Dr. Barbara Van Dahlen, Founder and President, Give an Hour

Testimony by Dr. Barbara Van Dahlen before the Senate Committee on Veterans' Affairs "VA Mental Health Care: Addressing Wait Times and Access to Care" November 30, 2011

Thank you for this opportunity to provide testimony regarding veterans' access to mental health care through the Department of Veterans Affairs. It is an honor to appear before the Senate Committee on Veterans' Affairs, and I am proud to offer my assistance to those who serve our country.

## Effective Mental Health Care

As a psychologist and the Founder and President of Give an Hour™, a national nonprofit organization providing free mental health services to returning troops, their families, and their communities, I am well aware of the mental health issues that now confront the men, women, and families within our military and veterans community. As an American I share your commitment to ensure that all veterans in need of mental health services receive the care and treatment they deserve.

Many issues affect our ability to effectively and successfully deliver mental health treatment and support to our military and veterans communities. While we are here to focus specifically on the critical elements of wait time and access to care, our efforts must address all of the factors that enhance or interfere with the delivery of services if we are to ultimately succeed with our mission. First, we must have adequate numbers of mental health professionals appropriately prepared and available in all communities to serve those in need. In addition, we must effectively educate military personnel, veterans, and their families so that they understand the full range of mental health issues that can affect those who serve our country. Education is critical if we are to prevent the development of disabling and costly conditions and disorders. Finally, and most important, we must work together across organizations and agencies to ensure that our messaging is consistent and our approaches are complementary.

The failure to provide effective mental health education, support, and treatment to military personnel, veterans, and their families will have dire consequences for generations to come. As a mental health professional I have witnessed the impact on the families of Vietnam veterans of the failure to provide effective and appropriate care to those in need. Many of these veterans—who returned from an unpopular war to an unsupportive nation—were never properly identified as having significant mental health concerns. As a result, they and their families suffered for years—some for decades—from the invisible wounds of war.

Indeed, we are already seeing the consequences of the failure to identify and provide treatment to those OIF/OEF veterans in need as they come home from war. Over the last 10 years we have seen a rise in suicide among our service members and veterans from the current conflicts. This generation of veterans is entering the homeless population at an alarming rate. And we need only look at the rise of divorce within the military community as well as an increase in mental health services being delivered to children of our warriors to understand the far-ranging and significant consequences of the mental health issues affecting those who serve.

Without a doubt, the Department of Veterans Affairs is the principal organization in our nation's effort to ensure that all of those who wore the uniform and their families receive the mental health care they need to ensure they are able to lead healthy and productive lives once they complete their service. Clearly the VA has worked hard to keep up with the changing landscape and the growing demands over the last decade as a result of the wars in Iraq and Afghanistan. The VA has increased the number of mental health professionals providing services since 2006. It now employs 21,000 clinicians. It has increased the number of Vet Centers across the country to 292 and has added 70 mobile vet centers in its effort to serve those who live in rural communities. Similarly, the VA has expanded its call centers to help connect veterans in need with counseling services and launched the Veterans Crisis Line, which allows veterans and their families to call 24 hours a day, seven days a week for assistance. Finally the VA has begun integrating mental health care into its primary care settings.

But no organization, agency, or department can provide all of the education, support, and mental health treatment that every veteran and his or her family needs. Indeed, I would argue that it is more helpful to those who serve and their families to see numerous endeavors coordinated on their behalf so that they understand that our country—not just our government—supports them and is committed to their health and well-being. Give an Hour<sup>TM</sup> is one example of a community-based effort to complement the good work of the Department of Veterans Affairs. We are honored to do our part.

## Give an Hour<sup>TM</sup>

I founded Give an Hour™ in 2005. As the daughter of a World War II veteran, I became concerned about the stories coming home about those who were serving. Although the Departments of Defense and Veterans Affairs were doing more than ever before in their efforts to care for the invisible injuries of war, service members were clearly struggling and their families were suffering. Early studies by Charles Hoge and others indicated that significant numbers of service members would continue to come home with post-traumatic stress, traumatic brain injury, depression, anxiety, and other understandable consequences of exposure to the brutality of war.

The idea behind Give an Hour™ is really quite simple: ask civilian mental health professionals across the country to provide an hour each week of mental health support and/or treatment to any OIF/OEF service member, veteran, or family member in need, free of charge. Our plan continues to be to organize the civilian mental health community so that we might offer additional critical mental health services to the Departments of Defense and Veterans Affairs to aid them in our nation's efforts to assist returning troops and their families.

Give an Hour<sup>™</sup> provides mental health care and support to those who are active duty, members of the National Guard, Reservists, veterans, and their families. We define family members very broadly—as anyone who loves someone who has served since 9/11.

Our clients find their way to us through a number of channels. Service members and veterans tend to be technologically skilled, and many find us on the Web and contact our providers directly. We have excellent relationships with a number of nonprofits and VSOs, all of which make regular use of our services by referring individuals to our providers. In addition, we have a successful marketing campaign, with frequent articles about our efforts appearing in numerous

magazines and newspapers. And we have been fortunate to receive free advertising from publications such as Time magazine and USA Today. I am also a frequent guest on local and national television and radio programs. Further, we have very good relationships within the Department of Defense and often receive referrals from our colleagues there. Finally, although we do not have an official relationship with the Department of Veterans Affairs, we have received many referrals from the VA.

Our mental health professionals commit to remain in our network for at least one year. Mental health professionals accepted into our network are required to be licensed in good standing in their state and to carry their own malpractice insurance. We have developed excellent relationships with all of the major mental health associations, and we accept mental health professionals from all of the major disciplines. Our network includes psychologists, psychiatrists, social workers, psychiatric nurses, pastoral counselors, licensed professional counselors, and marriage and family therapists. Though not required, service members, veterans, or family members who receive care through GAH are asked to give back by volunteering in their own communities. We currently have great relationships with a number of organizations—including The Mission Continues and Service Nation—that assist us with this element of our model.

Give an Hour<sup>TM</sup> has over 6,000 mental health professionals in our network. We have providers in each of the 50 states and U.S. territories. Our providers offer face-to-face direct care to service members and/or their families, they provide phone support to those who might be unable to attend a session in person, and this month we will begin offering tele-health capability first in Virginia and North Carolina and then to the rest of our network in 2012.

Give an Hour<sup>TM</sup> providers offer a wide range of options with respect to available appointment times to those who seek services including evenings and weekends. In addition, they bring a wealth of treatment options and areas of expertise to their work. We know that one size does not fit all with respect to this population or any. Flexibility and treatment based on individual needs and preferences are critical elements if we are to reach and successfully support the mental health needs of veterans and their families. There is no limit to the number of sessions that service members receive, and all services are free.

In addition to providing direct service, GAH also offers free mental health consultation to other organizations that provide services to the military community. For example, we have enjoyed a long-standing relationship with organizations such as TAPS (the Tragedy Assistance Program for Survivors) and SVA (Student Veterans of America), providing direct assistance with referrals and assisting at their events. We are also regularly asked to participate in Yellow Ribbon events and similar community gatherings across country. Our staff members present at conferences and are key members of advisory groups addressing the needs of those in our Armed Forces. We are proud that Give an Hour<sup>TM</sup> is successfully harnessing the knowledge, wisdom, skill, and compassion of our civilian mental health professionals and offering these resources to those who serve, our veterans, and their families in communities across the country.

Give an Hour<sup>TM</sup> surveys our mental health professionals quarterly to determine the specific services they have provided. Typically about 25% of our mental health professionals respond to our surveys. Our last survey was completed at the end of August 2011: those who have answered our surveys over the last five years report having given 42,000 hours of care since we began

providing services. Given that only a quarter of our respondents provide information, we can assume that many more hours have actually been given. Regardless, we are pleased that we can count \$4.2 million in mental health services provided to the men, women, and families who serve our country.

And we know that our capacity for providing care has not yet been reached. We can currently offer 6,000 hours of care each week, to provide support, care, education, information, and assistance. Our goal is to enlist 40,000 mental health professionals—approximately 10% of the 400,000 mental health professionals in our country—to assist in this effort. Someday we hope to offer 40,000 hours, which translates to \$4 million, of mental health care per week.

Give an Hour<sup>TM</sup> is a virtual organization. Although most of our 12 staff members live and work in the Washington, D.C., area, we also have employees in Virginia, New Jersey, North Carolina, and Pennsylvania. Five of our staff members are either veterans themselves or military family members. Because we are not a bricks and mortar operation, we have minimal overhead and are able to provide our services efficiently and inexpensively. In addition to our 6,000 mental health volunteers, we also appreciate the efforts of approximately 300 general volunteers, who assist us throughout the country with a variety of tasks and efforts. Because of our organizational efficiency and the generosity of the mental health professionals who have stepped up to assist with this critical effort, Give an Hour<sup>TM</sup> is able to provide one hour of care to service members, veterans, their families, and their communities for \$17.88.

As a clinical psychologist I am aware of the importance of proper training for the members of our network. Indeed focus groups conducted with our mental health volunteers indicate their interest in being well prepared to serve those in the military community. Since our inception, Give an Hour<sup>TM</sup> has been dedicated to providing a variety of training opportunities—both online and through conferences and workshops—to those who offer their services to assist returning troops and their families. We are fortunate to have collaborative relationships with a variety of organizations and associations, many of which have provided training tools and opportunities. Indeed, because of our knowledge and commitment to training and education, Give an Hour<sup>TM</sup> has also been commissioned to create training tools for educators and employers. We look forward to continuing to explore and offer new and creative tools to assist our talented mental health professionals with their important work.

And we look forward to working with our colleagues at the Departments of Defense and Veterans Affairs as we continue to develop opportunities to offer the considerable resources available within the civilian mental health community to returning troops, veterans, their families, and their communities.

## Beyond Mental Health Care

As critical as effective and accessible mental health care is to service members, veterans, and their families, these men, women, and families who serve our nation need and deserve much more as they return to our communities. And while good mental health forms the basis for every other aspect of a satisfying and productive life, without a good job or a quality education, it is difficult to imagine how those who serve can move forward and carry on.

Over the past six years through my work and travel with Give an Hour<sup>TM</sup>, I have had the pleasure

of meeting numerous community leaders—leaders who care deeply for our military families. I have also had the honor of working with many leaders within the nonprofit community as well as leaders from a variety of Veterans Service Organizations, all of whom work tirelessly to support service members, veterans, and their families. And I am pleased that I now have many good friends and respected colleagues in the Department of Defense who are committed to providing opportunities and care to service members.

I have had numerous conversations and frequent discussions with these colleagues regarding the importance—and indeed the necessity—of creating a comprehensive and integrated system of care for those who serve and their families. These conversations consistently focus on the need for collaboration, coordination, and communication among all organizations, agencies, and departments. And while everyone seems to agree that a concerted effort is required to coordinate federal, state, local, and community-based efforts, implementation of such an effort has been difficult to achieve.

Fortunately, several efforts seem to be under way across the country to tackle this most difficult challenge, and many of the leaders of these efforts are now working to connect these critical models to one another. I am proud of my association with and contribution to one of these efforts, the Community Blueprint Network.

## Community Blueprint Network

As Adm. Mullen noted so many times during his tenure as chairman of the Joint Chiefs of Staff when he coined the phrase "The Sea of Goodwill," there is universal public support for veterans, service members, and their families. Federal, state, and local governments, as well as nonprofit, private, and philanthropic resources and services, have grown and improved in communities across America. But supporting veterans, service members (active duty, Reservists, and National Guardsmen), and their families is about ensuring that communities are prepared to organize the resources, services, and support that help those in the military community lead healthy, successful lives. There remain significant gaps in services and a great deal of untapped potential for providing effective and sustainable care through focused planning and coordination.

To address these needs by leveraging the combined experience and expertise of collaborating organizations, volunteers from several leading nonprofits created an initiative and an online tool called the Community Blueprint, which is already helping local community leaders assess and improve their community's support for veterans, service members, and their families. The initiative is now formally being administered as the Community Blueprint Network Initiative by Points of Light Institute and is being implemented in several communities across the country. Plans for a national launch of the initiative are currently under way.

The Community Blueprint Network Initiative includes several key components:

- The Blueprint assists each community in assessing and fulfilling its role in supporting those who have borne the price of battle—veterans, service members, and their families.
- The Blueprint helps community leaders and citizens gain a more precise and locally focused understanding of how they can contribute to an improved support matrix including offering

opportunities for civilians, veterans, service members, and their families to volunteer and serve alongside each other.

- The Blueprint provides community leaders with information about the primary challenges returning veterans, service members, and their families may face.
- The Blueprint offers advice based on practices worthy of replication and experience about setting priorities, adopting strategies that work, and building coalitions to implement those strategies.
- The Blueprint is user-friendly and focuses on eight key areas: Behavioral Health, Education (both K-12 and higher education), Employment, Family Strength, Financial Management and Legal Assistance, Housing Stability and Homelessness Assistance, Reintegration, and Volunteerism. Under each of these impact areas the Blueprint offers up to six topics that stakeholders (community leaders, civic leaders, VSOs, etc.) can address. For example, under Higher Education, stakeholders will find the topic "Welcome and Integration: Strategies to identify and support military-connected students and families." Each topic will have tabs for additional information and resources.
- The Blueprint provides communities with a forum to learn and share best practices and to bring key stakeholders and community leaders together to collaborate behind the common goal of assisting our nation's veterans, service members, and their families.

In the summer of 2010, the Bristol Myers-Squibb Foundation (BMSF) approached Give an Hour<sup>TM</sup> with an interest in funding our efforts to provide free mental health care to returning troops and their families. After learning of our involvement in the Community Blueprint Network Initiative—and the need for a more comprehensive and integrated system of care to support those who serve in communities across the country—BMSF agreed to fund Give an Hour<sup>TM</sup> to develop a model that can be used to assist communities in their efforts to organize support for military personnel, veterans, and their families. The result was a two-year grant for a demonstration project in two communities: Norfolk, Va., and Fayetteville, N.C. This grant is enabling GAH to support, assist, coordinate, and convene community stakeholders as we develop a model that will be shared with the national Community Blueprint Network Initiative and with communities across the country involved in this critical endeavor.

Thus far, we have been impressed with and pleased by the response to our efforts in Norfolk and Fayetteville. Multiple community-based organizations have joined our meetings and our working groups, and we have received assistance from colleagues at the Department of Defense so that we now have developing relationships with installations and military partners in each of these communities. We have begun implementing programs and events in each community to highlight what we are doing in each of the eight areas of focus within the Blueprint.

On November 17 Give an Hour<sup>TM</sup> joined with the consulting firm Booz Allen Hamilton to host a summit in Fayetteville, on the needs of women veterans. The event was well attended by stakeholders and community leaders, including the mayor and officials from the local VA. This summit resulted in the development of three initiatives focused on ensuring the health of women veterans in Fayetteville and the commitment of those who attended to ensure the implementation of these initiatives. Give an Hour<sup>TM</sup> will continue to work with Booz Allen Hamilton over the

coming months to support and coordinate these and other initiatives in this community as part of our work on the Community Blueprint demonstration project.

Clearly, the development of the Community Blueprint Network Initiative provides an unprecedented opportunity for all federal and state agencies and departments to coordinate with community-based organizations and efforts to ensure that military personnel, veterans, and their families receive the type of comprehensive and coordinated care they need and deserve as they move forward in their lives as healthy Americans. We look forward to joining our efforts with those of the Department of Veterans Affairs in this worthy effort.