

KANSAS MENTAL HEALTH COALITION

.....*Speaking with one voice to meet the critical needs of people with mental illness*

Mental Health Needs of Returning Veterans and Families

Position: The Kansas Legislature should ensure that Service Members, Veterans and Families are aware of and have access to adequately funded behavioral health treatment in their local communities for post-traumatic stress and other behavioral health issues.

The Problem: Many veterans are dealing with injuries that are not visible but are very real—mental health and substance use disorders, traumatic brain injury, and post traumatic stress (PTSD). These invisible injuries impact veterans, their families, children, employers and communities. Service Members often don't know where or how to access treatment and care in their local communities. Kansas Department of Corrections inmates self report that 66% have a mental illness.¹

Veterans are struggling with PTSD, depression, suicidal thoughts and substance use disorders because of the trauma they've encountered. Veterans are homeless and incarcerated due to their mental illnesses.

Why this matters: More than 26% of returning soldiers from Iraq and Afghanistan reported mental health and behavioral disorders. The suicide rate among Army soldiers—active, Reserve and National Guard—was nearly double the national rate in 2012. Female veterans have experienced sexual trauma at the rate of 23-33%, and the suicide rate for female veterans is triple that of non-veteran females. Eleven percent of Kansans in prison and 30% of Kansans who are homeless are veterans—many because of their mental illness.

Veterans in Kansas may not know that the Veterans Administration (VA) will start treatment for them for up to 5 years after any injury/incident took place. They may also be eligible under the CHOICE Act of 2014 to seek treatment in their communities, such as at a CMHC, if they live farther than 40 miles from a VA facility or cannot be seen within 30 days. However, there are a number of veterans who are not eligible for VA services, given the nature of their discharge or conduct during service, and there are those who end up in the corrections system.

The bottom line: Our nation owes it to our service members and veterans to treat their wounds of war, including mental health and substance abuse. The Coalition encourages the VA to contract with local providers to serve those veterans who live too far from VA centers or must wait too long for treatment. The Coalition urges the Kansas legislature to ensure access to treatment for veterans who are homeless or incarcerated because of their mental illness.

Need more information? Drill deeper into this issue on the back of this page.

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The rest of the story about the mental health needs of returning veterans and their families.

Veterans in Kansas live in every county and every community. Kansas' overall population has between 8-9%, about 180,000, veterans and service members. They reside in all regions of the state. Many have no access to VA services because of their rural, remote locations—since the VA has very limited physical locations in the state.

Veterans may also be eligible under the CHOICE Act of 2014 to seek treatment in their communities if they live farther than 40 miles from a VA facility or cannot be seen within 30 days. However, many veterans are not eligible for VA services due to their discharge category or conduct during service. These Kansans can seek services at a Community Mental Health Center or call any time day or night. By statute, CMHCs are mandated to serve any Kansan regardless of their ability to pay, and can serve veterans and families regardless of the nature of discharge or conduct during service.

Community based treatment and care for our veterans is the best answer for their pressing mental health issues—for veterans, their spouses, and their children who may struggle with reintegration into civilian life.

Similarly, it is important for mental health professionals to have military-specific training to gain some basic information on interaction with military members, families, and children. Providers and stakeholder agencies should take that extra step in preparation to treat and support veterans, military members and families. There are several resources on military culture and native cultural awareness at <http://www.kdads.ks.gov/commissions/csp/behavioral-health/providers/veteran%27s-services>

Legislative Call to Action

- Support efforts in Congress to open access to treatment for veterans, such as the CHOICE Act of 2014 and Senate 207 “Forty Mile Bill.”
- Urge the Veterans Administration to contract for mental health services in communities where they are not physically located or do not have mental health treatment units.
- Recommend implementation of an online resource directory with behavioral health services, supports, and resources available to service members, veterans and families. The Missouri Division of Mental Health developed and implemented such a system with great success. See <http://dmh.mo.gov/veterans/> (as identified by the Governor’s Behavioral Health Services Planning Council/Veterans Subcommittee.)
- Urge the Kansas legislature to ensure access to treatment for veterans who are homeless or incarcerated because of their mental illness.

ⁱ Only 8% of inmates self-report their status as a Veteran notwithstanding studies in other states that self-reporting is not reliable. 84% of Veterans in KDOC with a mental illness have been convicted of a violent crime. County jails do not capture any data on Veterans status.