

U.S. War Veterans of Iraq and Afghanistan Struggle for Survival ...on the Home Front

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The problems facing veterans of the U.S. occupation in Iraq and Afghanistan are manifold. Of the more than 1.6 million troops deployed so far, a third of them have been held to serve two or more tours. As a result, not only are an increasing number of troops coming back with amputated limbs, skin diseases, brain injuries and mental health problems, but many of these young service men and women – who often join the army directly after high school – are now struggling to find employment or pay tuition for higher education.

Recognizing the medical, economic and legal assistance that veterans and their families urgently need, a number of independent volunteer organizations are taking action in the face of this crisis. Several veterans' groups in different parts of the country have asked to be included in CVSA's catalogue of volunteer opportunities — *INVEST YOURSELF* — in order to reach more volunteers. They have recounted the horrors of these wars, which remain with soldiers and their families even after they return home. They have alerted us to the specific needs of veterans that this government is not meeting, and to some of the groups that are advocating on their behalf.

The first group to contact CVSA regarding the obstacles facing veterans who need health care was the Disabled American Veterans (DAV), a non-government agency founded shortly after World War I that provides free assistance to veterans in obtaining the benefits they are entitled to. Chad Moos, the Volunteer Coordinator of the DAV explained that in the 1980s, travel assistance for sick and disabled veterans to and from Veteran's Administration (VA) centers for medical treatment was cut from the federal budget by Congress, leaving many low-income veterans living far away from VA centers having to make a choice between sacrificing a portion of their limited incomes in order to receive treatment or trying to deal with illness on their own. In response, the DAV created a network of volunteers willing to drive sick and disabled veterans to and from VA hospitals and clinics at no cost. This, however, is just one of the many threats to survival the current generation of veterans face on their return home.

Most Veterans Now Face High Unemployment or Low Wage Jobs

The Wall Street Journal reports that the percentage of veterans without jobs jumped from 10% in 2000 to 23% in 2005. Of employed veterans aged 20 to 24, half earn less than \$25,000 a year and they are unemployed at a higher rate than civilians their age. One of the reasons they are denied jobs is the very thing many had hoped to overcome when they joined the military: lack of educational opportunities and lack of technological skills. Many were recruited directly after high school graduation, and have gained no further skills or experience other than combat training before returning to civilian life.

Many reservists who joined under the idea of the "citizen soldier" who serves only one weekend a month, expected to gain job training and access to higher education so they would be in a position to pursue a career while at the same time serving their country. However, in the last four years, these reservists have been largely deployed and redeployed into full-time active duty, losing the jobs they had or the businesses they ran, and even suffering the break up of their families. The Labor Department reported it is receiving a significant increase in job complaints filed by reservists who expected to keep their civilian jobs while they served in the reserves. In 2006, complaints were filed by 1,357 reservists who had been refused their old jobs after

returning from tours of duty in Iraq and Afghanistan, most often because they were mandated to stay at post longer than originally expected.

Another major reason employers are now reluctant to hire veterans is the likelihood that they suffer from post-traumatic stress disorder (PTSD) or other mental health and psychological problems that may impede their work. People with PTSD often relive traumatic events, experiencing hallucinations, nightmares, sleep loss, severe anxiety, and depression. Sadly, 47% of veterans suffering from symptoms like these do not seek medical treatment, fearing that it will reduce their chances of employment or career advancement.

The National Coalition for Homeless Veterans (NCHV) has helped over 1,200 homeless veterans in the last year. Other groups aiding homeless veterans say this number reflects only a fraction of Iraq and Afghanistan veterans who are now homeless. According to NCHV, Vietnam veterans who became homeless did so after spending five to ten years trying to adjust to civilian life, but veterans of the current wars are ending up with no place to live after only 18 months.

Living with Serious Injuries

The Rand Corporation, a nonprofit research institution that recently published an extensive survey of military findings, estimates 300,000 troops from Iraq and Afghanistan are suffering from PTSD or major depression (full report available at <http://veterans.rand.org>). Along with PTSD, the signature wound of the wars in Iraq and Afghanistan is traumatic brain injury (TBI), which results from trauma caused by explosions that occur close to the soldiers. The Rand Corporation estimates that 320,000 troops suffer from these injuries. They report that “the effect of traumatic brain injury (TBI) is still poorly understood” and scientists are unsure whether TBIs cause lasting impairment. What is known is that rates of substance abuse, homelessness, and suicide are all higher among those suffering from TBIs.

By 2020, 20% of All Veterans Under Age 45 Will Be Women

The VA, responsible for providing disability benefits and health care to returning troops, not only has to treat the hundreds of thousands of veterans from all past service including the thousands of troops recently injured in Iraq and Afghanistan, but is also charged with accommodating changing demographics among veterans. Women now make up 15% of U.S. active duty forces – 11% of the forces in Iraq and Afghanistan – and are the fastest-growing veteran group. More than 191,500 women have served in the military in the Middle East since 2001. Yet, *The New York Times* reports that only 22 of the VA’s 153 department-run hospitals have women’s clinics with a full range of medical and psychological services. The same article in May 2008 reported that nearly a third of female veterans report being sexually assaulted or raped while in the military. Those sexually assaulted are also nine times more likely to show symptoms of PTSD. The VA has only six in-patient PTSD programs nationwide specifically geared towards women and their particular medical and psychological needs.

The Difference Between Promises and Reality

Iraq Veterans Against the War (IVAW), a group founded in 2004 at the annual convention of Veterans for Peace, informed CVSA about some of the differences between promises made by recruiters and actual eligibility requirements for college tuition and employment benefits following completion of military service. Service members who want to receive benefits provided through the new “Post-9/11 Veterans Educational Assistance Act” of 2008, which is an update of the 1984 Montgomery GI Bill, can receive from \$2,680 to \$6,700 a year for tuition for those serving active duty after September 11, 2001. To be eligible for the program however, one must enroll in it within three days of starting active duty, and cannot enroll at any later time. When a GI enrolls, he or she is agreeing to a \$100 per month deduction from their pay for the first 12 months on active duty. These funds deducted for the program are non-refundable whether the individual uses the benefits later or not, and the monthly deduction

cannot be terminated after enrollment. Other factors that can make a service member ineligible even after he or she has enrolled and has paid into the program include receiving anything less than an honorable discharge.

Furthermore, to receive full tuition benefits, one must serve no fewer than three continuous years of active duty. With each six-month period less than three full years of active duty, the percentage of tuition funds for which the GI is eligible drops by 10%. IVAW reports that “so many servicemen are disqualified from getting that money that the military makes money from the program.” According to IVAW the military made a \$72 million profit from this program last year due to the low percentage of GI’s who actually receive full benefits.

The GI Rights Hotline, listed in *INVEST YOURSELF*, is also familiar with the crisis men and women experience when they are confronted with the difference between what they were led to expect when they joined and the reality once enlisted. The Hotline deals with problems related to amount of pay, access to medical care, nature of the combat or other duty, terms of service and problems with discharge status. It provides information to members of the military about discharges, grievances and complaint procedures, as well as other rights under military law. The GI Rights Hotline reported to CVSA that out of the 30,000 to 40,000 phone calls they have received each year since 2004, the majority of the callers are seeking to get out of the military. The volunteer counselors manning the phones provide information, make referrals, send out materials and assist callers in submitting paper work to their military command. The Hotline has operations in many cities around the country and always needs volunteers.

GI Suicides on the Rise

For service men and women alike, suicide is becoming an alarmingly prevalent course of action while on active duty as well as back home post discharge. In 2007, 115 active duty soldiers killed themselves in Iraq and Afghanistan, the highest number of suicides since the Army began to report such figures in 1980. An additional 196 service men and women deployed in these countries attempted suicide and overall there were 935 attempts reported in the Army at home and abroad in 2007. As of May 30 there have been 38 deaths in 2008 confirmed by the military to be suicides and a dozen more under investigation. The director of the National Institute of Mental Health, Dr. Thomas Insel, says that the number of suicides among veterans of these wars “could trump combat deaths,” a possibility that is unprecedented. While the figures for suicides among soldiers of this current so-called “war on terror” who have returned home are unknown, 18 veterans overall kill themselves each day in the U.S., a number that vastly exceeds civilian suicide rates proportionately.

Veterans Fight Back

In 2007, the groups Veterans for Common Sense (VCS) and Veterans United For Truth (VUFT) jointly filed a class-action lawsuit against the VA demanding that they immediately treat veterans who show signs of PTSD and are at risk of suicide. In April 2008, their suit was heard by the Federal District Court in San Francisco. Dr. Frances Murphy, a former VA employee who helped draft the Mental Health Strategic Plan in 2004 — a blueprint for an overhaul of the VA to expedite the benefits process, involve veterans’ families in rehabilitation programs and initiate a system to keep track of suicidal veterans — testified that few of these changes had been followed through with. A few days after Dr. Murphy spoke about the failure to enact these plans at a 2006 conference in Washington, she was fired from her position.

The San Francisco trial revealed the barriers that veterans must overcome in order to be treated. While the VA reports that the average processing time for all claims is an already discouraging six-months, Michael Walcoff, a top VA official, admits that the number is significantly higher on disability claims (the six-month figure includes pension claims, which can take less than an hour to file and process, significantly lowering the statistical average and

giving a false picture of how long other claims take to process.) For example, veterans filing for PTSD disability often wait longer than one year to hear back on their initial claim.

Moreover, the military is telling many soldiers who show symptoms of PTSD that they have a “personality disorder” or another “pre-existing condition” and then giving them a dishonorable discharge; despite the fact that these troops had been tested before enlisting and were not diagnosed with any such mental problems then, or in the regular check-ups throughout their period of service. The Public Broadcasting System (PBS) weekly investigative reporting television program, NOW, reported in its broadcast on June 13 that the military has discharged over 6,000 soldiers on this basis.

For these soldiers and thousands of others, applying for PTSD disability benefits from the VA will involve first filing appeals about their status, and then filing claims for their medical benefits, which have already been denied the first time around because of their discharge status. This appeal process takes an average of four and a half years. The result of such delayed processing is devastating; 1,497 veterans died waiting to receive their benefits in the six months preceding March 31.

In his statement on the case brought by Veterans for Common Sense and Veterans United For Truth, Senior Federal District Court Judge Samuel Conti called the VA’s performance “troubling” and affirmed that the veterans seeking benefits have injuries that “are anything but conjectural or hypothetical.” However, he ruled, “The remedies sought by the Plaintiffs... would call for a complete overhaul of the VA system, something clearly outside of this Court’s jurisdiction.” The two veterans’ groups have filed an appeal, but with so many bureaucratic impediments to fair treatment, it is clear that veterans need help right now — help that isn’t going to come from the government.

“Tell the Soldiers the Truth ...”

Retired veteran Waddell McGee, who was first drafted into the Vietnam War in 1969, started the American Veterans Alliance (AVA) 25 years ago while on active duty with the U.S. Army through contact with people in the communities near the military bases at which he was stationed. Starting out in New Orleans, AVA opened numerous chapters in various states where Waddell had been assigned and has now established its main headquarters in Miami. In the same building, McGee also directs the newly formed affiliate group, Society of Hispanic Veterans. He has asked CVSA to include their volunteer needs in the next issue of *INVEST YOURSELF*.

The AVA organizes people and resources to provide veterans and their families various kinds of support including counseling, advocacy, assistance in navigating through the government system to obtain information and benefits, help with job hunting and finding housing, job skills training, a burial benefit and other needed services, including aid to children of homeless veterans.

When CVSA asked McGee what he would say if he had the attention of Congress and the President, McGee’s response was unequivocal and immediate: “Just tell the soldiers the truth. Give them what you promise them. We put our lives on the line because you said to do that as our Commander-in-Chief. And if we are injured mentally or physically, you should be there to take care of us and our families.”

Building Community Support

The Soldiers Project is a non-profit organization formed in 2004 that is led by independent concerned citizens. Founded by Dr. Judith Broder through the Los Angeles Institute for Psychoanalytic Studies, The Soldiers Project has assembled an all-volunteer staff of over 100 licensed mental health professionals who provide veterans and their families with free counseling. The Soldiers Project maintains chapters in Los Angeles, Seattle, Chicago, and New York. Therapists for the group have studied the effects of PTSD and TBI and have a compassionate approach to the impact these syndromes have on veterans and their families.

Dr. Broder spoke with CVSA about why so many veterans from this war in particular are suffering psychological injuries and what we should do on the community level to address this crisis. She says that the exposure to stress, coupled with separation from family and friends, is more severe in these wars as troops are deployed to Iraq and Afghanistan two, three or four times. In addition, she points out that 40% of the troops are reservists and National Guard members, deployed with little warning and discharged with insufficient counseling.

In her article “*The Hidden Wounds of War,*” published in the bi-monthly journal of the L.A. County Psychologists Association, the L.A. Psychologist, Dr. Broder provides a survey of the effects of psychological injury on veterans, their families and their communities. She notes the increasing rates of suicide, addictive behavior, family violence, divorce and auto accidents among veterans, and emphasizes that the health problems returning service members face affect all those around them. To this end, The Soldiers Project educates local physicians, community groups, churches and synagogues about military life and the kind of support returning soldiers need. The Soldiers Project will also be included in the upcoming edition of *INVEST YOURSELF*, as they welcome more volunteer therapists to join them and need volunteers who can help with community outreach and administration of their referral and advocacy network.

While advocating support for veterans on the community level, Dr. Broder emphasizes that the VA provides medical treatment that cannot be matched elsewhere. The Soldiers Project always refers those suffering from Traumatic Brain Injury to the VA, where the group has established a network of caregivers and social workers they are familiar with and can refer patients to with confidence in the care they will get.

\$550 Billion Spent on the Wars... Not on the Soldiers

While “Support Our Troops” has been a popular government slogan, the scope and urgency of the unmet needs of veterans and their families show that objectively the government has held back its support of the troops. Congress and the Executive Branch have so far spent over \$550 billion on the wars in Iraq and Afghanistan while failing to deliver the promised benefits of education, job training and medical care to the men and women who they send into the conflict.

CVSA is calling upon its member organizations to consider ways they can extend their aid or organize to help veterans and their families in their own communities. For those interested in volunteering, there are dozens of veterans groups across the country that need volunteers who are committed to helping returning service members find medical care, counseling, employment and community support. They need all the help they can get, so please see the sidebar on page 19 for contact information on the groups mentioned in this article, as well as other organizations CVSA has spoken to that can be contacted to assist veterans and their families.

Editor’s note: Kareem Estefan is a recent graduate in literature of New York University and volunteered all summer of 2008 with CVSA.