

- SUBJECT:** Establishing a mental health program for veterans
- COMMITTEE:** Defense and Veterans' Affairs — favorable, without amendment
- VOTE:** 8 ayes — Menéndez, R. Sheffield, Collier, Farias, Frank, Miller, Moody, Zedler
- 1 nay — Schaefer
- 0 absent
- WITNESSES:** For — Jarod Myers, Bluebonnet Trails Community Health Center; Waymon Stewart, Andrews Center Behavioral Healthcare System; (*Registered, but did not testify:* Melody Chatelle, United Ways of Texas; Gilbert Gonzalez, CHCS; Greg Hansch, National Alliance on Mental Illness Texas; Donald Lee, Texas Conference of Urban Counties; Katharine Ligon, Center for Public Policy Priorities; Joe Lovelace, Texas Council of Community Centers; Mark Mendez, Tarrant County; Seth Mitchell, Bexar County; John Stuart, National Association of Social Workers, Texas Chapter; Gyl Switzer, Mental Health America of Texas)
- Against — None
- On — Kathy Wood, Texas Veterans Commission; (*Registered, but did not testify:* Sam Shore, Department of State Health Services)
- BACKGROUND:** Health and Safety Code, sec. 1001.076 governs a mental health program for veterans who were honorably discharged from military service. The program includes an initiative through which veteran volunteers, in conjunction with licensed therapists, receive training and provide peer-to-peer counseling services for veterans, service members, and their families.
- DIGEST:** HB 2392 would require the Department of State Health Services (DSHS) to implement a mental health program for veterans honorably discharged from any branch of military service. The bill would repeal Health and Safety Code, sec. 1001.076, which governs the current mental health program for veterans.
- The program under HB 2392 would have to include peer-to-peer

counseling, access to licensed mental health professionals for volunteer coordinators and peers, and specialized training and technical assistance. It also would provide for:

- the recruitment, retention, and screening of community-based therapists;
- suicide prevention training for volunteer coordinators and peers; and
- veteran jail diversion services, including veterans courts.

HB 2392 would require DSHS to establish grants to be awarded to regional and local organizations that would provide services for the program. Grants for the program under the bill could not be used to supplant existing funding associated with DSHS programs. A grant awarded through the program would have to:

- emphasize direct services to veterans provided by peers;
- leverage additional local resources to provide funding for programs or services for veterans; and
- increase the capacity of the mental health program for veterans.

DSHS would be required to submit to the governor and the Legislature an annual report each December 1 that included:

- the number of veterans served by the mental health program;
- the number of peers and volunteer coordinators who received training;
- a summary of the grants and services awarded and an evaluation of those services; and
- recommendations for program improvements.

This bill would take effect September 1, 2013.

**SUPPORTERS  
SAY:**

HB 2392 would replace the state's current mental health program for veterans with one that was more effective. Through its emphasis on effective peer-to-peer counseling, the bill would attempt to address and ameliorate the alarming mental health issues that afflict too many veterans. In addition, by creating a valuable network of volunteers and mental health workers, HB 2392 would spread awareness about post-traumatic stress disorder and other mental health challenges that affect those who served our country.

HB 2392 would help increase the access veterans have to mental health care. Mental health cases for U.S. veterans have risen steadily in recent years, with about 1.3 million reported cases in 2012, according to the Department of Veterans Affairs (VA). The department recently reported that 22 veterans a day committed suicide during 2010 and that veterans seeking mental health care from the department wait an average of 50 days before receiving treatment. The program's chief component of peer-to-peer counseling would help veterans broach sensitive topics with one another. Such counseling is especially key for a group that values the shared experience of serving in the military.

The bill would create a useful network of volunteers and health care professionals to help serve the growing ranks of veterans, some of whom are struggling with the transition back to civilian life and could benefit from mental health services. It also would help rural communities and towns located far from VA clinics to offer mental health counseling to area veterans. These teams of peers would serve to spread awareness of mental health conditions common among veterans. They also would connect veterans with the proper mental health care venues in their communities.

Although DSHS already administers a veterans' mental health program, its scope is not well defined, nor does it provide the services that would be available under the program established by HB 2392.

**OPPONENTS  
SAY:**

HB 2392 unnecessarily would create a new, expanded veterans' mental health program when a similar program already exists. DSHS already offers a robust array of mental health services that includes an intervention program for veterans with a peer-to-peer counseling component.

**NOTES:**

The companion bill, SB 898 by Van de Putte, was passed by the Senate by a vote of 31-0 on April 15. It was reported favorably by the House Defense and Veterans' Affairs Committee on April 23.