

Written Testimony of

Nicholas Karnaze

Combat veteran and founder of Stubble & 'Stache

Before the

The Committee on Veterans' Affairs

U.S. Senate

On

“VA Mental Health: Ensuring Access to Care”

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Mr. Chairman and Members of the Committee,

Thank you for the invitation to be here today; it is an honor to be able to share my experiences with you. My name is Nicholas Karnaze, and I served 7.5 years in the United States Marine Corps both as an intelligence officer and as a special operations officer. I served two combat deployments in Afghanistan, and I have a disability rating with the VA. Because of this, I receive all of my health care through the VA. I am a graduate of the United States Naval Academy, and recently received a certificate from the Stanford University Graduate School of Business.

I am testifying today from the perspective of a veteran with service-connected disabilities who has attempted to receive mental health treatment from the VA. As a leader of Marines, I feel it is my duty to share my personal experiences with you so that, together, we can ensure the men and women who honorably served our nation receive the mental health care that they deserve.

Many men and women are suffering in silence from the mental wounds they sustained during their time in the military. Most know they need help, but some are fearful to ask out of concern that any mention of “mental health” will have an adverse effect on their government security clearance, and ultimately, their jobs. For those who have mustered the courage to reach out, most are confronted with a

lengthy and discouraging administrative process in order to gain access to mental health care. There are extremes in mental health – for example if a person is about to commit suicide - but the majority of people seeking treatment have not reached that point.

Often, veterans who are actively seeking help are in the stage in which they experience the feeling that something is not right. While they may know something is wrong, they are not on the verge of suicide, so contacting the VA's widely publicized Veterans Crisis Line seems excessive. So what options do we veterans have in this situation?

Upon leaving active duty, it took me over a year to gain access to the VA healthcare system. Once in the system, the actual physical care I received was fantastic. But, it's the time and process necessary to ultimately receive the care is where the issues lie.

In the fall of 2014 I expressed an interest to meet with a mental health care professional to discuss some issues I'd been having with concentration and memory. Upon referral to a psychiatrist, it took over a month before I was finally able to meet with the doctor. During our hour-long initial meeting, she asked if I was opposed to taking medication, mentioning that while I do not feel depressed, my inability to concentrate could be a symptom of depression. Eager to "get my head right," I said I had no problem trying medication. She then prescribed me an antidepressant, and

we agreed to meet several months later to assess my progress. She noted that it could take from several weeks to a month before I noticed a change in my mood.

Two weeks into taking the medication, I began to *feel* depressed, beyond my initial issue with memory and concentration. Cold, lonely depression took its hold. I felt hopeless. At first I thought I was just having a really bad day, but these feelings persisted. I knew something was wrong. This was not me. I attempted to call the VA to talk with the psychiatrist, but she could not see me for about 30 days. I could not live like this for 30 days. I decided to stop taking the medication. Shortly after I stopped taking the drug, my mood began to improve and I was soon back to my original baseline. When I was able to see the doctor again, she said that I had made the right choice in stopping the medication. She asked if I wanted to try a different drug. I declined. I told her I'd like to try cognitive therapy. She said that was a good idea, but could not provide that for me. I was not referred to a psychologist. I left the clinic and that was the last interaction I've had with a VA mental health professional.

My experience in which the VA deferred to pharmaceutical treatment instead of psychological treatment is not unique. On August 26, 2014, Adam Looney took his own life. Adam was a Marine Corps veteran and brother of my friend Kate Looney, also a Marine Corps veteran. Up until his death, Adam was receiving mental health treatment from the VA in Columbia, MO. According to Kate, the "VA's approach was basically to try every psychiatric medication without really taking the time to counsel the root issue. He used to hate going because it was a long drive and a long

wait. I brought him a few times, and he was never in there long. It seemed they were always changing his meds, losing paperwork and switching his counselor.”

Current Situation

I receive my health care through the VA Community Based Outpatient Clinic at the Ft. Belvoir Community Hospital. Still interested in meeting with a psychologist, I recently attempted to contact my clinic for a referral. The only way I’ve found to do this is through the one phone number listed on the clinic’s website. The phone number links to an audio recording that lists another phone number to call for referrals. After calling that number, I was on hold for about 15 minutes before I decided to select the option of having a representative call me back when one became available. To date, no representative has called me back nor responded to the voice message I left requesting help earlier this week.

From a mental perspective, I feel very fortunate. No matter how bad things get, I always have a slight feeling that everything will be okay, that I just need to keep pushing forward. This feeling has been with me through my most difficult days on the battlefield and during my darkest times at home. Because of it, I have always been able to keep moving. But I know not everyone has this internal voice. When a person reaches out for help, especially mental health help, they are extremely vulnerable. Not having someone pick up on the other end, someone you have been told will help, is crushing. When you are suffering from a mental wound, you will not have the emotional energy to keep asking for help if your first calls go unanswered.

After learning I'd be testifying before you today, I posted on Facebook asking my friends about their experiences with mental health care from the VA. The responses I received were overwhelming. Alisa Beasley emailed me the following:

I was medically retired from the Army 28 April 2014. I was just barely holding on mentally, that is how I felt. I saw my primary care provider by May and referred to Mental Health that same day! Then I saw a psychologist in July. Then nothing. I was supposed to be receiving follow up visits and every time I called the Mental Health number it just beeped like it was disconnected. I was so frustrated, and on top of that the VA had sent me a letter stating my benefits would be cut due to two missed appointments for psychiatry and neurology. I didn't miss either of these appointments, they were never rescheduled like I called and asked for. I could literally feel my world crumbling. I had gone through a really tough divorce, he wasn't letting me see my kids...I felt like what's the point. I'm done. I was having panic attacks and nightmares and depression. I called and called and there was never an answer from the VA mental health building. It took me calling the patient advocate. By this time I was a sobbing mess and crying and shaking and felt like my world was crashing. She was kind enough to tell me it looks like they literally just dropped me completely off the mental health log. She was able to get me an appointment for February 2015, this call took place in November 2014. I didn't see a psychiatrist to talk about possibility of meds till sometime after June 2015.

This is not the worst-case scenario from the VA and mental health, but this is my story. This can not continue, others are far worse off and need the help they ask for RIGHT NOW not months or even days later. Why is there not a program set up that's 24/7 hours where the Vet can come into the VA mental health building and be treated at that moment. I am going to school now so I hopefully can help another Vet with PTSD. I would like to work with in the VA, efficiently. They cannot continue on this path they are living up to the motto most vets live by now

"The VA giving Vets a second chance to die for their country"

The saddest part is it is the truth.

Sincerely,

Ret. US Army Vet

Alisa Hurkman

Like Alisa, I too have had the VA threaten to cancel my benefits for missing an appointment. The problem is that I knew I wasn't able to make the appointment and actively reached out to the VA, but could not get through to an actual person. So, I left a voicemail with my appointment details and that I needed to reschedule. I never heard anything until I received a letter reprimanding me for missing an appointment.

There's a common thread here: the need to be able to efficiently gain access to the right care in a *timely* and thorough manner. Nathan Lewis, a former Marine Corps Officer, shared this with me:

After my transition from the Corps my wife suggested I seek help for my challenges related to my two tours in Iraq. I reached out to the local VA hospital and asked for support. I waited months for their response. After three or so months I contacted them again. I was given a list of items I had to complete. It was an admin exercise and I decided to seek help through the assistance of my private sector employer.

But what about those who cannot go outside of the VA for care? As a small business owner, I cannot afford private healthcare at this time. I am aware of several amazing psychologists in the DC area, but I simply cannot afford to pay for treatment out of pocket.

In conclusion, as a veteran seeking mental health treatment from the VA, my biggest issue is gaining timely access to the right type of treatment. For me, the barrier to this is on the VA's administrative side; gaining access to the right providers. I truly believe that streamlining this process and providing veterans with the appropriate mental health care will result in stronger families and dramatically reduce veteran unemployment and the tragic suicides that are plaguing the veteran community.

Mr. Chairman and members of the Committee, I wish to thank you for this opportunity to present my perspective today.