Chairman Flores, Ranking Member Takano, and Members of the Subcommittee:

Thank you for inviting Wounded Warrior Project (WWP) to provide views on pending economic opportunity-related legislation. We welcome this opportunity to address several of the measures before you today.

**Warriors' Peer-Outreach Pilot Program Act**

H.R. 3056 would require the Secretary of VA to carry out a three-year pilot program to provide peer outreach and support services at institutions of higher learning – with an emphasis on assisting veterans who may have or be having, difficulty in adjusting to such institution, or who may need services or supports that such institution is not equipped to provide – by training and employing fellow veteran students (or recent graduates) as peer mentors.

With the Post 9/11 GI bill, Congress has provided this generation of veterans an especially valuable gateway to economic success. Wounded warriors are using this benefit; in fact, almost one third of the nearly 14,000 wounded warriors who responded to our 2013 survey were enrolled in school. However, some of our wounded warriors are facing stark challenges in pursuing higher education. In many instances, their injuries – and particularly the invisible wounds they have incurred – create obstacles their student-peers do not experience or even understand. Some wounded warriors simply need modest accommodations and supports. But without such supports some are struggling, dropping out, or even failing.

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Studies confirm the experiences our warriors have reported to WWP education-services staff. For example, one study found that the “average” student-veteran has experienced moderate anxiety, moderately severe depression, and symptoms of PTSD.\(^2\) Specifically, nearly 46 percent of the sample experienced “significant symptoms of PTSD,”\(^3\) almost 35 percent suffered from severe anxiety, and nearly 24 percent had severe depression.\(^4\) Another study found that most of the student veteran survey and focus group participants encountered substantial transition challenges while adapting to life on campus.\(^5\) Among these students, one of the most frequently discussed challenges was coping with service-related disabilities and PTSD.\(^6\) Overall, about 68 percent of survey respondents rated the extent to which they had to cope with such disabilities, and of those, 55 percent reported it as a moderate or major challenge.\(^7\)

As is apparent from our own extensive surveying, peer support and mentor relationships are vital in assisting warriors in their transition and throughout their recovery process. Particularly, peer support has played unique roles in military/veteran populations in decreasing stigma associated with seeking mental health care and improving adherence, increasing knowledge of treatment resources, and augmenting or teaching self-management.\(^8\) Notably, peer support relationships tend to support and encourage self-advocacy\(^9\) and empowerment and they have been found to foster increased stability in work, education and training.\(^10\) In some cases, peer mentors are even more successful than professional qualified clinicians because they promote hope and belief in the possibility of recovery and their relationships with mentees foster increased self-esteem and social inclusion, engagement, and increased social networks\(^11\) - all of which are key for success in post-secondary education. Furthermore, peer support relationships are mutually beneficial – employment as a peer mentor adds to self-esteem, confidence, and personal recovery and increases chances of further employment and continued recovery.\(^12\)

WWP was founded on the principle of warriors helping warriors, and we pride ourselves on outstanding service programs that advance that principle, including our own Peer Mentor

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\(^3\) Id. These exceed the cutoff score for PTSD in accordance with the PCL-M score for OIF/OEF veterans, Dept. of Veterans’ Affairs and the National Center for PTSD Fact Sheet, “Using the PTSD Checklist,” available at: http://www.ptsd.va.gov/professional/pages/assessments/assessment-pdf/pcl-handout.pdf.

\(^4\) Rudd et al., supra note 6, at 357-358.


\(^6\) Id. at 36.

\(^7\) Id. at 39.


\(^9\) Id. at 272.


\(^11\) Id. at 400.

\(^12\) Id.
Program. Underscoring the benefit of warriors reaching out to other warriors, our annual survey found that more than one half of our alumni reported that talking with another OEF/OIF/OND veteran was the most effective resource they have used (and that has assisted them) for coping with their mental health concerns.\textsuperscript{13}

Having current or recent graduate student peer mentors on campus to assist warrior-veterans – many of whom are battling PTSD, depression, anxiety, or a combination of these disorders would be an important step in assisting these warriors successfully make the transition to an educational program and increase their likelihood for success in such program. As such, WWP supports H.R. 3056.

**Improving Veterans' Access to Vocational Rehabilitation and Employment Act**

H.R. 4037, the Improving Veterans' Access to Vocational Rehabilitation and Employment Act of 2014 is aimed at making certain improvements to VA’s Vocational Rehabilitation and Employment Program (VR&E), including steps would: (1) direct VA to revise the formula to calculate the rate of veterans who were rehabilitated under the program; (2) make the approval of courses for a VR&E education program more similar to that of the GI Bill; (3) expand eligibility for specially adapted housing to veterans who are permanent and totally service-connected and are eligible to participate in VR&E; (4) authorize VA to prioritize provision of VR&E services for veterans based on need, as determined by reference to disability ratings, severity of employment handicaps, income and other factors, and (5) liberalize the definition of the term “serious employment handicap.”

WWP certainly appreciates the focus H.R. 4037 places on VR&E and welcomes many of its provisions. We do have concerns, however, regarding the implications of the proposed broad grant of authority the bill would give VA to set priorities for providing VR&E services, and what that might portend for disabled veterans who are not afforded priority under regulations VA might then promulgate. Given the wide latitude this provision of H.R. 4037 would give VA, it is conceivable that such authority would be broadly exercised, with the result that some veterans' applications for VR&E would get expedited attention while others could face long waits. While one could appreciate the benefit of establishing a limited "compelling need" situation under which VA could, for example, expedite consideration of a case presenting exceptional circumstances, the language of H.R. 4037 invites a much broader approach. Drawing priority distinctions based on disability ratings is especially problematic, given the long waits many face in the course of the adjudication and appeals processes. It bears emphasizing that VR&E is an entitlement -- an earned benefit. Given its mission, the VR&E program itself should be a VA priority, with funding commensurate with that priority. That funding should be sufficient to ensure that veterans are afforded timely service, and there

should be no need to consider setting priorities. Indeed, for Congress to grant VA authority to set priorities could actually be read to signal that the program need not be fully funded. While we do not suggest that to be the intent of the provision, we would urge the Subcommittee to reconsider this provision.

We would also urge the Subcommittee to address other areas – including through legislation -- where the VR&E program needs attention, particularly with staffing levels and the need for more staff training. With military careers often cut short by life-altering injuries, it is particularly important that this generation of wounded warriors be afforded the tools, skills, resources, education, and support needed to secure employment and develop fulfilling careers. Congress designed the VR&E program to give disabled veterans the help they need to gain success in the workforce and it should be a key transitional pathway for wounded warriors. But too often the program is failing them.

Wounded warriors and WWP’s field staff – who work daily with our wounded warriors across the country – report wide-ranging variability in program administration and education/employment plan approvals, counselor skills, experience, understanding of battle-incurred TBI and PTSD, and interpretation and knowledge of the program’s services. Though some warriors report positive experiences and have worked with dedicated counselors, this represents the exception and not the norm.

Warriors have reported instances of VR&E counselors challenging their employment aspirations by denying them access to their program of choice and pressing them instead to pursue “any job” as a goal. In other instances, wounded warriors seeking to go back to school to earn a second degree – to better compete in the job market – have met objection from counselors who view VR&E simply as a “jobs program.” Still, others, particularly those with TBI and PTSD, have encountered VR&E counselors who do not appear to understand those conditions.

Additionally, warriors report delays in receiving VR&E services, difficulty communicating and scheduling with their counselors, and reduced opportunities to achieve successful and timely rehabilitation. The size of counselors’ caseloads has particularly limited their ability to provide adequate on-going support and assistance to veterans throughout the course of their education or training program, especially to those with TBI and PTSD who need such supports. The following comments are emblematic of the experiences of many:

“In my experience working with Voc Rehab counselors, many of my veterans were exasperated by their counselors and oftentimes felt as though their counselors had such a large caseload that they were not getting the attention needed… and more often than not being brushed off when they asked for assistance.”
“While many of the Voc Rehab staff are sensitive to the veteran’s needs, they do not seem to, as a whole, have an understanding of where the veteran is coming from... they are quick to write off a veteran’s career choice due to their disability rather than take into account things such as passion, determination, and drive.”

“Many veterans have to justify why they want a specific degree or [employment goal] and that doesn’t always match up with what the counselor believes that veteran can be successful at based on their history or [medical] diagnosis.”

The recent Government Accountability Office Report on VR&E highlights the program’s workload management challenges and gaps in VR&E staff training. The wide variability in counselor caseloads among the regional offices is particularly concerning, as is the fact that the program is just now – at the end of 2013 and into 2014 – providing new staff training courses on mental health to improve counselors’ ability to assist veterans with PTSD and other mental health issues.

VR&E counselors need to be sensitive and not only understand the struggles, but also the strengths, of warriors with TBI and PTSD so that they, in turn, can help warriors recognize that they are not “broken,” but continue to have great potential. They must be partners in the warriors’ rehabilitation, not critical gatekeepers who too readily dismiss “unrealistic” aspirations. In working with this generation, counselors must also understand the very profound disorientation experienced by warriors whose lives and life-plans have been upended and out of their control. As one put it, “For me the most difficult part [of the transition] is finding purpose. [I] never really had to think about my purpose when I was in the Corps.” A VR&E counselor must have the sensitivity, training and experience to help that warrior find new purpose, or to link him to appropriate professional help. But even the most capable, empathetic counselor – challenged with 150 other “cases” to manage – is unlikely even to have sufficient time to provide that warrior the needed level and kind of support. More appropriate staffing levels must be a component of refocusing and re-energizing this important program. In all, we urge this Committee to make the VR&E program a greater priority through budgetary, programmatic, and outcomes-based action.

Veterans Education Survey Act of 2014

H.R. 4151 directs the Secretary of VA to contract with an independent agency to conduct a survey of individuals, who have used, or are currently using, their education benefits under chapters 30, 32, 33, and 35 of Title 38.

15 Id. at 27 and 32.
WWP would welcome a comprehensive survey on warriors’ experiences using their earned educational benefits. WWP’s concerns regarding wounded warrior-student experiences on campus and in educational programs has been raised before this Committee. Such a survey would be invaluable in determining the effectiveness of these education programs and would shed light on veteran experiences in each of these programs.

But, as we outlined above in our discussion on VR&E, we urge this Committee to expand the scope of the bill to include users of VR&E in this survey to better understand veteran experience with the program as an effort to remedy the program’s gaps. Simply asking whether the veteran was entitled to VR&E and if he/she participated in the program, as this bill requires, would be to lose an important opportunity. In our 2013 annual survey – of those pursuing an education – only about 20 percent of our warriors were using VR&E while 54 percent opted to use the Post 9/11 GI Bill to finance their education.\(^{18}\) Given that VR&E provides counseling and other supports and is limited to service-connected disabled veterans, it is striking that the majority of our alumni are selecting the Post 9/11 GI Bill - which does not provide the counseling and assistance that VR&E offers. Some warriors and field staff offer the reasoning that the Post 9/11 GI Bill is easy access and a swifter means to get an education. Many others report it is because they would have “more freedom to pursue what they want, not what the vocational counselor tells them.”

Including survey questions on VR&E – particularly questions focused on illuminating the reasons why service-disabled veterans choose the Post 9/11 GI Bill over VR&E would better assist VA in recognizing if more outreach and education is needed on VR&E and the services it provides. More importantly, questions related to veteran experiences with VR&E counselors and other staff, and on the timeliness and adequacy of services provided, are critically important to gain an understanding of where critical gaps in the program lie so VR&E administrators can begin addressing those gaps – whether through increased staffing, staff training, and/or through greater programmatic oversight or even program re-design.

Thank you for your consideration of WWP’s views on these issues.

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\(^{17}\) See WWP statement for the record, House Veterans’ Affairs Subcommittee on Economic Opportunity Hearing on “The Value of Education for Veterans at Public, Private, and For-Profit Colleges and Universities,” June 20, 2013.

\(^{18}\) Franklin, et al, 2013 Wounded Warrior Project Survey Report, 71 (July 2013). The percentage of alumni using the Post 9/11 GI Bill has continued to increase (53% in 2012, some 46% in 2011, and nearly 28% in 2010) while the percentage of alumni reporting the use of VR&E continues to decline (21% in 2012, down from almost 25% in 2011, and some 36% in 2010).