REPORT ON LEGISLATION BY THE
ANIMAL LAW COMMITTEE, CORRECTIONS AND COMMUNITY REENTRY
COMMITTEE, MENTAL HEALTH LAW COMMITTEE, AND MILITARY AND
VETERANS AFFAIRS COMMITTEE

H.R. 4305

Rep. Stivers

To direct the Secretary of Veterans Affairs to carry out a pilot program on dog training therapy.

_Puppies Assisting Wounded Servicemembers for Veterans Therapy Act_
_(PAWS for Veterans Therapy Act)_

THIS LEGISLATION IS SUPPORTED

I. SUMMARY OF THE PROPOSED LEGISLATION

The proposed legislation provides funding, through the Department of Veterans Affairs, for service dogs for veterans with Post-Traumatic Stress Disorder (PTSD). Specifically, it funds a pilot program that enables the Department of Veterans Affairs to make grants to qualified non-profit organizations providing service dogs to veterans with PTSD and having demonstrated expertise in the field. The pilot program will also assess the effectiveness of addressing veteran PTSD and other mental health conditions with trained service dogs.

II. SUMMARY OF ARGUMENT

PTSD is an epidemic among veterans. Veterans often receive inadequate assistance in contending with PTSD and other mental health conditions. To better meet the needs of military veterans with PTSD, complementary and alternative treatments are needed. Numerous studies over the last few years provide preliminary evidence that service dogs are an effective complementary treatment aid for veterans with PTSD. Service dogs provide valuable assistance with a number of trained and untrained tasks. The U.S. government has a duty to provide veterans with comprehensive mental health care for PTSD. Providing effective and comprehensive PTSD treatment for veterans not only benefits veterans but has large scale economic benefits for the public.
Further, there are cascading benefits in the animal welfare and criminal justice realms. Non-profits that train service animals for veterans regularly use prison-based dog training programs, and these programs have the potential to play a significant role in reforming prisons by providing an effective rehabilitation mechanism. Using service dogs to support veterans reinforces the human-animal bond, which benefits both humans and animals.

Another animal welfare benefit of using service dogs to support veterans is humane education. Humane education propels animal welfare reform and is regarded as a tremendous area of untapped potential in the animal rights movement.

Finally, in many cases dogs trained as service dogs are rescue/shelter dogs that may otherwise be euthanized.

III. BACKGROUND: PTSD AND VETERANS

PTSD occurs after a traumatic exposure to actual or threatened death, serious injury or sexual violence. Symptoms include recurrent, involuntary and intrusive distressing memories, dreams and flashbacks, and persistent avoidance of stimuli associated with traumatic events. Military combat/exposure to war is the first in a series of examples listed by the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders (DSM) as a traumatic or triggering event for PTSD. And a majority of soldiers in combat experience horrific events such as seeing dead bodies or remains or witnessing friends killed in violent manners.

PTSD is an epidemic among veterans. Between 11-30% of veterans experience PTSD, with 23% of veterans from Iraq and Afghanistan suffering from the disorder. Further, as a result of the wars following 9/11, veteran PTSD rates have increased compared to the period prior to 9/11. Longer tours, multiple deployments, fewer rest periods, and the nature of modern warfare contribute to higher rates of PTSD. PTSD disability claims have nearly tripled in the last ten years.

PTSD causes clinically significant distress or impairment in social, occupational or other important areas of functioning. Symptoms often impact cognitive and/or physical functioning. PTSD has been linked to a number of physical health conditions including cardiovascular disease, obesity, dementia, and chronic pain. Veterans with PTSD are 200% more likely to be diagnosed with an unrelated medical disease within five years of returning from deployment. Veterans of color and women veterans are most severely impacted.

PTSD is linked to substance abuse, depression and anxiety and is strongly correlated with suicide. Indeed, the number of veterans who commit suicide and attempt suicide is staggering. An average of 20 veterans a day die by suicide. Every month, 1000 veterans attempt to take their own lives. A veteran attempts suicide every 30 minutes. More U.S. troops have died by suicide than have been killed in the Middle East fighting Islamic State militants. Veteran suicide rates have also increased significantly since the beginning of the Iraq and Afghanistan wars. From 2005 to 2017, the veteran suicide rate increased by 41%. Veterans are 1.5 times more likely to die by suicide than Americans who never served in the military. For women veterans, the risk factor for suicide is 2.2 times more likely.
Lack of timely and comprehensive treatment for PTSD and other mental health conditions is a fundamental source of veterans’ difficulty reintegrating back into society. Veterans returning home with untreated PTSD have historically faced a vicious cycle: depression and anxiety followed by self-medication and isolation. In addition to the above-noted co-morbid conditions, veterans with PTSD regularly become homeless and incarcerated.

IV. REASONS FOR SUPPORT

A. Supports Veterans: Enhances veteran quality of life and saves lives.

1. Limitations of currently-funded treatment

Veterans often receive inadequate assistance in contending with PTSD and other mental health conditions. Of those who seek treatment for PTSD or major depression, only 30% receive treatment that researchers consider “minimally adequate” for their illnesses. PTSD treatments endorsed by the VA fail to alleviate symptoms for a significant percentage of veterans and require complementary modalities. For example, primary treatments supported by the VA, such as medication and prolonged exposure therapy, fail to alleviate symptoms for 40% of veterans with PTSD. Many veterans retain their PTSD symptoms after completing evidence-based treatment options. To better meet the needs of military veterans with PTSD, complementary, holistic and alternative treatments are needed. Veterans who do not respond to conventional treatments currently must pay thousands of dollars out of pocket to acquire and care for service dogs. Due to the large demand for service dogs among veterans and lack of government funding, waitlists for PTSD service dogs are often months or years long.

2. Service dogs not funded by VA and relevant history

The U.S. Department of Veterans Affairs currently funds service dogs for only those veterans with mobility, visual or hearing impairments, and not for veterans with solely PTSD or other mental health conditions. In 2009, Congress expanded the scope of use of service dogs for veterans and gave the Veterans Administration the power to provide service dogs for veterans with mental illnesses, including PTSD. However, in 2012, the Veterans Administration used its rule-making authority to eliminate funding of service dogs for veterans with PTSD by promulgating a final rule that restricted service dog provision to veterans with visual, hearing, or substantial mobility impairments. In 2016, the VA announced a pilot program that would provide service dog benefits for up to 100 veterans with concurrent mental health and mobility impairments. While this small pilot program is a step in the right direction, the result is that veterans with mental health conditions but no mobility impairment are excluded from coverage. Current medical science indicates that psychiatric conditions impact both mind and body and cause physiological changes in the body and can no longer be discretely classified as physical or psychological. The VA claims it does not provide service dog benefits for PTSD or other mental illnesses due to insufficient evidence regarding their efficacy and in accordance with its evidence-based medical model. However, as discussed below, there is notable preliminary evidence; further, this bill authorizes funding to advance study effectiveness through a pilot program.
3. How service dogs help in treating veteran PTSD

The American with Disabilities Act (ADA) defines a service animal as “any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability.” Numerous studies over the last few years provide preliminary evidence that service dogs are an effective complementary treatment tool for veterans with PTSD. Recent rigorous scientific research conducted by Kaiser Permanente and Purdue University, for instance, demonstrates that service dogs substantially ameliorate PTSD symptoms. Veterans with service dogs exhibited a clinically significant reduction of PTSD symptoms as well as decreased alcohol abuse. Cross-sectional studies suggest that having a PTSD service dog is associated with lower PTSD symptoms, improved quality of life, and improved social functioning. Similarly, longitudinal studies have found that, after receiving a PTSD service dog, veterans self-reported significant improvements in PTSD symptoms in addition to improved secondary outcomes with respect to depression, anxiety, and quality of life. A 2020 study helps explain the PTSD service dog’s clinically relevant value and demonstrates that veterans are using and benefiting from the specific trained tasks provided by service dogs as well as non-trained tasks. This emerging evidence is supplemented by qualitative reports indicating that PTSD service dogs can provide valuable social and emotional support, reduce stress, and improve veterans’ quality of life. The proposed legislation provides an opportunity to confirm these results.

Service dogs provide assistance with a number of trained and untrained tasks. Both trained and untrained qualities of a PTSD service dog are essential to their therapeutic value for veterans. Service dogs are trained to meet specific veteran handlers’ needs, like alerting their handlers to take medication at a designated time, warning them regarding an approaching vehicle, or calling for help, including calling 911. PTSD service dogs may also be trained to serve as a physical brace for balance or to guide their handlers to an exit or home.

Interrupting anxiety and providing a sense of safety is a regularly used and critical service dog function. PTSD service dogs can be trained to detect a veteran’s physical signs of anxiety and distress and disrupt anxiety, panic attacks, and nightmares. Service dogs are trained in positional commands, such as standing in front of a veteran in public as a physical barrier between the veteran and approaching strangers, or standing behind them and “watching their back.” Service dogs may also be trained to secure the perimeter and provide reassurance to the handler that a space is safe to enter.

Service dogs also reduce veteran isolation and promote the independence needed for effective reintegration. PTSD-related avoidance behaviors cause withdrawal and isolation. Service dogs facilitate social connection and assist veterans with PTSD to break out of isolation and avoidance behaviors common to PTSD. Isolation has been shown to be a significant risk factor for veteran suicide. Similarly, service dogs increase veteran independence and ability to function. They support reintegration by assisting with navigation of daily life, promoting independence, enabling social opportunities, and providing a sense of purpose. In fact, in a recent study, participating veterans reported that service dogs were a key support in their transition to reintegration. Additionally, by providing an increased sense of confidence, safety, and
independence on a day-to-day basis, service dogs also enhance the ability of veterans with PTSD to succeed in the workplace.63

Untrained qualities and functions are important as well. The companionship and non-judgmental social support of a PTSD service dog provide emotional and therapeutic value.64 While the trained functions of a service dog are critical, the untrained qualities of a PTSD service dog are essential to their therapeutic value, including the dog’s provision of unconditional love and companionship.65 For these reasons, veterans advocates, mental health advocates, and service dog organizations support funding for service dogs for veteran PTSD.66

B. Veterans are entitled to comprehensive mental health assistance

The VA has a statutory duty to provide veterans with quality physical and mental health care.67 Many commentators further argue that the U.S. government also has an ethical duty to provide comprehensive physical and mental health care to veterans.68 And the Veterans Health Administration has a mandate to fulfill its mission of serving veterans by “providing exceptional health care that improves their health and well-being.”69

Denial of service dogs for veteran mental illness may also violate the Rehabilitation Act and Equal Protection Clause of the 14th Amendment. In particular, denial of service dogs for mental illness treats veterans with mental health impairments differently than those with physical impairments; this differential treatment may violate Section 504 of the Rehabilitation Act of 1973, which protects disabled people from being denied access to or equal participation in federal program benefits solely due to disability.70 In addition, denial of service dogs for psychiatric disabilities may not withstand an Equal Protection challenge,71 as it may fail the rational basis analysis, which requires that there must be a legitimate purpose for distinguishing between mental and physical disabilities and denying service dogs to veterans with psychiatric disabilities.72

C. Public Benefits / Costs of Not Treating PTSD

Providing effective and comprehensive PTSD treatment for veterans not only benefits veterans but has large scale economic benefits for taxpayers.

Veteran PTSD has pervasive and deleterious social and economic consequences. While providing comprehensive and effective PTSD treatment for veterans may be costly, so too are the costs of not treating veterans. A microsimulation model created by the RAND Center for Military Health Policy Research for a hypothetical cohort of military personnel analyzed the cost savings of providing effective, evidence based PTSD treatment to veterans.73 It estimated costs over a two-year period and defined PTSD costs in terms of lost productivity, treatment, and suicide attempts and completions.74 It calculated the cost savings of effective treatment for veterans with PTSD to be $2,306 per person over a two-year period.75 The real cost is likely to be much more, since some negative impacts such as substance abuse, failed relationships, and disruption to families are hard to quantify and were not taken into account in the model.76

Other studies have found similar benefits. Every $1 invested in effective, evidence-based care to Iraq and Afghanistan veterans with untreated mental health disorders results in $2.50 of
savings over a two-year period, even after the cost of that comprehensive care is factored into the equation. Investing in more high-quality treatment for veterans with PTSD and major depression could save close to $2 billion within two years. In addition, not providing comprehensive mental health care to veterans could negatively impact national security and military readiness, as the United States relies on voluntary service and individuals in the military performing multiple tours of duty.

D. Criminal Justice Prison Rehabilitation Using Dog Training Programs

Non-profit organizations that train service animals for veterans regularly use prison-based dog training programs. Animal programs in prisons have the potential to play a significant role in reforming prisons by providing an effective rehabilitation mechanism. Lack of rehabilitation and vocational job skills training in prisons create significant obstacles for formerly incarcerated individuals to secure employment and thrive in society upon re-entry. Further, this disproportionately impacts people of color based upon significant and well established racial disparities among those who are incarcerated in the United States. There is evidence that prison-based dog training programs are effective as rehabilitation and vocational skill training mechanisms. These innovative programs recognize the humanity of an incarcerated individual. The dog training programs provide a sense of purpose to prisoners and improve their self-confidence and self-efficacy while reducing depression and anxiety. In some cases, prisoners may experience an emotional bond and unconditional love for the first time. These programs have a wide range of benefits for prisoners that span health (mental and physical), social, and economic realms. Dog training programs in prisons are also a powerful example of restorative justice, a philosophy and social justice movement that moves beyond punishment and focuses on healing and rehabilitation. Early studies on prison-based dog training programs show that they also reduce recidivism.

E. Animal Welfare Benefits

1. Reinforcement of Human-Animal Bond

Using service dogs to support veterans reinforces the human-animal bond, which benefits both humans and animals. The human-animal bond is a mutually beneficial and dynamic relationship between people and animals. A study conducted by the Purdue University College of Veterinary Science using rescue dogs trained as PTSD service dogs demonstrates the intense and indescribable bond developed between veterans and dogs. The nonprofit organization spearheading the program, K9s for Warriors, described veterans’ reciprocal relationship with service dogs and regards dogs and veterans as rescuing each other. Humans’ emotional bond with dogs also increases the understanding of, and appreciation for, animal sentience.

2. Use of Rescue Animals

In many cases dogs trained as service dogs for veterans are rescue/shelter dogs. This gives shelter dogs a second chance and saves the lives of dogs that may otherwise be euthanized. Further, prison dog-training programs regularly utilize shelter/rescue animals to train as service dogs. These programs are part of a grassroots movement at the intersection of animal rights,
prison reform, and veterans’ rights in which non-profits work with incarcerated individuals to train rescued shelter dogs to become service animals for veterans.\textsuperscript{97} These programs are founded on the principles of animal therapy and the healing powers of animals.\textsuperscript{98}

3. **Humane Education**

Training and using service dogs for veterans with PTSD also promotes humane education. As background, humane education teaches compassion and empathy for all living beings to both children and adults and recognizes the interdependence of all living beings.\textsuperscript{99} It is a form of education focusing on the intersectionality between human rights and animal protection.\textsuperscript{100} Humane education is currently regarded as a tremendous area of untapped potential in the animal rights movement.\textsuperscript{101} It is an important goal for animal advocates, since it has the power to facilitate macro-level culture shifts related to attitudes and behaviors toward animals.\textsuperscript{102} These shifts in culture propel animal welfare reform since legal and policy advancement often follow cultural shifts.\textsuperscript{103} Further, humane education is uniquely positioned to build bridges among disciplines and provide broad platforms for social justice movements to collaborate in advancing the public good.\textsuperscript{104} In programs using prison dog training programs, for instance, prisoners learn humane education and empathy for animals.\textsuperscript{105} Veterans likewise receive lessons in humane education by working with service dogs,\textsuperscript{106} as do other members of the public.\textsuperscript{107} Veteran service dog training programs in particular are significant for animal welfare as they reinforce the human-animal bond, use rescue animals and promote humane education.

V. **CONCLUSION**

For the reasons above, the New York City Bar Association supports the proposed legislation.

Animal Law Committee  
Christopher Wlach, Chair

 Corrections and Community Reentry Committee  
Gregory D. Morril, Chair

 Mental Health Law Committee  
Karen P. Simmons, Chair

 Military and Veterans Affairs Committee  
Christopher Amore, Chair

October 2020


3 Id. at 271.

4 Id. at 274.


11 Am. Psychiatric Ass’n, DSM-5, note 2 above, at 272.


20 Id.


26 Cotterell, note 9 above, at 224.

28 Id. at 88-89.


34 Craven, N.Y. Times, note 10 above.


41 Alma Nunley, Service Dogs for (Some) Veterans: Inequality in the Treatment of Disabilities by the Department of Veterans Affairs, 17 Quinnipiac Health L.J. 261, 263.


47 O’Haire & Rodriguez, note 44 above; Yarborough, note 44 above; Rodriguez et al., The Effect of a Service Dog on Salivary Cortisol Awakening Response in a Military Population with PTSD, note 45 above, at 202.


49 Rodriguez et al., Defining the PTSD Service Dog Intervention, note 33 above.


51 Rodriguez et al., Defining the PTSD Service Dog Intervention, note 33 above.


54 Rodriguez et al., Defining the PTSD Service Dog Intervention, note 33 above, at 5-6.

55 Yarborough, note 44 above, at 733.


57 Mary Tramontin, Exit Wounds: Current Issues Pertaining to Combat-Related Ptsd of Relevance to the Legal System, 29 Dev. Mental Health L. 23, 36 (2010).


60 Krause-Parello & Morales, note 50 above; Canine Companions for Independence, Service Dogs, http://www.cci.org/assistance-dogs/Our-Dogs/Service-Dogs.html (noting that a dog can assist with many tasks and “increase independence by reducing reliance on other people”).

61 Terry Crowe et al., Veterans Transitioning from Isolation to Integration, note 58 above.

62 Id.


64 Krause-Parello & Morales, note 50 above.

65 Rodriguez et al., Defining the PTSD Service Dog Intervention, note 33 above, at 6.


68 Ginzburg & Holm, note 29 above, at 71-72; Freese & Klasky, note 27 above, at 88; Sincavage, note 29 above, at 506; Stephanie Smith Ledesma, PTSD and Bad Paper Discharges: Why the Fairness to Soldiers Act Is Too Little, Too Late, 10 Elon L. Rev. 189, 193 (2018).


70 Rehabilitation Act, 29 U.S.C. § 794 (2014). “No otherwise qualified individual with a disability in the U.S. … shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.” Nunley, note 41 above, at 278.

71 U.S. Const. amend. XIV, § 1; Nunley, note 41 above, at 288–89.

72 Nunley note 41 above, at 288.

74 Eibner et al., note 73 above, at 176.

75 Eibner et al., note 73 above, at 200.

76 Tuerk, note 16 above, at 50; Baker, note 9 above, at 352.


78 Eibner et al., note 73 above, at 215.


81 Melanie Reid, The Culture of Mass Incarceration: Why “Locking Them Up and Throwing Away the Key” Isn’t a Humane or Workable Solution for Society, 15 U. Md. L.J. Race, Religion, Gender & Class 251, 255 (2015); Larkin, note 80 above, at 548.


86 Larkin, note 80 above, at 544.


92 K9s for Warriors, note 91 above.


58 Gennifer Furst, Helping War Veterans with Posttraumatic Stress Disorder, note 97 above.


93 Id. at 27.


