

## Is the City Prepared to Help Returning Veterans?

by Alec Hamilton

Monday, October 24, 2011 12:00 AM - Last Updated Tuesday, June 04, 2013 10:47 AM

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Photo by Alec Hamilton

At age 17, Selena Coppa enlisted in the military through the Delayed Entry Program, a program that allows people too young to enlist to promise to enter the military once they are of age. The Brooklyn native says she joined out of a strong sense of service to her community. “I wanted to give something back in exchange.” she explains.

She served for eight years in the United States Army, working as an intelligence analyst, a platoon sergeant, and an intelligence squad leader, before returning to New York City two years ago.

Shortly after she returned, Coppa began experiencing symptoms of post-traumatic stress. She began having nightmares, and would startle awake at any sound. She would hear or see something, and suddenly be immersed in forceful memories of combat. More and more often she would find herself needing to quickly leave a situation in order to calm herself down, and that began taking a toll on her work and her school.

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A single mother, Coppa has struggled to find adequate healthcare for herself and her young daughter. Yet despite being aware of the services offered through the VA hospital and the city, Coppa says she avoids using them. The crowds often present at city clinics trigger her PTSD, and she has concerns about the quality of care in both city clinics and the VA. In desperation she brought her daughter to a city health clinic to get sutures once, but was so unhappy with the situation that she spent more than she could afford to take her child to a private doctor for the follow-up.

Last year Coppa fell sick with a particularly violent flu. After waiting several hours to be seen at the VA, Coppa gave up and tried to return home. On her way home she passed out on the sidewalk in Brooklyn, and dropped her purse. Strangers helped her home and no one stole her bag.

### One in Eight

The greater New York City area is home to an estimated 1.3 million veterans. The highest numbers of veterans are currently in Queens, with an estimated 225,370 veterans, followed by Brooklyn, Manhattan, and then the Bronx and Staten Island.

This number is about to increase sharply as thousands of veterans return from service in Iraq and Afghanistan. A [demographic analysis](#) of recruits by the Heritage Center found that the Bronx and Brooklyn were among the ninety-nine ZCTA ( [zip code tabulation areas](#) ) to have sent the most recruits into the military in 2003. In addition, as of [2009](#) , there were 26,240 people on active duty in New York State and 39,353 on reserve and National Guard.

As operations Iraqi Freedom (OIF) and Enduring Freedom (OEF) wind down, the city will experience a surge in younger veterans. Many of these will struggle with unprecedented levels of psychological health problems as a result of extended deployment and severe violence. Yet at the same time those veterans are returning home, to a bad economy and a city that is facing budget shortfalls resulting in reduced services.

The Mayor's Office of Veteran's Affairs seems ill prepared to deal with the influx of new troops and their needs. MOVA currently operates on a \$500,000 annual budget, \$400,000 of which goes to employee salary, according to the testimony of Commissioner Terrance Holliday. And

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the commissioner has been unable to explain what help his office has provided to returning troops that need mental health services.

Asked by City Councilmember Dan Halloran to name what MOVA has done to address issues of mental health services, Holliday was only able to say that his department had organized an outreach event, but could site no other effort. He did say that the agency was spending a lot of “energy and personal capital” on getting people into jobs. In addition he testified that to his knowledge the veterans his organization served had all had positive interactions with the VA, though he was unable to quantify even roughly, how many veterans his agency had helped.

Yet Commissioner Holliday testified that MOVA hasn’t had a problem with lack of funding. Councilmember Halloran was astounded by that response. “The city spent four times that amount on the condom campaign.” he said. “As a veteran, you don’t have a problem with that?”

The commissioner shook his head. “As a veteran, I do not.”

Hard times in the city have made for hard times for the local agencies and nonprofits that provide services for the city’s vulnerable. Suicide prevention service The Samaritans of New York saw their twenty-year contract with the DOHMH cut completely, only to be restored by the City Council. Executive Director Alan Ross said of the cuts “We went from helping people in crisis, to being in crisis.” While Samaritans does not provide services geared specifically for veterans, their plight is indicative of that of many nonprofits in the city.

### **Unique Needs**

Returning veterans can face a wide variety of mental and physical health challenges, and may have unique needs resulting from their service. Those physically injured during their time in the military may have challenges regarding self-care or transportation, requiring service ranging from minimal to intensive. At the same time, many veterans are returning with the less visible wounds of mental trauma, wounds which can be devastating for the individual as well as their families and communities.

Recent studies have indicated a high prevalence of mental health issues in returned service personnel. A recent memo from the Samaritans of New York suicide prevention organization claims that more American soldiers are dying from suicide than from warfare. The memo quotes

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a Rand Corporation study that found that nearly 20 percent of US service members returning from war will report symptoms of PTSD or major depression, but only 53 percent of those will seek help. The study sites both gaps in services and stigma around seeking help as factors.

Coppa's experience backs up those findings. Many veterans with PTSD have trouble dealing with bureaucracy and complicated paperwork, and as a result are disqualified from services for which they should be entitled. Coppa said veterans who try to access city services may also encounter a barrier in the requirement by some services of proof of residency. Coppa explained that many veterans, especially those just returning from service, don't immediately have access to housing, and may be sleeping on couches with friends and family.

While it is hard to find data on the exact numbers of veterans facing mental health issues in New York City, the enormous numbers of veterans living in the area indicate that these problems identified on a national scale are going to be particularly evident here. City Council Speaker Christine Quinn testified at an oversight hearing on the high rate of suicide among veterans that it is likely that national trends of PTSD and other mental health issues are the same or higher in New York City. "This city is not the easiest place to live," she noted.

PTSD can stem from other things besides direct combat experience. A [factsheet](#) issued by the [Service](#)

[Women's Action Network \(SWAN\)](#)

says that while combat trauma is the leading cause of PTSD among men, military sexual assault is the leading cause of PTSD among women veterans.

SWAN reports that 3,158 military sexual assaults were reported for 2010, with the Department of Defense (DOD) estimating that only 13.5% of sexual assault survivors report the attack. DOD estimates that in 2010 alone, there were more than 19,000 sexual assaults in the military.

PTSD is particularly likely in those veterans who served directly in combat, and in those most likely to have received abuses at the hands of others, including their command and fellow soldiers — women, non-heterosexuals, and people perceived to be non-heterosexual. For many sufferers the symptoms are manageable but difficult, hindering their health and happiness. For some, PTSD can be even more harmful, resulting in violence or injury to themselves or others.

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Adding to the already-high incidence of depression among veterans is the difficult labor market they find on return. The Department of Labor estimates unemployment amongst Iraq and Afghanistan-era veterans to have reached a record 15.2% in January of 2011. Unemployment is a large and persistent stressor on individuals and their families.

### **The Veterans Administration**

While the Veterans Administration is charged with making services available to veterans who enroll, many of those leaving the military do not receive the care they need from the VA. Reasons include a stigma associated with asking for help, as well as daunting enrollment procedures and an expectation of sub-par care.

SWAN National Peer Support Helpline Caseworker Rebekah Havrilla testified to the City Council that sexual assault survivors treated in military medical settings can experience further victimization, sometimes resulting in increased rates of depression and PTSD. "I refrain as much as possible from referring female veterans to the VA," she told the Council. SWAN's website states that female sexual assault survivors report a lower quality of care from the VA than from outside care, and that there are "enormous barriers" to receiving VA disability compensation for sexual trauma-related PTSD, especially for women.

Coppa initially went to the VA for treatment for her PTSD. She said the crowds there are less of a problem than at city clinics, but long wait-times to be seen and a lack of privacy act as powerful deterrents, as does the lack of childcare accommodations. During a visit to seek help managing her flashbacks, Coppa was compelled to describe the most personal details of her trauma in a busy hospital, in front of her then-six-year-old daughter. "When we got back" Coppa recalled, "she begged me never to go to the VA again. It was such an awful experience."

### **A Struggle to Stay**

Asked how she will get the care she needs going forward, Selena laughs. "That's a very good question. It's not one I have an answer to."

She hopes to be able to stay in Brooklyn near her family, but worries that the high cost of living and the lack of services may eventually drive her to move out of New York.

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Despite her struggles, Coppa remains proud of her sacrifice for her country, and says she does not regret having enlisted.

“I still think it was the right thing, even though I don’t feel my service was valued” or is valued—by many. I still feel good about deciding to serve, whether or not I am served in return.”