WEST VIRGINIA MILITARY STUDY

Presented to the 2013 Spring Forum
National Conference of State Legislators
Military and Veterans Affairs Task Force

May 4, 2013
Denver, Colorado
2008 & 2012 West Virginia Legislature Veterans Studies
Motivation for the West Virginia Military Studies

- Public and Legislative concern for active duty personnel and Veterans
- Knowledge needed to better inform legislation and regulatory policy
- Joint efforts needed to improve coordination to improve outcomes for Veterans, reservists, National Guard, and active duty personnel
The West Virginia Military Study

• West Virginia Legislature/Joint Committee on Veterans Affairs commissioned studies 2008 and 2012
• Contracted to WVU School of Social Work in 2008 and Atlas Research in 2012
• Goal: to gain information on a spectrum of life needs across military populations to better inform legislative and regulatory action
Atlas Research

• Service-disabled Veteran owned small business by OEF Veteran
• Based in Washington, DC, with operations in West Virginia, North Carolina, and North Dakota
• Past Performance with VA (including VAMCs in WV), Department of Defense, Department of Health and Human Services, private sector
• Partnering with West Virginia University Researchers
West Virginians and Military Service

• 1 in every 10 people are Veterans and/or active duty, guard and/or reserves
• West Virginia is predominantly a rural state, 74% of population lives in communities under 2,500
• 77% of Veterans are enrolled in VA for health and other benefits
• 4 VAMCs, 10 CBOCs, 9 Vet Centers, 1 VBA Office
West Virginia Veteran Population

• 180,000 Veterans in 1.8 million population
• 130,000 (72%) are wartime Veterans (2009) 74.8% combat Veterans (2007)
• 45,500 are peacetime Veterans
• 61,000 Vietnam Conflict Veterans
West Virginia Veterans by Age

- 20-29: 5000
- 30-39: 12000
- 40-49: 40000
- 50-59: 40000
- 60-69: 55000
- 70-79: 30000
- 80-84: 8000
- 85+: 5000
Overview of 2008 Study

Who: 1,000 Veterans of Recent Conflicts (OEF/OIF, GWOT)
   • Recruited through WV Division of Veterans Affairs
   • Hard copy mailed survey to 6,000 Veterans

Focus: Impact of military service and combat exposure
   • Mental health, personal and family functioning, service utilization

Findings:
   • 40-50% rate of PTSD and depression (higher in rural areas)
     • Additional impact of interpersonal violence
   • Impact on Veteran, family relations, children
   • 30-40% VA contact (more distressed → seeking fewer services)
Overview of 2012 Study

**Who:** 1,500-2,000 Veterans of *All Eras and Conflicts* (Now back to WWII and earlier)

**Focus:** Impact of military service and combat exposure *across eras and ages*

- *Life-long* reintegration, adjustment, functioning, and satisfaction
- Education, employment, retirement, disability, civilian stressors
- Veterans, partners, children, parents
- Mental and physical health status, personal and family functioning,
- Barriers and facilitators, service and resource utilization

**Findings:**

- Rates of PTSD, depression, TBI, suicide, substance use
  - Explicit assessment of interpersonal violence, MST, life stressors
- Impact and resilience: Veteran, family, children
- Service seeking: Which services for what purposes with what impact
- Resource needs: Financial, legal, medical, housing, employment, etc.
2012 Study Design

Participant Recruitment

– Worked closely with DVA who provided mailing list to third party
– Mailed/distributed postcards, radio/TV spots, announcements/ads, etc.
– 1,200 completed by Veterans of all eras
– If computer access a barrier telephone and paper surveying was offered
– Provided gift cards via drawing of those who entered a separate identification form
Study Design

Survey Content

- Demographics: self and family, significant others and children
- Education, employment, service
- Family impact
  - Behavior, school, work, marital satisfaction, mental health
  - Perspective on Veteran
- Service and deployment
  - Combat exposure
  - Other military and life stressor
  - More specific sexual and physical assault items
- Mental health (used standard scales)
  - PTSD, depression
  - TBI, substance use, suicide
  - Family mental health
The West Virginia Legislature is reaching out to

WEST VIRGINIA’S MILITARY: PAST AND PRESENT

Please complete the Service Members’ and Veterans’ needs survey at www.wvmilitarysurvey.com or 1-855-299-6605.

Postcard Front
The West Virginia Legislature is reaching out to

WEST VIRGINIA’S MILITARY
Past and Present Veterans and Current Military:
All Eras, All Ages, All Services

We need to hear from YOU so we can meet YOUR needs!

Please participate in the 2012 West Virginia Military Survey. We are building on the successful 2008 survey that led to multiple changes in state legislation. We want to know the needs of our Service Members and Veterans in the areas of health, work, education, family, retirement, and benefits.

Completing the survey will give you a chance to be entered into a drawing for a VISA cash gift card. (One $500 gift card, five $100 gift cards, and thirty $50 gift cards will be given away.)

Please complete the survey online at:
http://www.wvmilitarysurvey.com
It should only take 20-30 minutes to complete the survey.

Or, call 1-855-299-6605 toll-free if you would like to schedule a telephone interview, need assistance with the online survey, or have questions.

Thank you for your service and for participating in this survey!

Questions regarding this survey may also be directed to the WV Department of Veterans Assistance (866-WV4-VETS).

All West Virginia Veterans and Service Members are eligible to participate. Please pass this card along to fellow West Virginia Veterans or Service Members.
General Findings

• Study respondents represented state Veterans in general (average age 54, youngest: 19 oldest: 94)
• Higher suicide risk (22% or 1 in 5 respondents) reported sadness, depression, thoughts of suicide, other mental health diagnosis (17% reported PTSD acute stress)
• 10% reported being homeless at some point as an adult
• Alcohol is past 30 days 48% lower than 68% for WV
• Smoking 21% lower than 29% for WV
• 43% reported some level of compensated disability by VA
Respondents by Age Groups

Figure 1. Age Groups

- >65: 23%
- 18 - 39: 20%
- 60 - 65: 19%
- 40 - 49: 20%
- 50 - 59: 18%
Military History

Figure 7. Service in Conflict Areas by Age Group

Age Group

Percent

18 - 39  40 - 49  50 - 59  60 - 65  > 65

OEF  OIF  Balkans  Gulf War  Vietnam  Not in Conflict Area
Income and Financial Concerns

Figure 3. Income and Financial Concerns

- **Percent**
- **Mean Worry Rating**

- **Age Group**: 18-39, 40-49, 50-59, 60-65, >65

- **Income Levels**:
  - $<10,000
  - $10-25,000
  - $25-50,000
  - $50-100,000
  - $>100,000

- **Worry Rating**
- **Housing: Afford**
- **Housing: Problems**
- **Mean Worry Rating**
Exposure to Stressors

Figure 8. Military and Civilian Stressor by Age Group

- **Conflict Area**
- **Childhood**
- **Adulthood**

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<th>Age Group</th>
<th>18 - 39</th>
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Depression, PTSD, and Suicide Risk

Figure 9. Mean Scores and Percent in Clinical Range for Depression, PTSD, and Suicide Risk, by Age Group

- Clinical: CESD
- Clinical: PCL
- Clinical: SBQR
- Score: CESD
- Score: PCL
- Score: SBQR
Quality of Life

Figure 4. Quality of Life by Age Group

Mean Rating

Age Group

18 - 39  40 - 49  50 - 59  60 - 65  > 65

OVERALL
Physical Health
Mental Health
Sleep
Family Relations
Social Support
Recommendations from Study Findings

- Designed for implementation by Committee leadership
- Directed to Legislative and/or Executive Branch as appropriate
- Includes recommendations for regulatory actions under existing legislation or authorization
Recommendations

• **Income and Financial Concerns:**
  – Re-open combat/overseas bonus program

• **Addressing Military-Friendly Colleges and Universities:**
  – Study the impact of military-friendly colleges and universities in the state - include retention and graduation
  – Inventory state and federal funds received by state schools to provide military-friendly services and the need for any increase of such funds

• **Addressing housing concerns**
  – Additional support to State DVA for case managers to provide wrap around services
  – Direct DVA to work with VA Homeless Coordinators to increase the number of HUD-VASH vouchers for rural areas
Recommendations

• **Addressing mental health concerns and suicide risk**
  – Support DVA to hire 1 additional social worker per region trained in military health and mental health concerns and suicide prevention
  – Additional support to State DVA for case managers to provide wrap around services
  – Support for training of clergy and other community based support persons on health and mental health issues of Veterans and specific training in signs and prevention of suicide
  – Direct DVA to work with VA Homeless Coordinators to increase the number of HUD-VASH vouchers for rural areas
Recommendations

• **Addressing accessing to health care**
  – Support a study of free clinics for the numbers of Veterans and homeless Veterans served to see what more is needed for populations and referral to VHA for care
  – Utilize PARIS database to gage numbers of Veterans on state Medicaid who may be eligible for VHA and other VA benefits
Value of Studying Military Personnel and Veterans

• Increase policy-makers’ awareness of specific needs and issues
• Potential to open up new avenues for collaboration
• Potential to improve resource allocation
• Gain considerable public awareness and support across the board
• Ultimately improve outcomes for Veterans and military personnel through more informed use of state and federal resources
THANK YOU

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