



California Association of Veteran Service Agencies

★ *Training, Housing & Counseling for California Veterans* ★

Swords to Plowshares ★ New Directions ★ Vietnam Veterans of California, Inc. ★ U.S. Veterans Initiative ★ Veterans Village of San Diego

State of California
Little Hoover Commission

Public Hearing on California Veterans Services

Tuesday, January 22, 2013

State Capitol, Room 2040

Sacramento

Testimony of Keith Boylan, Government Relations Liaison
California Association of Veteran Service Agencies

I would like to start by thanking the Little Hoover Commission for affording me the opportunity to testify this morning. My name is Keith Boylan and I serve as the Government Relations Liaison for the California Association of Veteran Service Agencies (CAVSA). Founded in 1995, CAVSA is a consortium of five non-profit veteran service providers working in partnership to address the needs of California's veterans. CAVSA's geographic diversity facilitates the delivery of direct services in both urban and rural regions throughout the state, stretching from Eureka to San Diego. CAVSA partners include Veteran Resource Centers of America, U.S. VETS, Veterans Village San Diego, New Directions, and Swords to Plowshares.

CAVSA is dedicated to ensuring that veterans of all eras have the understanding, tools, and support from their communities to provide for a successful transition back home. For over 30 years, CAVSA agencies have forged the path for veteran services by creating innovative delivery systems that have consistently received national recognition as best-practice models. Among the services provided are permanent, transitional, and emergency housing - employment training, placement, and certification programs - Health and wellness care - advocacy and claims assistance - small business and entrepreneurial support.

California is home to the largest veteran population in the country with an estimated 30,000 veterans returning to the state each year, a trend which is projected to continue for the next ten years. Veterans are disproportionately represented among California's homeless

population, and experience employment challenges far greater than their peers. Veterans are suffering mental health issues, including Post-Traumatic Stress and Traumatic Brain Injury at alarming rates, and are also reported to have an increased risk of substance abuse, domestic violence, and suicide.

Veterans have historically experienced homelessness at a rate much higher than non-veterans in California. Currently veterans account for only 9-12% of California's population, yet make up approximately 35% of the states homeless population. Female veterans are twice as likely to encounter homelessness as their non-veteran peers. Post 9/11 veterans are becoming homeless at faster rates than prior-era veterans and the numbers may be even higher due to the fact that many recently separated veterans report "couch surfing" as an alternative to being without shelter and this practice is rarely reflected in homeless statistics.

With jobless rates across the country remaining at all time highs, veterans face an increasingly difficult challenge transitioning into the job market. In 2011, the unemployment rates for recently separated veterans age 18-24 was 30.2%, nearly double that of their non-veteran peers at 16.1%. Although veterans offer a unique set of skills, experience, and leadership abilities developed throughout their military service and often times under the harshest of conditions, the elevated unemployment rate highlights the difficulty returning veterans face in their efforts to transition to civilian careers. The significant barriers facing veterans as they attempt to enter the civilian job market are the lack of military cultural competency among human resource professionals, the inability to effectively translate their skill set in civilian language, the difficulty quantifying military education and advanced training, the cross-credentialing and transference of certification and licensure achieved in the military, and competing with their non-veteran peers who have more civilian work experience and networking history in the job field.

In an attempt to prepare service members for separation, the military's Transition Assistance Program (TAP) had been offered in the weeks prior to separation. The TAP was the sole resource available to service members and was tasked with assuring they are job ready upon separation. Since its inception in 1982, TAP delivered a three day course for service personnel focusing on interviewing skills, resume writing, and accessing state agency assistance from the Employment Development Department. There were however some inherent problems associated with the program. The program was not mandatory for all personnel so many of the veterans we interacted with never received the TAP training. Of those veterans who attended the course, a common complaint was the abundance of information regarding employment benefits and services delivered at rapid fire pace. The course content and pace was often referred to as "drinking from a fire hose" by veterans. Other veterans have candidly reported that the timing of the course made it particularly difficult to digest the materials. Many of the service-members attend the course as the last step in their separation process and understandably approach the course with a check-the-box mentality. Often times, their focus is getting home and reuniting with their family and friends. It is only after they are home and experience difficulties finding work, begin suffering health effects associated with their service, or encounter some other form of transitional barrier, that they find value in the TAP.

In 2012, the TAP program was restructured and is now called "Transition: Goals, Plans, Success", or "Transition GPS". The course is now a five day mandatory course for all separating service members including the National Guard and Reserve components. The Department of Labor developed a new 3-day employment block covering resume writing, interview skills, and a job search with the final 2 days focusing on benefits, health, and family. The program was rolled out as a pilot program at various sites throughout the country, including Miramar Naval Air Station in California and will be handed over to private contractors in March of 2013. Due to plans to privatize the training program, attempts to receive the course curriculum for review have been unsuccessful. As veteran service agencies, we find it valuable to review the program to better strategize our outreach and service efforts based on any gaps in information we may identify in the program.

California veterans who have suffered injuries during their service in the military, whether they are physical, cognitive, or emotional are facing additional transitional barriers. Unlike the Vietnam War where nearly 60,000 service members were killed, the U.S. has suffered just over 6,000 deaths in Iraq and Afghanistan. However, the ratio of injured to killed is 16 to 1, whereas during the Vietnam War it was 5 to 1. Veteran deaths have been minimized with improvements to body armor, medical technology, and evacuation techniques, but this means an increased number of veterans separating are suffering significant physical impairment and disability. Veterans are also reporting Post-Traumatic Stress at rates significantly higher than those veterans of past era. Nearly 35% of OEF/OIF veterans treated at VA medical centers have been diagnosed with PTS, and 65% have been treated for mental health issues including anxiety, depression, and suicidal ideation. The sharp increase in PTS diagnosis at the Department of Veterans Affairs medical facilities is thought to be due to increased deployments, longer deployments, and the reduction of stigma attached when reporting mental health injuries. The extensive use of Improvised Explosive Devices in Iraq and Afghanistan has also led to increased reports of veterans suffering Traumatic Brain Injury. An estimated 30% of OEF/OIF veterans have suffered a TBI. It is believed the estimated number of veterans experiencing a TBI is much higher, however unless severe injury occurs, moderate and mild TBI's frequently go undiagnosed. Often veterans suffering a TBI are diagnosed with PTS because certain symptoms may mimic those of PTS.

To add insult to injury, veterans who are living with significant injuries and impairments due to their service to our country are fighting yet another battle when attempting to access their benefits and receive compensation. The Department of Veterans Affairs Regional Offices (VARO) in Los Angeles and Oakland have been identified as two of the worst performing regional offices in the country. The Department of Veterans Affairs recently reported that there are nearly 1 million back-logged claims nationwide with nearly 60,000 awaiting adjudication in the Oakland VARO alone. Claims that are expected to take 120 days are reported to be taking approximately 370 days. Veterans are often denied services during this period resulting in an exacerbation of their condition, and often leading to ancillary complications.

My testimony here today is only a brief overview of the myriad of transitional challenges that veterans throughout the state are facing. I appreciate the opportunity to provide my input to the Commission and look forward to the opportunity to explore these issues at length in the weeks to come.