



On behalf of the Veterans Outreach Center, Inc., and the men and women we serve, I want to thank Governor Spitzer for the opportunity to speak at these public hearings. My testimony today will highlight the need for as well as the efficacy of the VOC's programs and services – and how the VOC, through its proven track record of helping veterans become self-reliant and self-sustaining – can help the governor meet his goal to “balance the need of Government to do more with the ability of taxpayers to bear the tax burden and for business to remain competitive”.

The Veterans Outreach Center (VOC) in Rochester, NY, is the nation's oldest community-based outreach and advocacy center for veterans and their dependents. VOC strives to improve the quality of life for veterans by offering free, veteran-specific services through a seamless continuum of care designed to nurture individual potential and provide support in building a better future. Opened in 1973 to support Vietnam veterans coping with their wartime experiences and to facilitate government benefits claims, the VOC has evolved to meet the contemporary and ever-changing needs of all veterans. It is estimated that nearly **79,000** veterans live in the five county-region (Monroe, Livingston, Ontario, Orleans and Wayne) served by the center

VOC offers transitional housing, mental health services, educational and vocational training programs, and other supportive services for veterans and their families, and provides referrals to community resources for substance abuse treatment, domestic violence issues, post-traumatic stress disorder (PTSD), parenting skills and other personal development and empowerment programs.

VOC continues to take the lead locally, regionally and nationally in providing successful outreach and supportive and employment services to chronically homeless and disadvantaged veterans. New York State and federal veterans service agencies continue to seek out VOC assistance in developing various program models in strategic locations outside the Greater Rochester Metropolitan Statistical Area (MSA). VOC serves more veterans, by far, than any other local or regional community based organization.

Nationally acclaimed, with many of its employment and training strategies having been replicated by other organizations, in 2004 and 2006 the VOC was designated a best practice model in the report *“Best Practice Profiles of Employment Assistance Programs”* funded by United States Department of Labor (USDOL) and produced by the National Coalition of Homeless Veterans.

It is prudent to say that the men and women returning from the wars in Iraq and Afghanistan should be a priority for our state government in terms of their emotional, mental and economic well being. In New York State there are 338,000 veterans who are disabled and in the poverty universe and nationally there 1.8 million veterans without health care according to the Harvard School of Public Health. The spate of recent articles about the misfortunes at Walter Reed Army Medical Center and other government health care facilities across the U.S.—including the closing of the acute psychiatric care unit at the Canandaigua, NY, VA hospital — give credence to the need for community based organizations like the VOC. Simply stated, funds are needed to provide the necessary programs and services essential and important to these men and women. They deserve nothing less than to successfully, safely and securely readjust and reintegrate with their families and their communities. According to Dr. Gary J. Kennedy, a psychiatrist at Montefiore Medical Center, *“We’ve got a whole generation of veterans coming back from Iraq and Afghanistan and their health needs are just going to be tremendous.”*

A May 2007 report from the Defense Department said about 60,000 Iraq and Afghanistan veterans were diagnosed with mental health issues, roughly 4% of the service members who deployed to one of the combat zones. About 34,000 had PTSD symptoms and 26,000 had traumatic brain injuries (TBI), according to data given to the Congressional Research Service by Pentagon health affairs officials. The report probably understates the numbers, as it covers only diagnoses from fiscal 2003 through May 2007, and cannot account for service members who have not sought treatment.

The VA’s top doctor, Michael Kussman, told the House Veterans’ Affairs Committee on October 17th 2007 that about 40 percent of Iraq and Afghanistan war veterans who have sought treatment from VA facilities have “received at least a preliminary diagnosis of a mental health condition and 18 percent have received a preliminary diagnosis for PTSD.”

Although conventional wisdom suggests that the government, vis-à-vis the Veterans Administration (VA), has the capacity to treat, in a timely fashion, veterans presenting with a myriad of physical and mental illnesses, this is not the case. In some areas of the country, the waiting time to access VA medical assistance can be up to nine months. For someone who is experiencing symptoms of PTSD, this wait can be interminable.

Calls are flooding the Canandaigua-based national suicide prevention hotline created for veterans and their loved ones — at a rate of about 135 calls per day. “Nearly 200 callers have needed immediate response because they talked of suicide and had a gun or other means nearby, or had already ingested pills”, said Janet Kemp, the V.A.’s national suicide prevention coordinator.

At least 283 combat veterans who left the military between the start of the war in Afghanistan on October 7, 2001, and the end of 2005 took their own lives, according to preliminary V.A. research. Levels of risk for service members who have yet to return home is not yet known, but previous studies have found that combat trauma elevates suicide risk.

Veterans make up one in four homeless people in the United States, although they are only 11 % of the general adult population. And homelessness is not just a problem among middle-age and elderly veterans. Younger veterans from Iraq and Afghanistan are trickling into shelters and soup kitchens seeking services, treatment or help finding a job.

The report by the National Alliance to End Homelessness, a public education nonprofit group, was based on numbers from Veterans Affairs and the Census Bureau for 2005. The data estimated that 194,254 homeless people out of 744,313 on any given night were veterans. In all of 2006, the alliance estimates that 495,400 veterans were homeless at some point during the year. Nationally, New York State ranks fourth in the number of homeless veterans.

According to veteran advocates, the early presence of veterans from Iraq and Afghanistan at shelters does not bode well for the future. It took roughly a decade for the lives of Vietnam veterans to unravel to the point that they started showing up among the homeless. Advocates worry that intense and repeated deployments leave newer veterans particularly vulnerable.

While services to homeless veterans have improved in the past 20 years, advocates say more financial resources and more community-based organization like the VOC are needed. With the spotlight on the plight of Iraq veterans, they hope that more will be done to prevent homelessness and provide affordable housing to the younger veterans while there is a window of opportunity.

The VOC is experiencing increased enrollments as Rochester and the Finger Lakes Region reintegrates more than 1,000 National Guard and Reserve troops, in addition to countless regular military serving in Iraq and Afghanistan back into community. To date, our numbers have increased by close to 17%. Nearly 3,000 veterans sought the VOC's services last year. That number is expected to increase as these troops continue to demobilize. Many of these men and women will come home with severe wounds including TBIs (over 60% of troops in Walter Reed Medical Center have TBIs) – amputations and PTSD. As their injuries might prevent these men and women from returning to previously held jobs, or limit their choice of vocations, occupational training will be a critical part of their successful reintegration process.

Please consider the efficacy of just a few of the VOC's programs and services and their impact on the taxpayers:

Richards House, the VOC's transitional housing program, provides a cost-effective continuum of care for area veterans suffering from substance abuse, mental and physical disabilities. According to a study by the University of San Diego Medical Center's research project on the homeless, an average homeless person will make more than 21 emergency room visits per year at a cost of \$1,000 per visit and follow-up. Richards House enrolls close to 80 homeless vets per year—100% are screened for long-term VA benefits, 100% given an employability plan, 50% leave the program employed and 85% leave for permanent housing. While it would cost the taxpayers \$1,680,000 in medical fees to only temporarily fix these homeless vets with emergency room visits, the cost to house and proactively treat these same 80 veterans in Richards House is \$1,323,000, a savings of \$323,000.

The VOC's Resource Center, recognized as a "Best Practice Model" by the US Department of Labor and the National Coalition for Homeless Veterans, has been awarded 12 successful employment and training grants by the U.S. Department of Labor since its opening in April, 2000 – training and placing more than 1,500 veterans in jobs.

Further, through its Veterans Community Technology Center (VCTC) facility, the Resource Center currently operates a 5,050 square foot training facility that includes a classroom, lab, workshop and training room to provide introductory, basic, intermediate and advanced level remedial and occupational skills classes to veterans. The focus of the training has been on homeless vets as well as returning vets and those with wartime experience of different eras, offering them over 36 classes in the computer sciences, math, and blueprint reading. As many have disabilities, some severe and/or multiple, the VCTC has recently been relocated to a new site and constructed to include easy access for the handicapped through the use of walkways, restrooms and the addition of an elevator.

No other program or facility in the Greater Rochester area provides comparable services specifically to veterans, free of charge. The VOC's Resource Center, serving the five county Greater Rochester area (Monroe, Livingston, Ontario, Orleans and Wayne counties), was utilized by 2,890 veterans in 2006 and the number is growing. 1,261 vets were provided benefits assistance and advocacy, and 324 were assisted with vocational counseling. 213 were enrolled in employment programs resulting in 152 job placements (71%). 328 vets were trained utilizing the services of the Resource Center. Of these, 40% (131) were veterans with disabilities.

Getting substance-abusing veterans off drugs, off the streets and out of jail - giving them job skills to earn an honest living - helping them rebuild their lives as stable, productive members of our community. These are the results of the VOC's Veterans' Alternative to Incarceration Program (VATIP). Since its inception in 1999, VATIP has saved the taxpayers of Monroe County more than \$4 million in incarceration costs. In order to complete this program and avoid jail time, participants must be employed or registered in a college program. Compare this to the \$30,000 per year it costs to incarcerate one person in the Monroe County jail. If instead that one person goes through VATIP and is assisted in finding employment or college training that will lead to employment, he or she will actually contribute to the state's coffers by paying taxes. Without the VOC the county pays unnecessary incarceration costs and the state pays in lost tax revenue. VATIP boasts a recidivism rate of less than 15%.

At the VOC we feel honored to serve the men and women of this country who have fought and continue to fight in our nation's armed forces. We believe that regardless of your feeling about this war, we must support the warriors. The very least we can do for all veterans, whether recently discharged or still living with the effects of previous service to our country, is to ensure that there are appropriate and adequate support systems available, when they need them. The VOC will continue its 34 year mission to give veterans whose lives have been shattered by the lingering effects of their military service the tools they need to be part of our community and to lead healthier, less isolated, and fuller lives.

The scars of war are deep, life altering and slow to heal. The Veterans Outreach Center proactively reaches out to veterans in need who continue to suffer in silence – battling personal wars that can be won, with our help. It is my hope that we can count on Governor Spitzer to work collaboratively with us to assure that adequate funding will be available to see that every veteran is treated properly and in a timely manner. Because the real “costs” of war are the hearts and souls of the 550,000 men and women who are serving a combined total of close to 1,000,000 tours-of-duty in Iraq and Afghanistan and who will never be the same because of what they volunteered to do in service to their country.