

**Statement on behalf of  
New York State Dwyer Coalition  
Before the  
Joint Legislative Budget Committee on Human Services  
Concerning  
Budget Requests for the 2025 Fiscal Year**

**Submitted by  
Gavin Walters**

**Dated: February 12, 2025**

The New York State Dwyer Coalition submits the following in support of its budget requests for the 2025 fiscal year:

### **The Governor's Suicide Prevention Initiative**

Given the turmoil that is now unfolding on the National scene, the timing of this initiative is most serendipitous. Named in honor of a heroic combat medic who took his own life while suffering from the effects of PTSD, the Coalition's core mission – to support the mental health and well-being of veterans and their families – mirrors the Governor's initiative. We applaud the Governor's commitment to the veteran community and fully support the initiative.

Funding under the initiative is directed at "enhanced risk assessment training." Because peer-to-peer training is currently sporadic and, to a certain extent, lacks uniformity, the Coalition is designing a one- to three-day initial training program that that will be augmented by a series of up to three webinars each year. The Coalition is also planning to sponsor existing "train-the-trainer" programs to grow the number of instructors available to implement its enhanced training objectives.

The Governor's initiative also seeks to "...expand outreach to veterans" and provide "...improved access to mental health services." Coincidentally, the Dwyer Coalition has recently created a website that does just that. Among other things, it contains an interactive map that will enable veterans to locate providers of suicide prevention and other services in their own counties.

The Dwyer Coalition's specific funding requests are as follows:

#### **Annual Funding Allotments**

In 2012, four New York counties each received \$185,000 in Dwyer funding annually. The program has since been expanded to the entire state, with counties currently receiving awards ranging from \$54,500 to \$192,400 and with New York City receiving an award of \$400,000. These awards include a 4% cost-of-living increase enacted last year – the first time that there has been an increase in funding since the program's inception.

Although this COL increase was welcome, it has done little to address the escalating inflation that has occurred in the past 12 years. As a result, those dedicated Coalition employees who have remained with the program are grossly underpaid and overworked, and the Coalition has found it increasingly difficult to meet overhead expenses. Additionally, the scope of the Dwyer program has expanded to address such pressing veterans' needs as housing, food insecurity, and transportation. These expenses cannot be ignored in these difficult times and are only expected to increase. For these reasons, the Dwyer Coalition respectfully requests an increase of 10% in general funding, which is slightly more than \$800,000.

### **Need for Employee Assistance**

Historically, Dwyer funding has been allocated to counties for use in meeting the needs of veterans in their respective jurisdictions. Over the years, the Dwyer Coalition has evolved to serve as an ad hoc forum for promoting communication among Coalition members and communicating with the legislature and state agencies on issues of importance to its members. In addition to other activities, it holds monthly virtual meetings attended not only by members throughout the state, but also representatives from state agencies, the legislature, and other organizations, such as the NYS Council of Veterans' Organizations. As mentioned earlier, the Coalition has also created a website that enhances its connection with its members and could, with further support, expand access to mental health services for veterans at large.

This expanded role has stretched the capabilities of the Coalition to its limits. Like any organization that owes its existence to volunteer labor, a time comes when it is necessary to hire staff or risk compromising the quality and breadth of services provided by those volunteers. That time has come with the Dwyer Coalition

Accordingly, the Dwyer Coalition is seeking funds to hire an executive director, an administrative assistant and an IT specialist and to upgrade its electronic capabilities. As previously explained, promoting the coalition's website more broadly via social media and other channels will greatly enhance veterans' access to mental health services in their region. This cannot be accomplished without additional employees, nor can the peer-to-peer and caregiver training programs and other services envisioned by the Coalition be implemented. For these



reasons, an award of \$232,000 is respectfully requested so that the Coalition can meet its full potential as an effective advocate for veterans in need.

### **Caregivers**

Caregivers are the overlooked members of the team supporting veterans with mental and physical health issues. Family members who care for a veteran are generally with them 24-7 when the veteran lives at home, and they are often bedside when a veteran is hospitalized. Serving in this frontline capacity, they are often the first to recognize when something goes wrong, but they are often ill-trained to deal with these situations. Likewise, training would be helpful to better prepare caregivers to navigate the complexities of the veteran health care system. Accordingly, we respectfully request that \$100,000 be allocated for caregiver training programs.

Veterans' caregivers, many of whom are the veteran's closest family members, bear an enormous physical and emotional toll in caring for their loved one. Currently, there are no provisions in state law for financial assistance or access to resources to help caregivers meet their own mental and physical needs. Accordingly, the Coalition respectfully requests that \$100,000 be allocated for this purpose.

Lastly, the Coalition believes that the burden of caring for a veteran could be greatly alleviated if caregivers had a designated professional social worker or other knowledgeable professional to help them navigate the veteran health system, communicate with providers, and advocate for services. Therefore, we respectfully request that a study group be formed to consider the feasibility of such a project.

Thank you for your courtesy and consideration of these requests.

For further information, please contact:

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