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Vietnam New Jersey State Library **Testimony From the Public Hearing on**

> November 9, 1989 Jersey City Armory Jersey City, New Jersey

1 COMMISSION OF THE 2 STATE OF NEW JERSEY FOR 3 POST TRAUMATIC STRESS DISORDER 5 6 JERSEY CITY ARMORY Jersey City, New Jersey 8 Thursday, November 9, 1989 9 7:00 p.m. - 9:20 p.m. 10 11 BOARD MEMBERS: 12 JOHN DUBYNA, Vice-Chairman 13 STEVE SECARE 14 ABUBAKR SADIG 15 DAVID WELSH 16 17 ALSO PRESENT: 18 DEBORAH EGER, Project Specialist 19 GARY COOPER, Public Information Officer 20 21 22 SILVER & RENZI REPORTING SERVICE 23 824 West State Street 24 Trenton, New Jersey 08618 609-989-9191 800-792-8880 (TOLL FREE IN N.J.) 2.5

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MR. DUBYNA: I'd like to have everyone rise for the pledge of allegiance and a moment of silence for POWs and MIAs.

Thank you. Please, be seated.

Good evening. Welcome to the first

New Jersey public hearing held by the commission to study post traumatic stress in Vietnam veterans. name is John Dubyna. I'm the vice-chairman of this commission. I'm also a disabled Vietnam veteran. you hear me taking deep breaths, I am. Unfortunately, Dr. Richard Reed, our chairman, has suffered a stroke and is unable to attend tonight's hearing. Seated with me are other members of the commission. left is Steve Secare and to his left is David Welsh. The PTSD Commission was created by an enactment of the state legislature to study, analyze and review post traumatic stress suffered by many Vietnam veterans. The commission is obligated under the law to report its findings with recommendations to the State legislature and to the governor. All of us appointed to this commission have served in Vietnam. your ranks, we have combat veterans, some disabled, as well as professionals who have direct knowledge of post traumatic stress.

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Since January of this year, with cooperation of the New Jersey Department of Military and Veterans Affairs, the commission has conducted meetings, listened to medical experts, and analyzed materials to better understand PTSD. PTSD is a disorder that has effected thousands of Vietnam vets and their families. And there is no doubt that it is caused by combat and combat related stress.

Tonight we will hear testimony from our brother veterans who served in Vietnam and those with first-hand knowledge of the problems associated with PTSD. We will be listening to your suggestions and your recommendations on what you think should be done for our brothers and sisters who suffered from PTSD. The commission will then study and review all testimony to better understand the needs of the New Jersey Vietnam vet. And for that purpose, we have set up several public hearings throughout the state, at least three. An open public forum such as this one will help the commission in assessing what the vets -- what we the vets and our families need. why we need your help. Our next step is to bring our recommendations to the legislature and the governor. Our recommendations will be heard by all the

appropriate authorities.

Tonight I will be acting as moderator and will ask that you kindly listen to whatever questions or instructions are necessary. We ask each speaker to come to the microphone, identify yourself by name and address and speak on the issue of PTSD and the needs of the Vietnam vets. Because of time limitations and for the sake of order, speakers will be limited to five minutes. For those who wish to remain anonymous, you may do so. For those who do not wish to speak but would like to submit a written statement, please come up after the hearing and Debbie Eger, our project coordinator, will provide a mailing address for you. All information will be helpful to us. And all written statements will be made part of the public record. Once again, I welcome you and want to personally thank each and every one of you for coming tonight. I am sure this evening will be beneficial to all of us. Thank you.

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Is Mr. William Roberts present?

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Mr. David Martin present?

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The timing system is set up so that

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four minutes into your time--you don't have to talk

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for four or five minutes--but four minutes into your

topic a little light at the end of the table will come on. That means that you have one minute left. The light will thereafter go out which signifies that you have 15 seconds left. At that point, you should start wrapping up your statement. With 15 seconds left, you should be finished and saying good-bye.

If you find yourself running short on time, you can, as John said, submit more testimony in writing to the commission at that address.

MR. MARTIN: My name is Dave Martin and I am the founder of Vietnam Combat Veterans
Coalition in Trenton. The PTSD Commission was established to study and treat Vietnam veterans with PTSD and we're here to make sure you get it right.
We're the only veterans organization in the state composed entirely of PTSD patients. Vietnam Combat Veterans Coalition has been advocating for the rights of justice for veterans since July 1979. We are composed of infantry, combat Vietnam veterans and a few honorary members. We are the peons, troopies, airborne, straightlegs and grunts who fought the damn war. We fought while senators' sons dodged the draft.

MR. DUBYNA: The court reporter is

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taking down everything that you say. If you're going to read it, could you go just take it a little bit slower for her benefit.

MR. MARTIN: That's the first I heard about this rule was right not. My time is going.

MR. DUBYNA: I'm only asking you as a matter of coutesy so she can take it down.

MR. MARTIN: We fought while senators' sons dodged the draft. We are the experts on Vietnam and PTSD in this country. We did the dirty work. We humped endless hot miles across mountains rice paddies, elephant grass, jungles, rivers, swamps, scum, mud, dust and slime. We endured months of cold monsoon rains far into the bush. We suffered the sad lonely days on operations. Night ambushes and listening posts tested our nerve. Human wave attacks, artillery barrages taught us terror. Death and mutilation brought us horror. Friendly fire killed our brothers. Twenty year old C-rations were our every meal besieged outposts in the boonies were as close to the rear as we came. Leeches, mosquitoes, scorpions, flies, fire ants, rats, hornets, unknown bugs and snakes were our constant companions. We had no women, movies, drugs or booze. Diarrhea, dysentery, heat

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stroke, heat exhaustion, lack of sleep and bone weary fatique wore us down. Death, fear, pain, sweat, blood, filth, hate and loss of hope found a place in our hearts and minds. We were sprayed and betrayed with Agent Orange by our own government. The light at the end of the tunnel was hard to see from where we were. Dear John letters cruelly tore our hearts our. Confusion often set in. Home was remote to our tortured lives. But the fading thought of it kept us going. No one knew of the horror we were going through. In spite of it all we did our duty with the special courage only a combat infantryman knows. Vietnam combat infantry veterans proved to be the best and toughest soldiers and Marines this country ever had. We put one million enemy communist soldiers in their graves in the name of the people of the United States of America. What a shock this country had for us; demonstrations, apathy, mockery, contempt, unemployment and alienation were our rewards. They called us baby killers, drug-crazed and losers. They took the best of our generation and bled us dry. They poisoned us. They raped our pride. They killed our They insulted our honor. They maimed our bodies and our souls. They wasted our youth. They

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made us scapegoats. We won every battle but they pulled us out and let south Vietnam die. Now they want us to forget.

We of the Vietnam Combat Veterans
Coalition will never forget. We will continue to
advocate for a cure or Agent Orange disease; for the
return of our POWs and MIAs; for help with PTSD; for
proper treatment at VA facilities; for justice,
compassion and understanding for Vietnam veterans; for
the truth to be told about the Vietnam War. We shall
never stop until we win. Our backs are to the wall.
We need help for the best our country had in time of
war. Don't turn your backs on us or give us lip
service when we need our country and our state to help
us.

Vietnam Combat Veterans Coalition proposes the following to the PTSD Commission in order to effectively help us;

- 1) Set up a veterans advisory committee composed of combat Vietnam veterans to advise you.
 - 2) Abide by the Open Public Meetings Act.
- 3) Give us all the minutes of each meeting you've had the last two years you've been meeting in secret.

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4) Give us a list of the military, educational and PTSD experiences or training of each member.

- 5) Set up a data bank on PTSD and make it available to us.
- 6) Compile data on the PTSD Counseling Program of NJDMVA.
 - 7) Monitor the VA's handling of PTSD claims.
- 8) Define and understand differences between PTSD and readjustment disorder.
- 9) Understand that PTSD means Post--after the fact, Traumatic--trauma, shock, battle shock, Stress--strain shock reaction, Disorder--disease, illness, affliction.
- 10) PTSD can be just as disabling as a missing eye or amputated leg.
- 11) Get in tine with Black and Hispanic Vietnam veterans to get their input.
- soldiers and Marines, the battles we fought, the times we helped children of Vietnamese and how our corpsmen and medics did much good, how Marines developed and helped rice harvests for the South Vietnamese, how our friends died defending South Vietnam's right to be free and of how we won every major battle of that war.

2 13) Tell of how most of us try to work hard, 3 raise families and be good Americans. We don't burn 4 flags. We do our best in spite of our problems.

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- 14) Be advocates for Vietnam veterans. Help us. Be our affirmative action program.

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15) Use National Guard doctors to treat us for What better training for combat stress for them than to treat us.

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16) Expand the PTSD Counseling Program of NJDMVA into each county and give equal openings; Mercer only has five to the dozens and dozens in other counties. Are we not equal?

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> 17) Train the State's Veterans Service Officers on PTSD. The need a lot of help.

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18) Involve the veteran organizations and get their input and expertise, if any.

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19) Provide transportation to Lyons VA Hospital and other VA hospitals at night or during the day so veterans can get the counseling that's available but not accessible

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or won't produce, leave.

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20) Eliminate some or all of the dead wood on the Commission that's getting in the way of progress.

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We haven't seen you do anything yet and if you can't

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In closing, I state that Vietnam veterans, especially combat infantry veterans, are the best soldiers and Marines America ever sent to war. I am proud to know and work with many of these patriots. They are my heroes. If you could have seen them fight when the fighting was hot, or seen them care for each other in their world of hate and death, they'd be your heroes too.

I ask you to open your hearts to them and their spouses and especially to their children by helping Vietnam veterans, America's true heroes. You can help undo the wrong of the past and make life better for their children who are our future.

MR. DUBYNA: Is Mr. Frank Rickette present?

MR. RICKETTE: Frank Rickette, vet and member of the Veterans Coalition. Mr. Martin, who is a co-founder and friend of mine just talked about just about everything. I have a couple things to say.

One of them is like this is really a disgrace to have this meeting in this place. This really sucks, really sucks. I mean like who is Debbie Eger? I want to talk to her. This really stinks. If

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you're the coordinator, you should be fired. I'm serious. This is disgusting. This should never have taken place in this place.

I have a couple things to say besides that. I want to say that since 1987, you have had this commission. Nobody knew about it. Nobody knew where you met. It was all secret, the way that the people were reporting was a secret. It's a disgrace. The point that you are having a public meeting after the fact, it's all bull. This is why—and you wonder why people say we're angry and we're hostile. That's why we're fucking hostile. That's why, we're sick of your shit. We're sick of this shit that we have been treated since we came back and you are just adding to it instead of helping us. You are adding to our stress. Well, you want to see stress, all of these guys got stress. We all have stress.

If you want to help us, help us.

This is a fucking disgrace, this whole thing here.

And from the top guy who put this together to the whoever had anything to do with it. Really, that's how I feel.

 $$\operatorname{\mathtt{And}}$ I just want to say that PTSD takes on a lot of forms and I want to talk about him

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other than to say that he mentioned in the newspaper article that PTSD can take on many kinds of -- he said like you have a sleeping disorder. You can have PTSD from being in a bad automobile accident. You can have PTSD from the people that were in the earthquake in Southern California. But that lasted a short time. You're talking about guys here that fought their asses off for a year over there and got nothing for it, just slapped in the face. And we're sick and tired and we're going to keep fighting. And if you guys here in this commission want to help, then you can help us by listening to what we have to say here tonight. And this is a disgrace. I mean what kind of place is this? You come in here--I got bad They got problems. You got smoke and shit and this is shit. I got asthma. I come into here and I have put up with this shit. This is a fucking disgrace. It really is. That's all I have to say. Thank you, sir. MR. DUBYNA:

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We do agree with the conditions,

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they're terrible.

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I'm a director of Division of Psychological Services

DR. PETRONKO: Dr. Michael Petronko.

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which was one of the first nongovernment outpatient

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clinics for PTSD in the state. I want to do three things. I want to comment on how serious PTSD is. I want to comment on how extensive PTSD is. I want to comment on what's being done about it and give you some suggestions as to what I think you should do.

First of all, let's just look at a couple of things that compromise PTSD and this is from the DSM-3 Diagnostic and Statistical Manual for the American Psychiatric Association. The traumatic emphasis and experience in at least one of the following ways; recurring and intrusive distressing recollections of the event, recurrent distressing dreams of the event and/or feelings that the traumatic event is reoccurring episodes, even though they occurred upon waking hours and another experience that causes the veteran to reexperience that event. For instance, psychological distress and exposure event that symbolize or resemble an aspect of the traumatic event.

Let's go on. As indicated by three of the following; efforts to avoid thoughts or feelings associated the trauma, efforts to avoid activity or a situation that will arouse recollections of the trauma, etc. I think what we have to realize

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here is that PTSD is a serious problem, a serious problem, not something that goes away. There is a myth that is perpetuated, I think, regarding PTSD and how extensive it is.

I hold in front of me here a study that was done at the Research Triangle at the insistence of the Senator Cranston on PTSD. document, this study was quoted as being one of the most significant comprehensive studies ever done of its kind in this nation on any disease on any epidemiological study. They interviewed more than 6,000 veterans, giving more than six hours of individual interview to each of the veterans in 50 states with Puerto Rico. And the one of the reasons why they did this study was to try to determine how extensive this PTSD is. More than eight million men and women in the military during the Vietnam era; of that, a little bit more than three million saw service in the country. Of that number, based on this study, it was determined that 15.3 percent plus or minus 2.6 error rate of all male veterans experience PTSD. That's 480,000 men in this country. Now, let me go on. Of that number, it was determined that three to five times that rate, that is 15 percent rate of

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Vietnam veterans that actually saw what they

considered to be serious combat, were more likely to

experience PTSD. So therefore, 38.7 percent of

veterans experience combat or stress on that level in that country have PTSD. What is that number?

308,000. That's national. What does it mean to us?

When I first started the PTSD project in Fairleigh Dickinson in 1983, it was estimated that there was 240,000 veterans in North Jersey who were in Vietnam. Using that 15 percent number, that would mean that more than 36,000 veterans in North Jersey have PTSD.

Now, if it were just the veteran alone, it would be bad enough. Let's assume that each of those veterans has been married more than once. Those who experience severe levels of PTSD are generally married more than once because the condition involves not only them but their loved ones. If we were to multiply two women, perhaps two children, times that number, we have much more than 100,000 people in North Jersey alone that are affected by this condition.

Within five minutes, I have been able to demonstrate it's a serious condition, that it's

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extensive. What have we done about it? When this no hassles program to give counseling, readjustment counseling, whatever they call it, to veterans in the very beginning, when I was involved, my clinic saw 123 veterans. We provided approximately 2600 individual hours of psychotherapy and about 500 hours of group therapy to that group. That period was 4/1/83 to essentially 3/31/87. Since that funding stopped, we have provided the following—first, approximately a year ago, and DBA Post 151, a contract with the State to provided low cost services to veterans. In that time—remember before 2600 sessions. Since 1/1/89 to present, we've given 138 sessions to those veterans.

How come? Certainly the seriousness of the condition hasn't changed. The extensiveness of the situation hasn't changed. I think there is inherent problems in the system. The problem in the system is that PTSD is still in the closet. My recommendations, I think we have to go back to a time when the hassles in the system are taken out. We have to come out of the closet and do a lot more education and especially outreach, because this condition is the fact that the vet doesn't want the authority. And yet

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he's burdened by it. There is literally no outreach done whatsoever. And I ask you and I ask you that here. Thank you.

MR. DUBYNA: Dr. Eli Alson.

Eli Alson. DR. ALSON: I live in Denville, New Jersey. My acquaintance with PTSD with the combat veteran began before there was accepted diagnostic classification and my commitment to treatment in an organized program began before classification was announced, I think in 1980. that time, I decided to initiate an outpatient program at Lyons VA Medical Center and we presented a seminar on treatment. We presented a seminar on our treatment program at the first national conference on Post Traumatic Stress Syndrome -- that was before it was called PTSD. There was no direct line because the VA was just beginning to organize a response to the belated recognition of the needs of these veterans. Young men tormented by the experience is an unpopularity that found themselves trying to catch up to men and women their own age who stayed home, in terms of personal development, families. Many have insistent intrusive experiences stemming from traumatic experiences not yet resolved. They may have

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different ties in this relationships with others and they that have not found the inner peace that they so well deserve. The State of New Jersey began to organize its response much later. When I retired from the VA and I sought to continue service to the VA programs and providing help in the veteran's community, I see the needs for these services as continuing. There are still troubled veterans now gaining courage to come for help, if they know where they can find it. And they come from all walks of life and are often not aware of the nature of their problems. Even when they begin to reach out for help, unfortunately, not all of the mental health professional community is alert to the condition. Though they show their own emotional discomfort, they are not prepared to listen and respond to the horrendous experiences suffered by the veterans, though the veteran desperately needs a listening ear. The patient retreats and does not burden the therapist and the opportunity for healing is aborted. Even more likely the therapist may miss the significance of the recurring nightmares and thoughts that attempted to feel her as to whether it is safe or okay to begin to talk about the trauma, things that he or she has been

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reluctant to share with the closest of family and friends.

The program is fortunate to have located counselors who can work effectively in this difficult area. In my own experience, I have seen veterans progress worrying about anger exploding in violent ways to directing their dissatisfaction into components, helping the cause as they feel relevant becoming emotionally closer to the significant people in their lives.

I see veterans regress from alcohol and drugs being used as an inappropriate self-medication. I have heard of them becoming responsible for themselves and others. The well being of his children, wives or husbands was also very much affected. New lives have emerged as the veterans succeed in treatment, but If eligibility under the VA program has run out at a critical time and New Jersey picks it up, the vital service has been performed. New Jersey may be able to relate to veterans who is not been able to relate to the VA.

by; one, additional committment to funds. Some veterans applied for services have been given

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indefinite or prolonged estimates of the time before services can be supported.

Two, by reliable and rapid response for the program day keepers, such as the DSO, when a vet calls, they appear to be spread very thin. The vet make take failure to return the phone call as evidence of rejection.

Three, by preliminary screening evaluations of services, some identification of HUD situations could avoid tragic results.

Four, by training of the day keepers to identify veterans with further evaluation for PTSD and creating greater awareness and communicate keepers of the nature of PTSD and of the services provided by the Department of Military and Veterans Affairs.

Lastly, by adequately publicizing and educating the public as to PTSD and as to the availability of services to help alleviate them.

Thank you.

MR. DUBYNA: Is Mr. Bill Hill present?

MR. HILL: Bill Hill. I'm going to make this very brief. I'm going to make it very brief in terms of what I would like to see in terms of

recommendations to the New Jersey PTSD Commission in terms of working closer, in terms of reaching out and looking at the issues based on the fact of the new study which was conducted by the Veterans

Administration that 479,000 veterans are suffering from PTSD in terms of saying that in some sort of network where we can work together. This is a most highly populated area in terms of veterans.

Therefore, one of my recommendations would be just to expand our network and services in terms of mutually bridging the gap with the VA, in terms of other agencies, community mental health, whereby we can service more veterans. I want to thank you.

MR. DUBYNA: Leon Wilson.

MR. WILSON: Mr. Chairman, ladies and gentlemen, fellow veterans; my name is Leon Wilson. I don't have post traumatic stress. I have been talking about my veteran experiences for the past 20 years. And as a result of my talking about it, I have been able to cope with it each and every day. That has not been the case with a number of people that I counsel. I am a readjustment counselor at the Newark vet center. The uniqueness of our vet center is that we use a combination to veterans and make them feel

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important. One of the most difficult situations for me when I had returned from Vietnam was--see, I'm a And I have lived with that proud Vietnam veteran. experience even when it wasn't so popular. I remember when PTSD was first talked about, it was given a lot of negative press, negative connotations that there was something wrong with you if you had PTSD. war is a very chaotic experience. It's a madness and that madness has an effect on the normal human being. It changes you. And as a result of that change, you see life from a different perspective and there are a number of veterans who have been coping with their Vietnam experience silently. They have been stuffing it and stuffing it and stuffing it. And eventually, you implode rather than explode. Maybe when you start to reach your 40's, 40, 42, 43, all of the sudden, you start to go back 20 years to where you were. that's when PTSD comes out. You start to think about the friends that you had at that time in your life. Unresolved issues start to come back and memories start to come back. And some of those memories come back and hit you very hard. That's what they call flashbacks. Well, flashbacks are very difficult to cope with because flashbacks can leave you emotionally

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drained and emotionally bleeding. And it's my job and my team at the Newark Vet Center and the same in Jersey City is to put a Band-Aid on veterans who finally start to recognize that they might possibly have PTSD.

7 Now, PTSD has something like eight to 8 ten symptoms to have full blown PTSD. But there is 9 some veterans who only have one or two symptoms who 10 have been coping ever since they returned from 11 Vietnam. They have come back, started families, started businesses, returned to school, got degrees 12 13 and all of the sudden, get into their 40's and 14 everything seems to be coming apart. And the wives of 15 the Vietnam veterans can tell you what the effect of 16 PTSD is on them because they're seeing the symptoms. 17 We vets deserve all of the assistance possible to deal 18 with our readjustment from Vietnam. Not just when we 19 came back home but for the rest of our life. That's 20 the debt that is owed to us. And with that debt comes 21 first understanding, understanding that we didn't ask 22 for post traumatic stress. But that's what happens 23 when you go through a traumatic situation. The same 24 thing that happened to the folks that went through

Hurricane Hugo when it brought its force onto the

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continent of the United States. Those people had post traumatic stress. When Mount St. Helen's blew her top, that caused PTSD, traumatic situation. PTSD has been also diagnosed and used for other situations that were traumatic.

Even though I know we're only talking about it, people need to recognize post traumatic stress as being legitimate and also something not to be ashamed of. Maybe that way we'll start to get some treatment and some treatment for the rest of their Because if you have PTSD, it's treatable. you are going to have it for the rest of your life. And it's going to effect you, your family, your friends and anybody that comes in contact with you. They have to kind of understand and the legacy of How far will this experience go into the next generation and the next generation? Unless we treat it now, ten years from now when myself and a number of these veterans are in our 60's, there will be individuals -- as a matter of fact, the population of New Jersey will be nothing but veterans, first-hand veterans. Meaning you can reach out and touch your father, your uncle, your sister or your aunt who was a veteran. And who may at that particular time may have

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had some readjustment problems. I deal with the individuals who self-medicate, some with alcohol, some with drugs and some with both. And I have to sit down and tell them that it's treatable and they can forget those other dependencies and deal with this situation.

My recommendations to you that PTSD be given the same kind of consideration that we do when we fight a war because wars don't just stop when we declare them to be over. Wars go on for generations. And the legacy of Vietnam is that PTSD is real and it's going to continue to be real. And unless individuals start treating the veterans, it's going to go into the next generation by assimilation. And then we'll have another generation that will have to cope. I thank you.

MR. DUBYNA: George Greenleaf.

MR. GREENLEAF: Ladies and gentlemen, my name is George Greenleaf. I suffer from delayed PTSD. I went to a Vietnam in 1967. My experience in Vietnam was to go to the field for 30 days and come back to base camp for two days. Then go to the field for 30 days and search and destroy and come back to base camp for two days. This continued for a period

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of eight months. I was sent over there again and those are the last remaining eight months of military service which was three years. During my tour, I never received any wounds in the physical sense; however, psychologically I was wounded 24 times. In fact, my first experience was my third day in the country and I was on patrol and the person in front of me, his foot hit a booby trap. His head went south and his body continued to walk north. I still carry that psychological wound with me today.

Upon my return from Vietnam in 1967, I tried to find some type of aid. At that period, according to the VA, there was no such thing as delayed PTSD. When I did find out that people were being treated, it was 1981. And there was a waiting list. Here it is now 1989 and I'm still waiting for that help. The Newark Vet Center is my crutch, but for Newark to be a heavily densely populated area, we only have one veteran center and they're understaffed. So my proposal to you is when do the walking wounded receive aid? Thank you.

MR. DUBYNA: Gary Kirkland.

 $$\operatorname{MR.}$$ KIRKLAND: First of all, I'd like to greet all the brothers and say to those who haven't

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been welcomed back, welcome back. I myself am I Vietnam vet and for the last ten years I have worked as what is known as a disabled veteran outreach program specialist. So therefore as far as PTSD, I have first-hand experience with the present situation. And with my job a lot of times before we can refer men out on the job, we have to assess if they're job ready. And I find that a lot of veterans that come to the office because they're suffering from PTSD are not job ready. So what my position is to refer them to a vet center, which for the last ten years has been very successful in dealing with a lot of veterans that had post traumatic stress. With my job, guys would come into my office for no reason and breakdown crying. There were times when I would have to leave the office to go get a veteran and bring him to the vet center, or even bring him to the VA Hospital from post traumatic stress. I see there are a lot of Vietnam veterans trying to forget the war through using drugs and alcohol. Recently, I just took a vet from the bay on New Jersey to dry out in the ARU unit. Now, his situation is different because he doesn't want to face -- he was -- his situation is different because he doesn't want to face the reality

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that he suffered with a problem. And I said listen, you have to talk to your mother and father. talk to your mother and father about it? He says no, I don't want you to bring that post traumatic stress stuff to my mother and father. I don't want to hear nothing about that. So some guys are trying to still hide behind closed doors and they're not aware of the situation and are not aware that post traumatic stress is something. As far as the job market is concerned, what happens with the veterans with post traumatic stress? He never holds down a job. He goes from job to job to job for the past ten years. There are guys that I'm still trying to help who have post traumatic stress. Some guys that have acknowledged that they had a problem and sit down with a counselor and maybe groups or have become successful because they're dealing with that situation.

I myself as a Vietnam vet, deal with my own mental problems. I believe I can account for my own internal success because I have a personal trust in the Lord Jesus Christ. But other veterans, because they lack faith and lack confidence and backup, are going around in circles so to speak wondering in the wilderness. And it's time for us to

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wake up and make a stand and acknowledge the situation and grab them brothers by the arms and by the shoulders and bring them in and see what we can do for them and see if we can so to speak lay down our life for our brother. Thank you.

MR. DUBYNA: David Cline.

MR. CLINE: I live is Jersey City. served in Vietnam 1967 with a 25th Infantry Division. From the time I was there, I received two gun shot wounds and one shrapnel wound, a 40 percent disability from those wounds. When I came back from the war, I really didn't know so much with post traumatic stress--back in those days we called it PV Syndrome, Post Vietnam Syndrome. As you talk to this, when did you go violent? PVS attack and I didn't understand like how that impact of the war-how the war had impacted on me personally. And I can remember all the time we in the military was going unsighted. There were going to make men out of us. We were just boys when we went over there. They went out and then they taught us things. They taught us how not to feel when we saw our friends get killed. They taught us to just keep going. How that is making a man or a human being out of you, but that's what they taught me. And I

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have had a lot of problems since that in terms of my relationships with my wife, my family. People talk about Medicaid -- self-medicating, drinking and I found after the war I found myself a lot drugging. of times getting drunk wanting to forget about stuff, being depressed, being unhappy and just feeling generally lousy about myself. After a while, I started--I went down to the vet center in Jersey City and became involved with their rap groups. They began dealing with that and dealing with some of the feelings I had with Vietnam and working to try and see that this country doesn't repeat that with the next generation. And I spent quite a bit of time in rap groups. There is several people here that I saw in that group. One of the outcomes of that was I was granted a disability by the VA for post traumatic stress as well.

After two years of that, they cut my disability of post traumatic stress back from 30 percent to ten percent. And I still don't understand how they can say to cut your disability the VA gave you that and after all these years we don't have to compensate you to deal with the fact that you spent the last 20 years of your life being unhappy. And we

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can just deal with the fact that we gave you a few bucks and we're going to let it go. It just doesn't make sense to me. It doesn't make sense to me that we have so few vet centers throughout New Jersey, so few outreach programs in the whole State of New Jersey. There is four vet centers in New York City. We got the whole state of New Jersey. It doesn't make sense to me that there is not job programs going.

One thing in particular that doesn't make sense to me is that we don't have anything to deal with the homeless vet situation in this state. In New York City they have special facilities out Borden Avenue in Queens, veterans residences which is specifically set up for homeless veterans. Not because homeless veterans are better than anyone else. Every American has a right to a home. Everyone has a right to housing. But because of this issue of post traumatic stress, many vets have problems that are different than other homeless people. State of New Jersey, we have no homeless shelters. Ι was at Jersey City the other night, shelters in Jersey City, in Union City and this whole area are run by churches. There is no government funding. There is no government contracts to maintain these shelters.

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And there is no veterans residences set up to help veterans who are homeless and need counseling. I think that today in the New York election if Dinkins became elected mayor a part of his thing is to build more veteran homes. We should have that with Florio if he was elected governor. I hope we see some changes on this side of the river with him.

People talk about how many veterans are in this area? What, do we drive all of our homeless across to New York because we don't deal with them?

The last thing I want to say is that it is good these hearings are being held. I'm not familiar with all the ins and outs of secret meetings and all that, but I'm glad there are public hearings. One thing we don't need is we don't need another commission to issue reports. We do need reports, but what we need are programs and social action. Reports are fine and politicians have to make a living issuing reports and shuffling paper while we pay their tax dollar. We put our lives on the line. Now we expect something in return and we hope that this commission leads us to get programs, and particularly a home for homeless veterans. Thank you.

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MR. DUBYNA: Richard Bergen.

MR. BERGEN: Richard Bergen. I'm a combat vet of the Vietnam War. I received 40 percent disability for post traumatic stress. I got a lot to say, but I only got a little bit of time.

As I see it, we got basically four kinds of veterans. You have the ones that are locked up in hospitals, the ones that are locked up in prisons, the ones that are on the streets and you have got the ones that are sleeping on their mother's couch. I have been all four. Today I'm trying to be a productive member of society. And I couldn't do that without a lot of help.

Two and half years ago I went through a post traumatic stress unit at Lyons VA Hospital and I told the people there that they work for the VA and I didn't trust them. And the lady down there told me that she didn't work for the VA. She worked at the VA and she worked or Vietnam veterans and that she was a veteran and that the people in that unit helped me a great deal. I'm also a member of the Narcotics Anonymous Fellowship. Because since 1970 when I was in Vietnam until 1987 I was a heroin addict and cocaine addict and any other addict you want me to

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be. I took whatever I could get so I wouldn't have to deal with me. I have had about 75 different jobs and I still can't hold a job.

But today I worked for myself. just started a business about a month ago with a friend of mine and I'm working for myself today. don't have to put up with nobody's shit. The only way that I can help myself is with the help of other people. I have gotten very little help from the VA, the State of New Jersey. A man by the name of Fred Generaldi from the rehab office got me started in college two years ago. After my first semester, I had to get me to the VA rehab and I have been attending college for the last two years. With the help of the people in narcotics, I have managed to stay clean for two and a half years. And because I stayed clean and because I worked damn hard every day to get my ass out of bed and go out and try and be a productive member of society, my life is better today. I worked hard today at just being a human being. It's very hard. lived in the woods. I lived in the street for 17 years.

MR. DUBYNA: Would you attribute this to the Narcotics Anonymous, your feelings about going

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back into society and working for yourself?

MR. BERGEN: The people in Narcotics Anonymous, the Fellowship of Narcotics Anonymous has helped me to stay sober one day at a time.

I don't want to be a productive member of society. To be very frank with you, this fucking country and this government can go to fucking hell. That's how I feel about it. That's how much anger I have inside of me for my country for what they did to me and my brothers. They sent me to the other side of the world to some dinky little country who couldn't hurt nobody and had us kill everybody we could.

I have told I don't know how many doctors that I have homicidal tendencies. I think about hurting people. And I have hurt people. I have been in jail for it. Today I try to control those tendencies. Today I see a guy--I don't know see him--Dr. Alson, the state pays for me to see Dr. Alson. The federal government paid for one year. Today the state pays for it. The State of New Jersey is doing a lot to help veterans. I never heard of this going on anywhere. But the state thing for post traumatic stress, I think this is wonderful. I think

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a lot more needs to be done. Not only help from a professional from the State, but by Vietnam veterans.

I have a brother who has post traumatic stress. He takes three or four different psychotropic drugs and he stays on my mother's couch all day long. He's on Mellaril and he don't do nothing. That's his life, to lay on my mother's couch because he don't want to do nothing. You know. don't want to do that. I want to be a human being. have a beautiful girlfriend that wants to marry me. don't know why she wants to marry me, but she wants to marry me. I want to have a life. And I'm willing to do whatever I have to do to have that life. You can't just say help us. We got to help ourselves too. like Dennis are helping and Joyce Cohen. We got to do it too. We can hold out our hand, but if you don't get up on your feet and walk, we can't just cry all day. We have to get together and we have to help ourselves. You know. The only way I can help myself today is if I stay sober today. If I go out and get drunk, I'm back in the street. I'm back with the gun in my hand taking somebody's money and then I'm back

So there is a lot of guys in prison.

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in prison.

I was reading about a guy the other day in the paper. He murdered a lady that owned a bar over here. She's a Vietnam vet and he shot her for nothing. I understand him. I know why he shot her for nothing because he don't care about her. And he probably thinks he's better off locked up in a prison somewhere. I always thought that I was better off when they locked me up because I felt like an animal. I felt unwanted in my own country, you know. I had to seek out the help and I had to really want it. You really got to want it.

And I see black men here. He knows what I mean when I say I had to work twice as hard at something to get where I am because the black people in this county have to work twice as hard as the guy next to them to get where they are today. I go down to the VA to give them to rehab and they still tell me I have to maintain a B average to go to college. Everybody else has to have a B. I have to have a B. But that's what I have to do. That's what I got to do. I do whatever I have to do today to make my life better today.

There is a lot of people walking around with post traumatic stress. There are women

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whose father's raped them for ten years when they were children. There is guys that have all kinds of situations. Post traumatic stress is not owned by Vietnam veterans. There are a lot of them with it and we need help. We need help in how to learn to live again in the world, in the world and in the country that I have a great deal of anger for. I have a great deal of anger for my country and I really don't want to be no part of it, but what's my choice to go backup back up in the woods and get drunk and be a bum in the streets and to go to prison? I have done all of those things in the last 17 years. I have no choice. to do something for me.

I only know I got to tell you guys I stay sober today and I have two and a half years clean today and I am proud of that and that's the only thing that keeps me going.

MR. DYBYNA: Dennis Regynye.

MR. REGYNYE: Dennis Regynye. I'm associated with Chapter 151, Vietnam Veterans of America. Until December 30, 1988, I was programmed coordinator for post traumatic stress counseling through the state through the Department of Military and Veterans Affairs. In my time as program

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coordinator, I have found that one of the major problems in the state is the referral system, meaning state and county VSO. I feel that the commission should get in tune to the Department of Military and Veterans Affairs and get together with their VSO and train them in handling the problem. Since the state took the program away from Chapter 151, I have done some surveying with the clinics that we contracted. Within a year that the department took the contract from us, there were only two referrals within a year. We're looking into with problem. The VSO is not doing their jobs. They're not helping out the veterans. Most of the veterans don't even know what post traumatic stress is -- what it is until they stumble on somebody who has it. I had a lot of other things to add, but everybody just about covered what I was going to say.

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MR. DUBYNA: Michael Colicchio.

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MR. COLICCHIO: Michael Colicchio at

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Chapter 151. I didn't plan on speaking tonight, but

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you have heard a number of people up here expressing

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themselves regarding post traumatic stress, some quite

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eloquently, others vocally and angrily. Everybody is

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communicating here. They are vital parts of society.

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They're keeping with their experiences, when they have to, when they can. What I'm concerned about is when they can't cope.

Agency from 151 and I share some of his concerns about service offices. When these people cannot cope, they need help. I would hope that the commission would consider returning the agency situation back to the local chapters. We had quite a number of people involved and we saw amazing success coming from it. I feel they just don't trust the establishment type of treatment they received from the service offices and I would hope that simply they would be willing to reconsider this option in running the program. Thank you.

MR. DUBYNA: Steve Shuey.

MR. SHUEY: I'm representing CWA Working Committee on Veterans. Since I have five minutes, I'd like to submit my first few to Dennis, team leader, who is presently a contractor with the VA on counseling Vietnam veterans and is himself a disabled Vietnam vet.

MR. KEELY: Steve said I'm 100 percent disabled Vietnam combat veteran. I know what

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one of the people on the committee tonight introduced himself as a combat veteran and what I'm saying to the commission is, that doesn't qualify somebody to sit on a Post Traumatic Stress Commission like that. I'm also a therapist and I have been working with Vietnam veterans for a number of years. And I think that that qualifies somebody like me or somebody like Dr. Petronko or Dr. Reilly here, to sit where you are sitting tonight. My question is, what are your credentials other than the fact that you are a Vietnam combat veteran?

I'd also like to comment on the fact like Frank Rickette said earlier that this commission, up until very recently, has been held in secret. And I don't understand why that's been so. I also don't understand why at this late date the state allocates a million and a half dollars—I think that's the correct figure—to fund the commission to find out what the needs of the Vietnam combat veterans are. There is a body of research available which has been available since the early 1970's. Since that time, which is over 15 years ago, there is a tremendous body of research made available. Out of some of the research done with Vietnam veterans, came the Society for

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Traumatic Studies which is made of the researchers, many of whom are Vietnam veterans.

So to sum it up, I'm asking you people, what the heck are you doing with a million and a half dollars? A million and a half dollars can buy a lot of services. If you want to know what the needs are of Vietnam veterans, why don't you ask some of the distinguished people you have here in your audience.

MR. SHUEY: Steve Shuey. I was an officer for the state. I have also been involved in PDR way back when before it was popular. I also have post traumatic stress. I was hired in 1984. And just briefly to give you an idea of the kind of people that are representing themselves now—there is a bit of theater here. This is timeliness in terms of the governor's election and it's attempt to promote some jobs for people who basically the only thing that qualifies them is that you are veterans and that's it.

This letter is a quote it's an affidavit that's going into my case. There has just been a settlement after three and half years of harassment as service officer in my attempt to get help for veterans and their families.

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(At this time, a letter is read into the record by Mr. Shuey.)

There is a number of affidavits that I have in the way they treat disabled veterans. As I have already stated, you have had enough time to get this together. I don't want to see this commission do more work in an attempt by some officials in this room to assure the public and these people they're going to do something about post traumatic stress. The key is hiring caring Vietnam veterans, hiring disabled veterans.

Now, I can go on and on and on, but I wanted, for the sake of the record, to give some sort of inkling. If you don't have caring people in there giving services, you just have veterans who will be cynical, self-serving political junk, then we're going to continue for another 20 years losing veterans and having veterans of broken families and disruptive lives. Thank you.

MR. DUBYNA: Gregory Payton.

MR. PAYTON: Gregory Payton. I'm a member of the VVAW. I'm a Vietnam veteran from 1967 to 1968. I just found it hard to believe that after 20 years of suffering that the state is just decided

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that they're going to form a commission to do something about veterans' situations. It seems to me that it doesn't take any mind for anyone to just recommend. We're suffering and dying in the streets on a daily basis. And if you just go to the VA Hospital and sit in one of them chairs for about four hours to see a doctor, for him to tell you to come back two more weeks later and tell you the same whole run around, then you don't understand some of the major problems that we have. Especially here in the State of New Jersey where we can run campaigns and spend millions of dollars. The question is a million and half dollars were allocated to this commission to set a budget is like what is actually going to take place as a result of these hearings.

I think that anybody that went to Vietnam suffers from post traumatic stress. Leaving your home and going 5,000 miles away and being involved in a war and then being released and put back out on the street needs counseling, any kind of reintroduction to society is a travesty in itself. But I want to point out that here in New Jersey, we have a situation where in the whole State of New Jersey have only 15 percent for post traumatic

stress. That's located in Lyons Hospital. 15 percent in the whole State of New Jersey. There are only 14 beds in the whole State of New Jersey for drug addiction. We know that 80 percent of the veterans suffer from some kind of substance abuse problem here in America. We don't need reports to remind us. We know that 30 percent of the prison population are veterans. But yet we're going to have a meeting to sit down and find out the problems that's going on with the veterans. Some of us that want substance abuse help, we want to improve our lives. We cannot do it because some bureaucracy, some old BS.

And I'm hoping, I would like to be optimistic, but the state hasn't showed me anything, this country hasn't showed me anything. I think, number one, that we're going to have to begin to have more outreach to veterans. I think that we're going to have to go in and start braking this down into communities and going in to talk to some people that couldn't be here today, that couldn't talk for themselves. I think that we certainly need for substance abuse treatment centers, treatment facilities. This is only 65 beds for alcoholism in the whole State of New Jersey sponsored by the VA.

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There are so many different things that we need, that I'm hoping, and I really would like to be optimistic that this commission would begin to start addressing these problems. We have been talking about that for 20 years.

I think everybody up there that is a veteran up there understands the problems that we go through. I want to say in closing that as go to veterans so go the country. Thank you.

MR. DUBYNA: I'd like to make a correction to some statements. PTSD has no budget to speak of. We do not have a million and a half dollars. We have zero budget in which to work with. The secret meetings that they referred to, I'd like to know more about that. Our first meeting began in January of this year.

MR. PAYTON: Nobody else knew about them. It was kept quiet. I asked for the minutes of your last meeting. They told me it was illegal.

MR. DUBYNA: You sat at one of our meetings; am I correct?

MR. PAYTON: It was March.

MR. DUBYNA: January.

MR. PAYTON: Meetings over at Passaic

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existed.

County and I asked for \$1700 to get Peter to put up and at sometime told you you had to get taught because you had a million and a half dollars. There are men here who were there. You said it. As for money, you said you had the money but you wanted \$1700 for our veterans group.

MR. DUBYNA: I understand that there was a million dollars. I'm starting to get worried about this. We could not have this money at that time I thought that we did have it.

We have more speakers.

MR. DUBYNA: Florencio Lebron.

MR. LEBRON: For a long period of time I have been trying to find out what is the origin of this commission. I have even asked elected officials to try and find it as a personal favor. Until I came across a small town newspaper article about this commission, I never would have known it had

At the time we had a veteran who was unemployed because every time he got up on heights, he was having trouble with flashbacks. We couldn't get him a job. We couldn't get him in vocational training and the guy has been in the bottle and all kinds of

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disruptive problems. This has been several months now I have been trying to find him. Why do you exist? If there is so much literature that even a gentlemen who stood up before walked in with two briefcases, one of preprinted stuff and still told me about others that were available, I wonder why wasn't the research done.

What was my other question? Concerning the sunshine laws, which is another legal mud slide you guys fell into. Any way, you went in the press and you asked for 900,000 dollars. taken me over 20 years for me to get close to any Vietnam situation. I refuse to accept my GI bill. didn't touch it until I met veterans that I was working with on a one-to-one basis and later on when I found some guys that were in the service and saw a lot more action than I did, was I able to tolerate Vietnam and go to the memorial. I was there as a man of peace, as a clergyman. And I asked--they were chasing me across Passaic Park trying to get information to me as to what we did. And repeatedly I asked you what is the purpose of your commission? For what will you use information about the vet? Will it become a statistic? Will it become window dressing? Will it

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become rhetorical garbage to be used by politicians to enable them to climb across parties.

I still have nightmares about people I don't know, about guys that I met in the country who told me about what they did on patrol. I was debriefed, in essence. I was also a guy who sent out other guys who never came back. As a clinician, I'm finding out that most of the rage that I had in the past may have been related to war, may have been related to my own personality deficits.

But I still have a question. I will not climb to any victory, to any gain, on someone else's dead body. So I ask before I recognize this commission, you show me your credentials and I will help you.

MRS. CLINE: I'm Anna Cline. I'm a wife of a Vietnam vet. And I was very glad to hear people talk about the families of veterans needing support. I'm speaking for the families. I don't think there is enough support for the family system. Veterans depend a lot on their families because there hasn't been such support for them in the society. That puts a lot of strain on the family. And when we go to get help, sometimes a lot of times there is not

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enough support for children and wives in vet centers. They cut my husband's PTSD disability, without even interviewing him, much less interviewing me. I don't understand on what they could base that when they didn't know what the situation was. It's incredible to me that they have the power to do that. that a lot of the solution to solving the veterans feelings, bad feelings, about himself is not simply a pseudopatriotic pat on the back. The veterans guilts and rage or just ambivalent feelings about their participation in the Vietnam war which was a war on a civilian population; that these feelings are not treated with respect; that these feelings are not validated by the society or the country yet as real problems. And in fact, the VA does not even recognize this as a legitimate area, these morale issues. the vet as a person has to deal with these issues. Vets did the job of carrying out our government's policy and they learned the morale issues of the war first-hand in their experience. There is no question that morale sense is part of your self-esteem. Americans are raised to price the values of fair play, honesty, protection of the week, especially children, and also to love and respect the land. These are

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values we are raised with and that the war in Vietnam obviously violated on a massive scale every single one of these ethics. I was in a wives' group. And every time I tried to raise a morale question or anybody did as a possible reason for the veterans withdrawal and lack of communication, this issue was called political. That was a way to pigeon hole this problem. I don't think this is simply a political issue. If your husband feels he participated in something wrong, that was really--I'm not talking about the demonstrations here raised. I'm talking about the veterans' own experience. Trying to limit the morale sense of it, that that only counts, what you do in this country. It only counts what you do with your family. It only counts what you do from now on. That kind of thinking cuts a vet in half. It just leaves half of him over there and the other half over here. And a person can't be a whole person with his family like that. And that's what happens. that happen. It happens to veterans even when they take an active position against things that they participated in that they think were wrong. unavoidable problem.

The only thing I think will help it

is more community involvement and recognition of the problem. I would like to see more state support for the vet and especially for the family of the vet.

That kind of cutting a person in half does not open channels for communication. Certainly, it reflects how the vet feels with his family because it affects his self-esteem, his ability to cope with his place in the home. So I made a mistake I was wrong. The coping ability of dealing with demands by children, anger and frustration by spouse, the vet sees it often as he's being attacked and instead of that he's being reached for. All of these kinds of things need a lot more understanding and work, people who care.

I just want to raise one more thing. There isn't enough support for veterans who are struggling to deal with substance abuse. Often times veterans when they do stop with help using substances and stop medicating themselves, go through more severe withdrawal in a sense or the withdrawal takes a new form. And it's very tough on the family and it's very confusing to the vet and sometimes the vet finds it hard to get support from traditional groups like AA and NA because he looks at these people and he says they're not veterans and they talk about stuff like

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what the vets often called bull shit, little stuff and they have trouble relating sometimes. I think there should be more vet groups dealing with the issues of substance abuse. They do get more support from each other. I also think there is a lack of understanding of this because I went through this experience to some extent myself.

9 MR. DUBYNA: Your time is up. If you 10 could wrap it up.

 $\label{eq:mrs.cline:} \text{MRS. CLINE: I have pretty much said}$ what I had to say. Thank you.

MR. DUBYNA: Thank you.

John Loughlin.

MR. LOUGHLIN: John Loughlin. You may be wondering, we received an invitation by the way--I'm representing the State of New Jersey American X-prisoners of War. I'm Chapter Commander. And I sympathize with the people who are here to speak as well as those of you who are seated. I think that I could probably in all humility helped to at least a small extent. We prisoners of war--and they include, by the way, World War II, we have I think not in our group, but throughout the country--we do have a think a few POWs here in Vietnam. We didn't get started,

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believe it or not, we're in the worse position than you Vietnam veterans. Our group and all the POW groups, we had a reunion. We started the Vietnam veterans. Don't let anyone ever tell you you were forgotten. We supported you to the hilt. We didn't get much help from the VA. It wasn't until the Iranian hostages came home, we realized the decorations they got and we had forgotten.

Let me give you some advice. Get after your politicians. We had talked to George Bush. As you know, he's a combat veteran. We had--of course you know our new governor, but he's a veteran. Get after your politicians. What we did was we got together. We now have six chapters of POWs throughout New Jersey representing close to 800 men. We went through the same things you went through.

When I was discharged, I went to drinking a bit and took me a few months to get back into college. For me, it wasn't the drugs. It wasn't the drinking. It was hard work. I went back to college. I got married. I worked day and night. And that sort of took care of me. And it wasn't until about ten years ago when we got together where we had post traumatic stress. We can tell you a hell of a

2 lot about post traumatic stress. We advised some of 3 the doctors of our problems. We helped them. Mrs. Cline was up here a little while ago talking about the 4 family. I was at the VA a few years ago. And some of 5 you know who he was -- very heck of a nice person and we 6 7 had a POW that she wasn't aware of and he was 8 suicidal. He attempted suicide a few times. family had nothing to do with him. The guy was 10 suffering from post traumatic stress and nobody knew 11 about it. We got him up to our group, our rap group 12 up in Lyons and he's a changed person. We comparing 13 notes realized that the wives and the children are 14 suffering part of your post traumatic stress. I have 15 had post traumatic stress. We have had cases, for 16 example, a pilot who had his children kneel down before they had meals to pray. And because he was 17 18 trying to put on his family what he suffered through 19 in a prison camp, he would have post traumatic 20 stress. We have a few people in and out of the 21 psychiatric center because of suicidal tendencies and 22 get together at a group and go through the rap. Wives 23 get together. We have speakers. We ourselves 24 have--if any of you are interested, we have a fellow who is an advisor to the directors of the Bridge Over 25

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the River Kwai. You probably have seen that film. We have very good speakers. If you at any time need such help, please let us know.

I would just like to say this. had here a while ago Leon Wilson. He was saving me the trouble of mentioning it. Leon has been featured, running a series of articles about Vietnam. I'll pass it around. There is an article about Leon Wilson. When I was up at a convention in Canada. I happen to take this. I'll read it to you. "POW Today. applies to you. I'm mean Vietnam veterans also. Symptoms, physical and/or mental, can appear during an experience and remain for a month or long periods and reappearing. You can have it for years and then it will reappear as post traumatic stress syndrome. can't be changed. It's irreversible physical and mental damage. Perhaps the most common physical symptom is premature aging. And if we believe this condition is our own fault, psychological symptoms may They blamed it on themselves and we have had develop. psychological damages, people who have attempted suicide. I know the people.

MR. DUBYNA: Please wrap it up, your

25 time is up.

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THE AUDIENCE: Thank you. Let me just say that we have had--I have seen people say I'm proud of being an American. I went to the program today in Orange where the Air Force has adopted a program and they are really giving thanks to veterans.

Let me tell you about our group. We do have a big group. We have had to separate buddies cursing because they were going through this post traumatic stress. I could talk much, much longer but. I have quite a bit of information on this. And you can get help from they lawyers, for example, in New York, to make sure that the State of New Jersey would be the second state which means that all veterans including the Vietnam veterans will get a job if it's available over any and all civilians. I think it's coming to you. Thank you very much.

MR. DUBYNA: Thank you, sir.

Bill Nabinger.

MR. NABINGER: I am with Vietnam Veterans United in Trenton. I don't speak for Mr. Hillman, I speak for myself.

First of all, I'd like to tell you people that this is from the state laws. Meetings

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open to the public, exclusive of public subject matter discussions, except as provided by Section B, that all meetings of public bodies shall be open to the public at all times. Nothing in this act shall be construed or limited. What I am trying to say here is I was told by your coordinator that I couldn't speak tonight because I live in Trenton. But we'll be down there in March. I don't know if I can make it in March. me that tells me right away that people who care and want to do something for veterans should be open to all veterans to speak whenever they want. people earned it. He didn't sign a list or whatever so they should be allowed to talk. And you want to know whether your government has done shit for us. Now we're looking to see what you are going to do for One doctor says how extensive the study and how extensive post traumatic stress is. Well, it's extensive to me if one Vietnam vet has post traumatic stress because I care. Because I care. And that's the difference. We need people that care. committees put together for political reasons and that bull shit. And one thing you can do if you are going to stay in existence. If you are going it try and do something you can be accountable for what you do.

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dealing with is guilt. I wasn't in combat, but I saw a lot of these guys die. I feel that I should have been there in the field. I feel that our country did something wrong. I feel that we're doing something wrong now. I got out of the service in '73 and I went into the mountains basically to kind of for the past three or four years, I lived alone. I didn't have any neighbors and I like that. I begin to say that it is better than the bull shit that we have to deal with. This is a capitalist society and I didn't understand and appreciate that. We base our life on dollars and that's what we're talking about here. We shouldn't do It's a question of morality. How do you tell that to someone? How do you explain we have to have accountability? How do you pound it in someone's head that we have to have professionalism? How do you pound into someone's head and say put veterans on those committees?

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Somebody mentioned Borden Street
Shelter in New York. I interviewed there for two
weeks. I'm the Vietnam veteran. I went up and down
and finally got myself and made Penn State and I got
two degrees, rehabilitation and therapy and
recreation. I was turned down from those jobs. I

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went dressed up in a suit. I don't understand that. I don't understand. We're shitting on each other even in groups like this. The bottom line is this is America. This is something that -- this is all for us. We talk about the Veterans Administration. I have got an old copy of a veterans newsletter, special issue, veterans issue. It's all been here before, said and done before. I'm on the edge all the time. I have an article here in the Village Voice, the police department compliance. I have been in jail. I have had two marriages. I have been on dope. And something is still inside of me. We drive ourselves to success for whatever intrinsic reward we get. But I don't want to be part of it half the time and part of it. I want to get in there and go for that job and be a veteran's counselor. We're doing the same thing here in a different way to each other. He's accusing you and you're accusing him.

The bottom line is I learned one simple fact and we're human and we're very fragile individuals. We have to love each other. We have to. If we don't, this country is going to go down the tubes like shit.

I have a scrap book of things that I

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have literally copies. I have silent gunman kills four. Agent Orange in New Jersey. What does New Jersey do for veterans?

Thank you.

MR. DUBYNA: I'd like to thank everyone for participating in this hearing. We have several more to look forward to. I'd like to say that certainly as a veteran, I am on your side. I'm volunteering. I want this commission to get something done. If I can have anything to say about it, it will be done.

MR. MILLER: This is more post traumatic stress. We have been hearing this bull shit.

the shit first hit the fan. When we came back from home, we got shit on from our government. You form the commissions, agent Orange, post traumatic stress, this, that and the other thing. It is all a crock of shit. We're going back to World War I. After world War I they called it shell shock. After World War II, they called it something else. It always boils down to the same stuff. We are human beings. We have suffered the pain of war, the anguish. I have lost a

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family. I still wake up in the middle of the night. I'm shaking right now just thinking about it. I have seen other guys talk tonight. You say you want to do something about it. You got a commission here. You have guest speakers lined up for tonight, people that were supposed to talk that didn't talk. What happened to their time? What happened to the time that was allotted for them at this meeting? They were already on the paper. They didn't speak. This is an open forum.

THE AUDIENCE: I had to argue over the phone to testify out here. The outreach coordinator gave other veterans crap.

They tried to talk us out of coming here. Tried to control what was going to be said here. That's the problem. And that's been the problem.

MR. MILLER: They tell to you go to the VA outreach center. I want you to know as God as my witness, I went through--back in '86, I went to Newark to the Veterans Administration Building down there where they held hearings on this, where we sat and we gave depositions upon depositions upon depositions. We heard no outcome of it. I got a

letter stating that I was eligible for PTSD. They didn't want to bother with it. Now they're bringing up another commission to study it further.

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Again, it goes right back to the same stuff. It was shell shock in World War I. What's any different today? We're still shell shock. We still have post traumatic stress. We're still going through the pier pressure from you people, but we're living with it on a daily basis. It's about time and I hope you guys do something about it. Thank you.

THE AUDIENCE: May I use his time, please?

MR. DUBYNA: Yes, you may.

S I W O C a h d N

THE AUDIENCE: I'm a Newark Police
Sergeant. I just got out of the PTSD unit in Lyons.
I have it. I went through a family. I have daughter
who doesn't want to see me, an ex-wife who fled to
Oregon. I don't know where she lives. I have no
communication with my too little ones. The depression
and the hurt and the anger--I'm not homicidal, but the
hurt and the anger and feelings. What this country
did to us as a group is overwhelming. The State of
New Jersey I hope does better by us with the PTSD than
it did by the World War II veterans when they raised

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the cigarette tax to give them a bonus. They're still waiting for all of them to die off. You have got people here with disabilities, some 100 percent disabled from gun shot wounds or shrapnel.

I mean Newark itself has got enough locations like colleges, churches, courtrooms, municipal buildings. You could use Penn Station, it would be better. And I wonder then what this commission. What are you charged with? What are you studying that post traumatic stress exists? It's a known fact. Reams of material have been written. Where do you go with this? What are you charged with? Who do you return this to? Could we have a commission studying post traumatic stress and your charges with what? Are you going to get back to someone and then put something into motion to direct monies? Money isn't the answer. I took a job in Hillside Police Department and the first question I got asked in 1971 was by the police chief after I spent almost four years in that damnable country, you were in Vietnam. I responded yes, sir. How many times did you use drugs? I never did. I came home in 1968 and the guy beat me home. He was supposed to come home three days later, but he was home in a box.

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The peanut farmer welcomed everybody back to Canada and we get shit on. That's all I have to say. you.

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THE AUDIENCE: The whole God damn department needs to be cleaned out. Thank you.

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MR. DUBYNA: Thank you.

MR. BENEDETO: Tony Benedeto.

been in law enforcement for 11 years. And I have seen the hurt and the broken families and the hurt that

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when I have to put on handcuffs that hurt me. But I cope with it. Thank God I have a family that helps

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me. I have friends that help me. Vietnam is a long

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time ago, but it still hurts. I formed an 15

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organization with police officers, sheriff's officers and correction officers and we get together and we

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talk about our--we're all veterans. I seen the hurt

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and I know what these guys go through. I hurt.

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out and get guys that are like this. Go out and talk

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to them. Go into the jails, maybe help these guys back.

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There was a gentlemen who is sitting out in the audience because he is a hell of a guy, but he found a veteran who was homeless and kept him and

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we talk about the homeless dead. He went to great extremes to find this persons family and I think he deserves a lot of credit. There are a lot of things that the wives of veterans have to deal with. They need the help. They need help. And I'd like to salute them too. They fighting their own personal war keeping us together. I know my wife keeps me together.

Paperwork is great. Money is money. But just sit down and maybe talk and see what we can put this money that we're supposed to have and how to help the beds, more beds, more hospitals. For all vets, alcohol, I seen alcohol. I seen it ever day in my job. I see alcohol. I was a correction officer for seven years. Now I'm a sheriff's officer. I know I had to go into cells and guys that suffered from this disease that the gentlemen out here are suffering from. I had to go in there and restrain that person and it hurt. I had to go into my car at night and sit and just sit for a few minutes and cry because that hurts.

If you're going to be a commission, help us. Thank you.

MR. McCALLEY: George McCalley. I

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spent three years at Vietnam and came back with a lot of problems, drugs, heroin, cocaine, ex-wife. I got post traumatic stress. A lot of people talk about Four years I went to the vet center where Angel is at. June I graduate and become a doctor and these people over here helped me. There is a chance out there to make something of your self. Maybe I'm one of the lucky ones. I got a wife. I am going to come back and help the people that helped me. I hope you guys can do the same. Thank you.

MR. DUBYNA: Thank you everyone and

(Additional testimony received by

November 11, 1989

Dear Mr. Dubyna:

good night.

mail.)

I am the chairman of the Board of Directors of the Vietnam Veterans of America, Chapter 200 and was unable to attend the recent open hearing of the PTSD Commission As such, I am writing to request that my statements be entered into the record for that hearing.

Since late 1987, VVA Chapter 22, has been directly involved in the analysis and assistance

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of vets suffering from the symptoms of PTSD. Our expertise comes from first hand contact among our own who are seeking a way to deal with the horrors of the Vietnam War. I am sure the commission fully understands the concept that PTSD is not an illness that responds to short term treatment, but that there is a necessity to encourage the development of long term programs. These programs must, by necessity, include not only the veterans but also the veterans' family. Our experience has also indicated that there are other groups, such as employers, teachers, physicians and the population that interacts with the veterans who must be educated as to the effects of PTSD.

Our primary concern of course is the immediate education of the commission so that the members can effectively report and recommend to the governor and the legislature on the necessity for programs that will solve the problems that PTSD created. The reality is that state funding will have to be justified in order to enact these programs.

Justification will depend solely on the ability of the commission to accurately define the needs and provide the answers. The commission must make itself

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available to the veterans community and must be the veterans advocate to the state. This means more than statistical analysis and broad brush overviews. We feel that there must be an intense effort on the part of all the members of the commission.

For our part, we are willing to cooperate in any way possible to insure that the above stated goals and objectives are met. There is no room for political or bureaucratic prejudice or partisan statements. The significant veterans population in our state who served during the Vietnam War are looking to the PTSD commission for answers. We want to assist the commission in providing those answers.

When we ran the state funded PTSD program, we reached out to a large number of Vietnam vets who were searching for a way to handle their problem. They may have not known that they had PTSD or that their problems were a direct result of the trauma of the war. They did know that their brothers were there, and are still there, to offer them whatever help they can. Since the state has taken over the direct administration of the program we are now actively pursuing other means of providing help to our brothers. One of these is to insure that the PTSD

commission is effective. There is no room for a "No Show" Commission. There is no room for a commission that "Kowtows" to the bureaucracy or becomes part of the system that gives lip service to the veteran.

The initiative that the commission has shown to date in conducting the open hearings must continue.

I would appreciate it if you would please confirm receipt of these statements and their inclusion in the record of the hearing. I would also appreciate receiving a copy of the record of the hearing.

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15 Sincerely yours,

Andrew J. Marotta

18 Chairman of the Board

Vietnam Veterans of America 19

Chapter 200

21 (Whereupon this proceeding was

22 adjourned at 9:15 p.m.)

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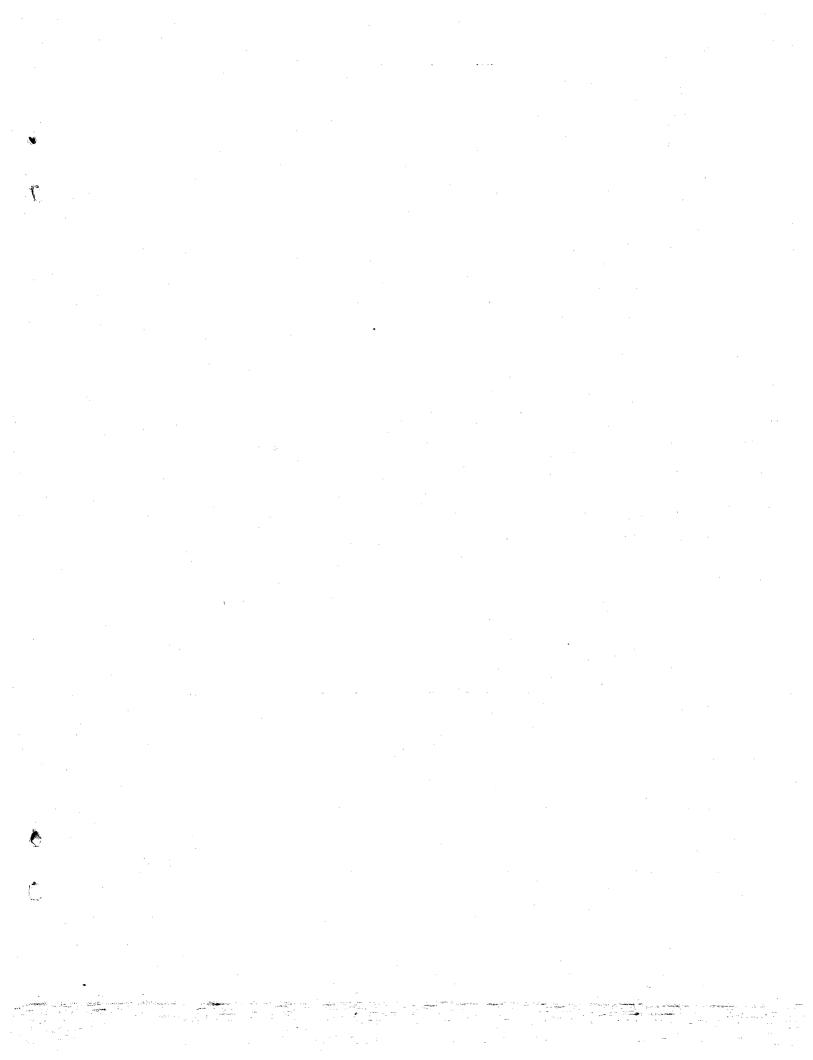
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I, BRENDA J. RISSMEYER, a Certified Shorthand Reporter and a Notary Public of the State of New Jersey, do hereby certify the foregoing to be a true and accurate transcript of my original stenographic notes taken at the time and place hereinbefore set forth.

BRENDA J. RISSMEYER, CSR

Dated: December 11, 1989



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New Jersey Department of Military & Veterans' Affairs