

VFW Proactive Against Mental Health Issues

‘It’s not about judging ... not about labels ... it’s recognizing when people are hurting’

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Carol Bakke knows what veterans who have post-traumatic stress disorder are going through. She’s been there.

An Iraq War veteran, Bakke served from 2010 to 2011 with the 778th transportation company with the Army National Guard as a heavy equipment transporter. An explosively formed projectile hit her team on July 18, 2011. When she returned stateside, the dreams and nightmares started — dreams that would cause her to scream in the middle of the



night.

“Every dream that I was having [was] like someone was trying to kill me, just that same IED

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going off, and I was just reliving it,” said Bakke, a life member of Post 7356 in Parkville, Mo.

She also had nightmares where she was trying to kill others by blowing them up. Her husband, also a veteran, convinced her to seek help.

“He went through the whole process with me,” said Bakke, who recently accepted a position with the St. Paul, Minn., VA as a legal administrative specialist.

However, her initial visit with the VA was not a positive one. Bakke said she spoke to a counselor who told her she had anxiety and would be able to “adjust back to society.”

“She just didn’t take me serious at all,” said Bakke, who was the sole woman in the convoy when the EFP hit it.

About a month later, Bakke went to a different VA hospital and met with a counselor who had also deployed to Iraq. She was diagnosed with PTSD in 2013.

“Telling him my experience, some of the things that happened, he knew exactly what I was talking about,” Bakke said.

Having that connection helped motivate Bakke to pursue a master’s degree in social work because she saw a need for “more mental health providers like him.” She earned her degree from the University of Kansas in 2015 and focused her thesis project on veteran suicide awareness.

“I reached out to veterans that I knew, or would follow up with the wives who learned about what I was doing,” Bakke said. “A lot of what they said was, ‘He doesn’t want to go into [the VA] for help,’ and, ‘I don’t know how to get him to go in for help.’” A lot of them also didn’t want to go in because — something almost everyone said — they didn’t get the help they wanted or were turned around or they just had a negative experience with the VA.”

A George W. Bush Institute study, referenced by Commander-in-Chief Brian Duffy, surveyed roughly 1,000 post-9/11 veterans and adults in the United States, United Kingdom and Canada between February and March 2016, finding that “eight out of 10 post-9/11 veterans responding so far in the United States think that embarrassment or shame is an extreme or moderate barrier to veterans seeking care for medical conditions such as PTSD or [traumatic brain injury].”

But Duffy said there is “no reason to be embarrassed or ashamed.”

“The brain is no different. It’s an organ,” Duffy said. “It’s no different than somebody who has a kidney problem or thyroid problem. At times, they get sick. There are therapies

available to make them well again. We want people to understand that.”

To do so, VFW launched its mental wellness campaign in September. Duffy said VFW “can make a big difference” due to its 1.7 million members among VFW’s Auxiliary and Posts.

“[It] doesn’t matter if you were there in World War II, Korea, Vietnam, the Gulf War or the current conflicts,” Duffy said. “We all can relate to what it means to be on the pointy end of the spear.”

‘A Conduit of Education’

To educate the masses, VFW has partnered with three organizations — One Mind, PatientsLikeMe and Give an Hour.

“We bring the numbers,” Duffy said. “We bring the troops. We bring the physical buildings in most cases with the 6,600 VFW Posts that we have. What they bring is the expertise and give us a conduit of education.”

Duffy said the “biggest thing” he has learned about mental health is that the majority of veterans committing suicide are not of the younger generation. VA data released in July states that in 2014, roughly “65 percent of all veterans who died from suicide were aged 50 years or older.”

“So what it’s telling me is that some of these things coming back from war, these mental health issues coming back from war, take a long time to percolate,” Duffy said.

If VFW doesn’t engage at this stage, when Iraq and Afghanistan-era veterans reach that age bracket, “there’s potentially a tsunami of mental health issues coming,” according to Duffy.

Referring to the widely cited 2014 VA statistic that an average of 20 veterans died from suicide every day, Duffy said his “biggest fear” is that statistic increasing and “we may look back someday and wish to get back to that number.”

VFW’s campaign will focus on six key areas over the course of the year: Building partnerships; providing training and resources to VFW personnel; creating templates for VFW Posts and Departments to raise awareness and host community events; offering opportunities for VFW members to share experiences; contributing to research; and advocating for federal legislation.

Duffy said the biggest item VFW will need to advocate for is additional funding and resources, “mainly into the VA.”

Having that monetary backing will allow VA to prepare resources and professionals for the

time when VFW begins directing veterans there for assistance, Duffy said.

Service officers, according to Duffy, are “quite often” the first point of contact for veterans returning from a war zone or who have developed a mental health challenge.

Ensuring that VFW’s service officers are equipped with additional tools and training “is imperative to making this as big a success as we can,” Duffy said.

Such tools, according to Duffy, will be a combination of in-house efforts alongside that of Give an Hour, PatientsLikeMe and One Mind.

Duffy said he would like to see VFW Posts viewed as a “base camp” where resources are available for those facing mental health concerns, regardless of a person’s veteran status.

Giving Back Through Service

Post 7397 Commander Mike Petersen, who served in Iraq from Nov. 2005-Nov. 2006 as part of a personal security detail with the 2nd Bn., 137th Inf. of the Kansas National Guard, has been a service officer for five years. Petersen said he was “volun-told” to take on the role, but the timing was perfect.

“I had just navigated the VA system myself, and I didn’t even know there was such a thing, someone who could help you go through,” Petersen said. “So my mission is I make sure guys get to the right place, whichever VA they choose to go to, make sure they’re getting with their service officers to file a claim if they need a claim filed and also just make sure they get in the VA system period.”

Petersen said about half of the cases he handles on a yearly basis are related to the topics of PTSD and TBI. In one case, an Afghanistan veteran sought financial help and Petersen said they discovered he “wasn’t even registered in the VA system.”

“I was able to get him into the VA system and get him help that he needed for his PTSD,” Petersen said.

While deployed, most of the soldiers Bakke worked with dealt with depression or family and personal problems.

“I had a lot more conversations and interactions with veterans from my unit and other units after we came home,” Bakke said. “I think we were going through that readjustment process... even the wives would reach out to me.”

It was difficult for a lot of veterans to open up to her, according to Bakke, and they wouldn’t want to go to the VA “because that’s something that’s frowned upon.” Bakke said one

teammate whom she never expected to face mental health issues did, and she was able to assist him after they returned home.

“He actually opened up to me,” Bakke said. “It made me feel really, really good. I feel like he made such a huge difference in my life when we were overseas... [and] I felt like I was giving back to him by helping him.”

Though Duffy said templates are being built for Posts and Departments to use as awareness devices, one of the best is the “Five Signs of Emotional Suffering” from Give an Hour: Personality change, agitation, withdrawal, poor self-care and hopelessness.

A ‘Powerful’ Partnership

VFW leadership formally presented its partnerships in September at the National Press Club in Washington, D.C. Duffy; Dr. Barbara Van Dahlen, founder/president of Give an Hour; Joan Demetriades, One Mind chief strategy officer; and Jim Murray, director of strategic partnerships for PatientsLikeMe, sat on a discussion panel.

Give an Hour has provided free mental health care to service members and their families for 11 years by “harnessing civilian mental health professionals” and asking them to provide care, according to Van Dahlen.

One Mind, a five-year-old nonprofit, aims to reduce the stigma surrounding mental health.

PatientsLikeMe is a web-based organization that is an “online research and resource for patients to utilize.” It allows them to learn about their condition, connect with others, track the progression of the condition and share information about their own journey.

Dr. Caitlin Thompson, VA national mental health director of suicide prevention and community engagement, addressed the panel, noting that VFW is one of VA’s “strongest partners.”

“We are absolutely thrilled that they have decided to really enhance their look at mental health and mental wellness and to really continue to enhance the partnerships that we have,” Thompson said. “It is VA’s top priority to make sure we are partnering with all the right people, including our nonprofit partners as well as our veteran service organizations and VFW is [at] the forefront of that.”

Van Dahlen said the partnership with VFW is “so powerful” because of the need for “boots on the ground” to change culture.

“This isn’t about diagnosing,” Van Dahlen said. “It’s not about judging. It’s not about labels. It’s recognizing when people are hurting.”

Demetriades said she recognizes VFW's ability to "quickly raise awareness" because of its members.

"You've got a system in place [at VFW] that really allows you to get to a lot of people," Demetriades said.

And when people learn that symptoms are "from true injury to their brains, it helps destigmatize and helps people to reach out for help because it's not a moral failure," according to Demetriades.

The brain is "so complex," according to Demetriades, that the only way to increase research is for institutes and universities to work together.

"The VA has done fabulous work," Demetriades said. "The DoD does fabulous work, but it's almost impossible to bring it all together in a way that will prevent redundancies of studies or will make things happen faster."

Murray said a challenge PatientsLikeMe continues to face is resistance to reaching out for help. However, there's a "huge willingness" for veterans to help each other.

Petersen said VFW's "No. 1 focus right now" should be on reducing the stigma surrounding mental health.

"I'm glad that we're taking a stance on it and making it a nationwide cause — or actually a worldwide cause — with the VFW to help our brothers and sisters, comrades in arms, to get through this and let them know that they're not alone in this battle," Petersen said.

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Photo courtesy of Gary Rohman

By [Kari Williams](#), senior writer, VFW magazine