

Coping during COVID: Veterans' Mental Health and Implementation of the Hannon Act

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Statement of

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With Respect To

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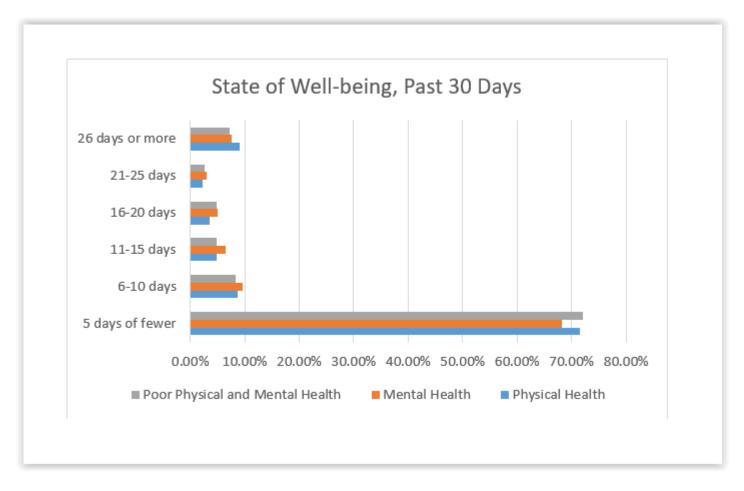
WASHINGTON, D.C.

March 24, 2021

Chairman Tester, Ranking Member Moran, and members of the Senate Committee on Veterans' Affairs, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, thank you for the opportunity to provide our insight pertaining to veterans' mental health during the COVID-19 pandemic and the use of ATLAS pod sites.

In the past year, we have lived in a world of isolation and social distancing to stay safe from contracting the COVID-19 virus. Many veterans experienced an increase in stress, fear, anxiety, and depression triggered by loneliness. Coping and self-care strategies were adjusted to daily living within our four walls, visiting friends and family through screens, attending school from our kitchen tables, working from home in a quiet space, and receiving health care through telephone or video appointments.

The VFW released a survey at the end of April 2020 through which VFW members provided a snapshot of their health care experiences six weeks into the COVID-19 national emergency. When asked about their general health, 39% of respondents stated they were in good health, 33% were very good, 17% were fair, 8% were excellent, and 3% were poor. In an assessment of physical health during the past 30 days, 72% of participants responded they had five days or fewer of poor physical health, 9% had 26 days or more, and 8% had six to ten days. Regarding mental health days deemed not good, 62% of participants stated they had five days or fewer, 10% had six to ten days, and 8% had 26 days or more. Poor physical and mental health can keep individuals from performing daily activities, including self-care, work, or recreation. Seventy-two percent of the participants responded they had five days or less of poor physical and mental health interference, 8% had six to ten days, 7% had 26 days or more. This survey was a baseline for the VFW membership to self-evaluate their physical and mental health. The VFW plans to conduct a follow-up survey in one year.



Telehealth plays a critical role in maintaining veterans' mental and physical well-being during a time of social distancing and quarantine. During the pandemic, the need for telehealth expanded, and the Department of Veterans Affairs (VA) was ready. The majority 47% of veterans who responded to the VFW's COVID-19 survey stated their routine care appointments were converted to telehealth. Telehealth appointments allowed veterans access to their care in the safety and comfort of their own homes. Retaining telehealth as a tool decreases the barriers of transportation, inconvenience, the economic impact of taking time off from work, child care, and exposure to sexual harassment or assault. Although, new issues arose like limited access to high-speed internet, technology illiteracy, and lack of access to smartphones, tablets, or computers.

Even with the success of the technology, a digital divide is created. In a recently released Office of Inspector General (OIG) VA report, face-to-face primary care encounters decreased while telephone and VA Video Connect (VVC) appointments increased from February to June 2020. The urgent transition from in-person appointments to telehealth left both patients and physicians relying on communication via telephone, which made up 81% of those encounters. But making eye contact and seeing facial and body cues is essential to successful appointments. The OIG sent a questionnaire regarding VVC barriers to the

Veterans Health Administration (VHA) primary care providers. The providers identified veterans' lack of internet connectivity and equipment, insufficient training and support for veterans, inclusion of test visits prior to scheduled appointments, and the problematic two-system scheduling process for face-to-face care. The OIG report recommended that VA assess VVC and take appropriate action to address the digital divide.

The VFW is proud to be part of the solution. Through Accessing Telehealth through Local Area Stations (ATLAS) pod sites, the VFW has worked with VA and Philips to leverage VA's anywhere-to-anywhere authority to expand telehealth options for veterans who live in rural areas, or who may lack access to the internet, necessary equipment, and knowledge to facilitate VVC video calls. In addition to secure and private VVC connectivity, the ATLAS locations contain a full suite of telehealth devices, such as blood pressure cuffs, scales, oximeters, thermometers, and glucose monitors.

The first VFW post with an ATLAS site was VFW Post 6786 in Eureka, Montana. Eureka is more than 60 miles from the nearest VA clinic and more than 250 miles from the nearest VA hospital. The travel time is often considerably increased by winter weather conditions. Like many VFW posts throughout the nation, the state's COVID-19 pandemic precautions rendered the posts temporarily closed, including the ATLAS sites. Thus far, the Eureka ATLAS site has had 19 appointments, with two additional appointments scheduled within the next 30 days.

In February 2021, VFW Post 7842 in Linesville, Pennsylvania, became the second VFW ALTAS location, allowing veterans and their families to virtually connect to care with the Erie VA Medical Center (VAMC). Travel time from the post to the Erie VAMC can take over an hour on a mild weather day, but Linesville is vulnerable to 81 inches of snow per year due to Lake Erie snow effect. A Vietnam Navy veteran was the first to use the ATLAS pod at the post for a VVC appointment with his provider at the Erie VAMC. He expressed his gratitude for the on-site attendant who guided him through the check-in process. VFW Post 7842 Commander Norm Haas is humbled to have this valuable resource for the veterans' community. He would like to expand the hours of operation from three days a week/five and half hours a day to five days a week/eight hours a day. The commander mentioned the only current deficiencies of the ATLAS site are the waiting room furniture and an automated external defibrillator that was promised in the letter of agreement with VA and Philips. Recently, Erie VAMC mailed postcards announcing the ALTAS pod availability and hours of operation to eligible veterans in the area.

Two additional VFW ATLAS locations are scheduled to open within the next month—VFW Post 2487 in Los Banos, California, and VFW Post 7103 in Athens, Texas. Additionally, there is an interest in 22 more locations. The implementation of the *Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019* will provide the grant funding opportunity to allow these VFW posts to expand telehealth capabilities for mental

health programs and suicide prevention to veterans in rural and highly rural areas.

The COVID-19 pandemic brought awareness to the need for telehealth, but it also illuminated barriers to digital care. Certain specialties like mental health services have greatly benefited from telehealth. However, others like orthopedics may require in-person appointments for patient assessment. The *MISSION ACT of 2018* expanded telehealth services beyond state lines to ensure veterans can receive the continuum of care even if their health care providers or the veterans move to other locations. Telehealth services can also benefit veterans via group therapy sessions by connecting veterans with similar experiences in safe and supportive settings regardless of where they live.

The VFW commends the Senate for passing the *Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019*, and the additional legislation to fund expansion of VA's telehealth services into law. The VFW urges congressional oversight to ensure VA implements the legislation as written and intended.

Chairman Tester, Ranking Member Moran, this concludes my testimony. Thank you for the opportunity to present the VFW's input today. I look forward to engaging in further discussion with you or any members of the committee on these issues.