S. Dubowitz, T. Hyde, K. Malika, N. Morral, A.R. Ohana, E. Parks, V. Schell, T.L. Swabe. G. et al. 2024. “America’s Military and Veteran Caregivers. Hidden Heroes Emergency from the Shadows.” RAND. Available at: https://www.rand.org/pubs/research_reports/RRA3212-1.html.

⁶ Lambert, J. E. Engh, R. Hasbun, A. Holzer, J. 2012. “Impact of posttraumatic stress disorder on the relationship quality and psychological distress of intimate partners: a meta-analytic review. *Journal of Family Psychology*. doi: 10.1037/a0029341.

⁷ Martindale-Adams, J. L., Zuber, J., Graney, M. J., Burns, R., & Nichols, L. O. (2021). “Effect of a Behavioral Intervention on Outcomes for Caregivers of Veterans with PTSD. *Military Behavioral Health*.” doi: 10.1080/21635781.2021.1927916.

⁸ Thompsons-Holland, J. Lee, D.J., Sloan, D. M. (2021). “The Use of a Brief Family Intervention to Reduce Dropout Among Veterans in Individual Trauma-Focused Treatment: A Randomized Controlled Trial.” *Journal of Traumatic Stress* 38:4. doi: 10.1002/jts.22680.

2. **Increase awareness and outreach efforts.** The recent RAND survey of New York veterans indicates that a significant portion of veterans (25%) and their families (64%) are unaware of available mental health resources.⁹ Family members often face additional barriers when navigating these resources. Targeted outreach and educational campaigns can bridge this gap, helping veterans and families understand and access available benefits and support.
3. **Expand peer support services for family members and caregivers.** Peer support offers invaluable guidance for families, who benefit from shared experiences. Expanding peer support networks—including those funded through the New York City Department of Veterans’ Services Request for Proposals for the Joseph P. Dwyer Veterans’ Support Program initiatives, as well as networks specifically tailored for families and caregivers—could provide essential emotional support and practical resources to those affected by a loved one’s PTSD.

NYHealth remains dedicated to advancing these recommendations, and we believe New York City can play an important role in meeting the growing mental health needs of veterans and their families. By prioritizing family-centered care and awareness, we can help mitigate the effects of PTSD on veterans and create healthier, more resilient families. We invite you to look to the New York Health Foundation as a resource in this work. You can learn more about our veterans’ health initiatives by visiting our website, www.nyhealthfoundation.org.

⁹ Ramchand, R. Dalton, S. Dubowitz, T. Hyde, K. Malika, N. Morral, A.R. Ohana, E. Parks, V. Schell, T.L. Swabe. G. et al. 2024. “America’s Military and Veteran Caregivers. Hidden Heroes Emergency from the Shadows.” RAND. Available at: https://www.rand.org/pubs/research_reports/RRA3212-1.html.

Testimony by the New York Legal Assistance Group (NYLAG)
Before the New York City Council Committee on Veterans jointly with the
Committee on Mental Health, Disabilities and Addiction, on Supporting the Families
of Veterans with PTSD

October 21, 2024

Chair Holden, Chair Lee, Council Members, and staff thank you for this opportunity to testify on the issue of supporting the families of Veterans with PTSD. This testimony has been prepared by Ryan Foley, Project Director of the Veterans Practice, within the New York Legal Assistance Group (NYLAG). NYLAG is a nonprofit law office dedicated to providing free legal services in civil matters to low-income New Yorkers. The New York Legal Assistance Group uses the power of the law to help New Yorkers in need combat economic, racial, and social injustice. We address emerging and urgent legal needs with comprehensive, free civil legal services, impact litigation, policy advocacy, and community education. NYLAG services military Veterans, the homeless, immigrants, seniors, the homebound, families facing foreclosures, renters facing eviction, low-income consumers, those in need of government assistance, children in need of special education, domestic violence survivors, persons with disabilities, patients with chronic illness or disease, low-wage workers, members of the LGBTQ community, Holocaust survivors, and others in need of free civil legal services.

NYLAG serves the diverse needs of Veterans through legal clinics within the Bronx and Manhattan VA Medical Centers, including the nation's first legal clinic focused entirely on women Veterans, as well as through referral partnerships with Veteran-focused community-

based organizations. We provide comprehensive services to Veterans and their families, regardless of their discharge status and eligibility to use the VA Healthcare System. We staff a legal clinic at the Borden Avenue Veterans Residence, a 243-bed short term housing shelter for Veterans, and serve a large number of homeless and housing insecure Veterans. We partner with Samaritan Daytop Village to provide legal intakes to Veterans participating in their residential treatment programs as well as offer services onsite at Black Veterans for Social Justice.

The vast majority of Veterans that NYLAG serves suffer from mental health conditions including PTSD. PTSD is more common among military Veterans than civilians, with around 7% of Veterans suffering from PTSD at some point in their life.¹ However, PTSD is significantly more common for combat Veterans (as high as 29%)², Veterans with less-than-Honorable discharges (as high as 62%),³ and Veterans experiencing homelessness (as high as 67%)⁴, all sub-populations that NYLAG targets with its services. Unfortunately, many of these Veterans lack a family or social support system, as the symptoms of PTSD can cause breakdowns in relationships, leaving Veterans isolated and at-risk. Angry or aggressive outbursts, risky and destructive behavior including substance abuse, and mood fluctuations are all common symptoms for individuals with PTSD.

The impact a supportive family member can make is enormous. NYLAG would not be nearly as successful at assisting Veterans with their legal claims without family and friends encouraging and guiding Veterans through the long and difficult processes. Below are the

¹ https://www.ptsd.va.gov/understand/common/common_veterans.asp.

² Id.

³ <https://www.gao.gov/assets/gao-17-260.pdf>.

⁴ <https://nchv.org/veteran-homelessness/>.

stories of two current NYLAG Veteran clients who have heavily relied on family members to pursue their earned benefits:

- I. AE enlisted in the U.S. Air Force shortly after completing high school. His family had a history of military service, and he looked to add to that legacy. He was a successful and dedicated airman, deploying multiple times and receiving numerous awards for his service. However, things changed when he got the news that his mother was diagnosed with late-stage cancer. AE's father was deceased, and his brother was also on deployment, so there was no one to look after his mother in her time of need. This news weighed heavily on AE as his role in a combat situation prevented him from returning home. The stress of his deployment and the fear that at any moment he would receive devastating news about his mother eventually reached a boiling point. He began using alcohol to self-medicate and in one instance lashed out at his command regarding his inability to return home, which resulted in a less-than-honorable discharge.

After a long battle with cancer, AE's mother defied the odds and made a full recovery, but now had a new battle, to help her struggling son. Following his discharge, AE's mental health issues grew exponentially worse. He felt the weight of moral injury, viewing his service as a failure, and was hesitant to seek services he did not feel he earned. He continued to rely on alcohol as his primary coping mechanism. AE's mother was able to convince him to seek mental health treatment, and he was diagnosed with PTSD and depression. His mother was also the one who connected him with NYLAG in hopes that we could assist with his disability benefit and discharge upgrade applications. AE's mother was NYLAG's main contact and she helped coordinate communication and record retrieval, assisted his NYLAG

advocate develop evidence such as support statements and provided AE with motivation and encouragement to stick with the process. That is on top of the financial and housing support she provided to help him during cycles of unemployment and homelessness.

Thanks to AE's mother dedicated involvement, NYLAG was able to complete a discharge upgrade application on his behalf and to assist AE in obtaining service-connected disability benefits for PTSD. The challenges that come with PTSD, such as anger, irritability, difficulty communicating, often cause veterans to struggle with close relationships. It becomes a large burden to support a family member when they are struggling. AE is lucky to have such a strong willed and caring mother, because NYLAG would not have been able to provide the same support without her involvement.

- II. FL enlisted in the U.S. Army with the hopes of a better life and earning his U.S. citizenship. FL was a motor transport operator and during deployment ran frequent trips through wreckage and dangerous areas. The death and destruction he witnessed on missions had a significant impact on FL's mental health. He told his command he was suffering from suicidal ideation, and he was immediately hospitalized. FL was diagnosed with borderline personality disorder by the Army. Despite this diagnosis, his hospitalization, and an angry outburst against another soldier, the Army permitted him to re-enlist based on his strong service record and leadership potential.

His second enlistment started fine, as he was fully engaged in treatment with regular one-on-one therapy sessions. However, his mental health provider was called to

deployment and FL lost this crucial source of support. The Army decided not to appoint a new provider since he appeared to be doing better, but FL's condition quickly deteriorated after his therapy ended. He suffered an acute mental health crisis and attacked another servicemember. FL described the situation as a haze where he felt disconnected from himself and lacking control over his thought process and actions. FL's command decided they were going to discharge him based on the incident, and even though FL's previous mental health provider, his direct supervisor and even the person he attacked provided positive testimony on his behalf, FL was given a Bad Conduct discharge.

This discharge created barriers to health care, disability benefits, employment, and housing. FL struggled to find consistent mental health treatment, utilizing temporary programs, since he was turned away by the VA. It was amid this hardship, FL met his future wife, who has become his greatest advocate. She helped him enroll in a limited mental health program, where he received a PTSD diagnosis, and he regained regular access to individual therapy sessions. She helped him find NYLAG and we are now working with him on both immigration and veteran benefit cases. Most importantly though, she supports him when he has flashbacks and emotional episodes. Before FL met her, his episodes would often lead to erratic behavior that got him fired from his employment and placed him at-risk of arrest. With his wife's help, FL was able to maintain his last position, which was also the longest he held employment, even when he suffered an episode. Although his treatment program ended last year, with his wife's advocacy, FL has been able to continue to access his prescribed medication.

FL's wife shared with us about her struggles as caregiver and as the primary source of income for the household. She harbors resentment that the Army and the VA have failed to step up and help in a meaningful way for his husband, who continues to suffer because of his service—related trauma. While it has been difficult, she has been able to find different sources of support, including NYLAG, that are able to fill in some of the gaps the federal agencies have left.

A strong support system can prevent Veterans suffering with mental health conditions from facing homelessness, incarceration, and crisis. However, the caregivers and families cannot shoulder this heavy burden alone. It is crucial for the City to continue and expand programs that aid Veterans and their family members, including medical, legal, employment, and recreation services. Family counseling as well as individual counseling for family members can help educate individuals on PTSD and allow them to overcome communication difficulties that may otherwise lead to relationship breakdown and driving family members away. Legal assistance targeted towards family members can help establish important planning and authorization documents, and allow Veterans' families to access to additional support such as affordable mental health care, caregiver relief from home and community-based care services, and benefits to supplement lost income, through legal advice on eligibility and help appealing denials or inadequate levels of services. In addition, employment and recreation services can provide outlets of support to avoid isolation or withdrawal.

It is important for City agencies, particularly DVS, to be aware of VA-sponsored programs that exist and guide Veterans and their families to those resources. At the same time, the City must also find ways to offer similar support to those who may not qualify for federal programs based on service eligibility. These Veterans and families struggle the most, often

lacking the mental health access and disability benefit support that can be life-changing for a Veteran suffering from PTSD.

We thank the Council for its efforts and concerns for vulnerable New York City Veterans and their families, and for taking this opportunity to continue to find ways to improve conditions for them. We look forward to continuing to be a resource going forward and are happy to discuss further.

Respectfully submitted,

New York Legal Assistance Group

**Testimony for the October 29th New York Council's Committee on Veterans on behalf of
the Military Family Center at NYU Langone Health
(Supporting the Families of Veterans with PTSD)**

Justin Pomerence, PhD

Good Afternoon Chair Holden and members of the New York City Council Committee on Veterans. I am Dr. Justin Pomerence, Clinical Psychologist and Assistant Professor in the Military Family Center at NYU Langone Health.

The Military Family Center at NYU Langone Health was established in 2012 with the goal to fill in the gaps in mental health services available to veterans and their families in the New York City area. The Center's mission is to address the mental health challenges of this population by providing accessible, high quality, evidence-based treatment to veterans and their family members.

Since inception, our Military Family Center has provided mental health treatment to more than 4,000 veterans and their family members. We provide comprehensive evaluations and personalized, evidence-based treatment for a number of mental health problems including posttraumatic stress disorder (PTSD). We provide services completely free of charge and offer our services to veterans regardless of their discharge status, combat exposure, or era served. Our services are available to family members of veterans, even if the veteran is not involved in the treatment. To maximize engagement and access to care, we offer appointments during the evening, outside of normal business hours, in person or by video through a virtual health platform.

Supporting the families of veterans with PTSD is crucial, which is why the Military Family Center is committed to offering treatment to both veterans and their families free of charge. We specialize in offering the gold standard evidence-based treatments for PTSD, including Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), Written Exposure Therapy (WET), and Skills Training for Affective and Interpersonal Regulation (STAIR). We also offer short-term therapies focused on difficulties that often present with PTSD, including insomnia, substance use, anger management and relationship problems. For partners of veterans with PTSD, we offer individual therapy as well as Emotionally-Focused couples therapy. Our Child and Family Program provides individual child therapy, parent-child therapy, family therapy, and parenting training for children of veterans. We aim to support our veterans by caring for their support network. That network is made up of their partners, parents, siblings, other relatives, and friends. All these people may qualify for care at the Military Family Center, even if the veteran isn't enrolled in care.

Over the last few years, there has been a significant increase in the number of couples therapy referrals in our clinic. Veterans and their partners are reaching out, desperate for support. Partners often haven't been well informed of their veteran's PTSD diagnosis or feel they don't have adequate individual support in navigating common stressors related to

their partner's PTSD. It has often been difficult for them to access timely quality care. They would likely benefit from increased awareness of available programs and services to help them support the veteran in their life with PTSD. There should also be attention given to increasing accessibility of effective mental health care with culturally competent clinicians who are trained in military culture and PTSD.

Focus needs to be given on better educating and supporting parents and siblings of veterans, who often play a major role in helping veterans to heal from PTSD. Existing mental health resources for loved ones of veterans with PTSD tend to be focused on spouses and children of veterans. Many of the veterans we see in our clinic are younger and may still be living at home with parents. Families of veterans with PTSD experience higher levels of stress and are at risk for developing anxiety, depression, and other psychological issues.

In conclusion, supporting the families of veterans with PTSD is essential not only for improving the well-being of veterans but also for enhancing the quality of life for their families and children. Effective support systems, consisting of family and friends who are educated on PTSD and emotionally supported themselves, can lead to healthier family dynamics, better mental health outcomes, and overall resilience in navigating the challenges posed by PTSD.

References:

- American Psychological Association (APA). (2022). "Understanding PTSD." National Center for PTSD. Retrieved from <https://www.ptsd.va.gov/>
- Doss, B. D., & Rhoades, G. K. (2006). "Marital satisfaction and the mental health of parents." *Psychology of Addictive Behaviors*, 20(1), 47-54.
- Macdonald, M. E., & MacMillan, H. L. (2015). "Trauma and its consequences: Does family matter?" *Journal of Traumatic Stress*, 28(4), 327–331.
- Pincus, S. H., & Canning, Z. (2017). "The Family Impact of Deployment and PTSD." *Journal of Family Psychology*, 31(8), 925-930.
- Gewirtz, A. H., & Edleson, J. L. (2007). "Young children of parents with PTSD: The role of family advocacy." *Child Development*, 78(4), 1153-1168.

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

[]

I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Commissioner James Hendon

Address: _____

I represent: DVS

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

[]

I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Jason Loughran

Address: DVS

I represent: DVS

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

[]

I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Dr Lauren D'mello

Address: Executive director of mental health

I represent: DVS

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: 10/29/2024

(PLEASE PRINT)

Name: Coco Culhane

Address: _____

I represent: Veteran Advocacy Project

Address: 1 Liberty Place NY NY 10086

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: ALICIA KERSTAN

Address: NY NY

I represent: Gallup NYC

Address: Hmad Beach NY

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Margaret Gambara

Address: _____

I represent: Intrepid Museum

Address: 1 Intrepid Squ Pier 86

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Mount Lacy

Address: Homeless

I represent: Veterans of NYC

Address: _____

Please complete this card and return to the Sergeant-at-Arms