

111TH CONGRESS
1ST SESSION

H. RES. 443

Expressing the support of the House of Representatives for members of the Armed Forces and veterans with post-traumatic stress disorder and their families and urging the Secretary of Veterans Affairs and the Secretary of Defense to improve the services and support available to such members, veterans, and families.

IN THE HOUSE OF REPRESENTATIVES

MAY 14, 2009

Ms. MOORE of Wisconsin (for herself, Mr. CONNOLLY of Virginia, Ms. CLARKE, Mr. CARSON of Indiana, Mr. DAVIS of Illinois, Mr. McDERMOTT, Ms. EDDIE BERNICE JOHNSON of Texas, Ms. KILPATRICK of Michigan, Mrs. CAPPS, Mr. KAGEN, and Mr. EDWARDS of Texas) submitted the following resolution; which was referred to the Committee on Veterans' Affairs, and in addition to the Committee on Armed Services, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

RESOLUTION

Expressing the support of the House of Representatives for members of the Armed Forces and veterans with post-traumatic stress disorder and their families and urging the Secretary of Veterans Affairs and the Secretary of Defense to improve the services and support available to such members, veterans, and families.

Whereas more than 1,000,000 members of the United States Armed Forces have already served in ongoing operations

in Iraq and Afghanistan, including members of the National Guard and Reserves;

Whereas in Afghanistan and Iraq, members of the Armed Forces have engaged in intense and prolonged combat, placing them at risk for developing post-traumatic stress disorder (PTSD) or other mental health conditions;

Whereas according to a Government Accountability Office report, PTSD can occur after experiencing or witnessing a life-threatening event and is the most prevalent mental health disorder resulting from combat;

Whereas early identification and treatment of symptoms of PTSD through education, peer and family support, therapy, or medications may lessen the severity of the condition and improve overall quality of life for those with PTSD;

Whereas family members of members of the Armed Forces make numerous sacrifices and are an integral part of the support network available to the Nation's warriors and veterans;

Whereas it has been recognized that the ongoing conflicts in Iraq and Afghanistan have placed unique stresses on the families of members of the Armed Forces due to lengthy and repeated deployments and the high incidence of casualties;

Whereas the House of Representatives passed House Concurrent Resolution 162 in November 2007, which noted that there are more than 3,000,000 family members and other dependents of those serving on active duty and in the Reserve Component, that nearly 50 percent of the members of the Armed Forces who are deployed away from their permanent duty stations have left families with children

behind, and that over 50 percent of the members of the Armed Forces who are currently deployed in Iraq are married;

Whereas the House of Representatives passed House Concurrent Resolution 181 in September 2007 which recognized that the families of members of the Armed Forces, and in particular their children, provide unconditional love and support to their loved ones serving in the Armed Forces before, during, and after their deployment;

Whereas the House of Representatives passed House Resolution 265 in April 2008 recognizing that children of members of the Armed Forces too share in the burden of protecting the Nation and are a source of pride and honor to all Americans and it is fitting that the Nation recognize their contributions and celebrate their spirit;

Whereas House Resolution 265 urged Americans to join with the military community in observing the “National Month of the Military Child” with appropriate ceremonies and activities that honor, support, and thank military children;

Whereas, on July 15, 2008, the House of Representatives passed House Concurrent Resolution 295 expressing appreciation to families of members of the Armed Forces and recognizing that they too bear the burdens of war;

Whereas the Department of Defense June 2007 Mental Health Task Force report noted that “The well-being of service members is inextricably linked to the well-being of their families. Frequent redeployments may strain even the strongest family bonds. In this era of instant communication, the service member remains in constant contact with his or her family . . . Thus, a world-class military

mental health system ensures optimal mental health among not only service members but also family members.”;

Whereas while families can play a critical role in veterans’ re-adjustment through support, family members who are suffering as a result of the long separations and multiple and extended tours of duty, and in some cases by their own experience with depression or anxiety, may not have the capacity to provide that needed support;

Whereas of the approximately 300,000 veterans of Operation Enduring Freedom and Operation Iraqi Freedom who have accessed Department of Veterans Affairs health care, over 40 percent have presented mental health concerns, including PTSD, substance abuse, and mood disorders;

Whereas millions of other veterans from previous wars also continue to suffer the effects of PTSD and to seek treatment from the Department of Veterans Affairs;

Whereas PTSD has been associated with severe, pervasive negative effects that affect the whole family and not just the veteran including impacts on marital adjustment, family functioning, and the mental health of partners, which are reflected in part by rates of separation, divorce, and interpersonal violence;

Whereas a number of reports have noted that the effects of post-combat mental and cognitive conditions can adversely affect those closest to the veteran, as family member of veterans with PTSD may be faced with a number of strains from managing the person’s symptoms, dealing with crises, loss of friends, or loss of intimacy;

Whereas the RAND Corporation's Invisible Wounds of War report noted that with respect to PTSD, "there is extensive evidence that secondary traumatizing—a situation in which the intimate partners of trauma survivors themselves begin to experience symptoms of trauma—occurs and has serious negative consequences for the emotional and psychological well-being of the spouses of veterans with PTSD . . . Thus the brunt of the burden of servicemembers with PTSD appears to fall on the people who are most intimate with those individuals—their wives.";

Whereas the study further reported that compared with the wives of other veterans, wives of veterans with either of the disorders (post-concussion syndrome or PTSD), experience significantly higher levels of distress and psychiatric symptoms;

Whereas the Special Committee on PTSD of the Department of Veterans Affairs advised in February 2006 that the "VA needs to proceed with a broad understanding of post deployment mental health issues" and that "Because virtually all returning veterans and their families face readjustment problems, it makes sense to provide universal interventions that include education and support for veterans and their families coupled with screening and triage for the minority of veterans and families who will need further intervention";

Whereas while spouses, children, and parents of veterans with mental health care needs are affected by the condition of their family members who served in the Armed Forces, many may not have access to the variety of treatment services that are available to veterans at facilities of the

Department of Veterans Affairs and the Department of Defense;

Whereas the Committee on Veterans' Affairs of the House of Representatives has held a number of hearings to explore ways to help the family members of the Nation's veterans access needed health care services through the Department of Veterans Affairs facilities; and

Whereas Congress recognizes that it is important to support the needs of families of members of the Armed Forces, especially those diagnosed with PTSD or other mental health conditions: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

2 (1) supports increasing efforts to allow the
3 spouses and family members of veterans, including
4 soldiers killed in combat in Iraq and Afghanistan, to
5 receive needed counseling services at Department of
6 Veterans Affairs facilities;

7 (2) encourages the Secretary of Veterans Af-
8 fairs and the Secretary of Defense to develop pro-
9 grams for veterans with PTSD that include and
10 treat the whole family, including by offering training
11 and counseling for coping, intervention, resiliency,
12 and overcoming adversities;

13 (3) believes that such a holistic approach would
14 include families, as deemed appropriate by the Sec-
15 retary of Veterans Affairs, in mental health coun-
16 seling and programs provided by the Department of

1 Veterans Affairs to the maximum extent possible
2 and appropriate;

3 (4) calls on the Secretary of Veterans Affairs,
4 the Secretary of Defense, and the heads of other ap-
5 propriate Federal agencies to increase resources
6 available for family and friends of veterans who are
7 suffering from PTSD and to continue to build up
8 programs and initiatives to educate and support all
9 veterans and their families seeking care for combat-
10 related PTSD;

11 (5) urges the Secretary of Veterans Affairs and
12 the Secretary of Defense to increase access to coun-
13 seling and other mental health services to family
14 members of veterans, including the family members
15 of members of the Armed Forces killed in Iraq and
16 Afghanistan, as part of the comprehensive plan for
17 preventing, diagnosing, treating, and responding to
18 traumatic brain injury, post-traumatic stress dis-
19 order, and other mental health conditions in mem-
20 bers of the Armed Forces as required by the Na-
21 tional Defense Authorization Act for Fiscal Year
22 2008 (Public Law 110–181);

23 (6) urges the Secretary of Veterans Affairs to
24 collaborate with the Department of Defense center
25 of excellence in the prevention, diagnosis, mitigation,

1 treatment, and rehabilitation of PTSD and other
2 mental health conditions, established pursuant to
3 section 1622 of the Wounded Warrior Act (title XVI
4 of the National Defense Authorization Act for Fiscal
5 Year 2008; Public Law 110–181; 10 U.S.C. 1071
6 note), to develop and implement effective strategies
7 to educate and reach out to the families of members
8 of the Armed Forces with PTSD, to develop pro-
9 grams to mitigate the negative impacts of PTSD on
10 these family members, to conduct research on the
11 mental health needs of these families in order to
12 guide protocols to address identified needs, and to
13 better support the recovery of members of the
14 Armed Forces and veterans with PTSD through
15 strengthening the ability of family members to meet
16 those needs;

17 (7) requests that the Secretary of Veterans Af-
18 fairs and the Secretary of Defense to submit to Con-
19 gress a list of statutory barriers that prevent each
20 department from expanding access to mental health
21 counseling services for family members of veterans,
22 including recommendations for legislative remedies;
23 and

24 (8) urges the Secretary of Veterans Affairs to
25 aggressively work with Congress, veterans service or-

1 ganizations, and others, including through partner-
2 ships with nonprofit veterans groups working to
3 meet the mental health needs of our military mem-
4 bers and their families, to determine how to best
5 meet the needs of veterans and their family mem-
6 bers.

○