

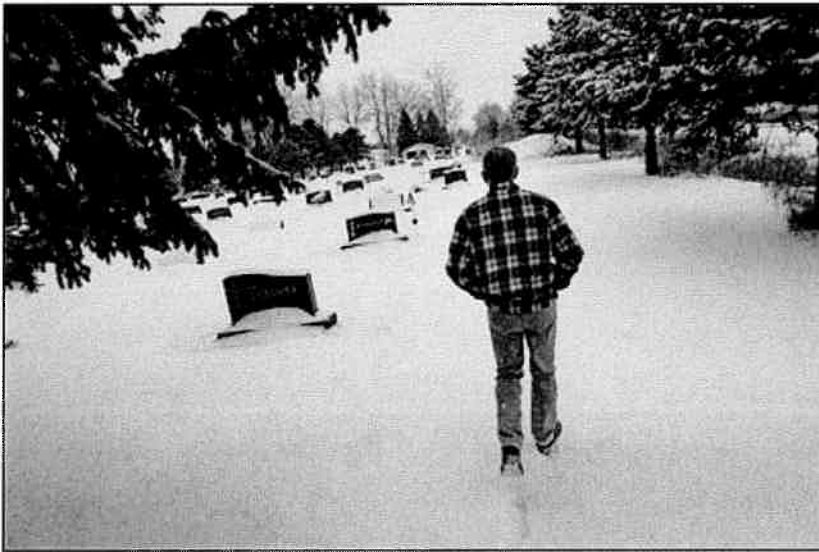
APPENDIX

EXHIBIT D

Joint Amicus Brief Of Swords To Plowshares And Vietnam Veterans Of America

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James Schulze walked to the grave of his son, Jonathan, an Iraq war veteran. (Bill Greene/Globe Staff)

Told to wait, a Marine dies VA care in spotlight after Iraq war veteran's suicide

The Boston Globe

By Charles M. Sennott, Globe Staff | February 11, 2007

STEWART, Minn. -- It took two years of hell to convince him, but finally Jonathan Schulze was ready.

On the morning of Jan. 11, Jonathan, an Iraq war veteran with two Purple Hearts, neatly packed his US Marine Corps duffel bag with his sharply creased clothes, a framed photo of his new baby girl, and a leather-bound Bible and headed out from the family farm for a 75-mile drive to the Veterans Affairs Medical Center in St. Cloud, Minn.

Family and friends had convinced him at last that the devastating mental wounds he brought home from war, wounds that triggered severe depression, violent outbursts, and eventually an uncontrollable desire to kill himself, could not be drowned in alcohol or treated with the array of antianxiety drugs he'd been prescribed.

And so, with his father and stepmother at his side, he confessed to an intake counselor that he was suicidal. He wanted to be admitted to a psychiatric ward.

But, instead, he was told that the clinician who prescreened cases like his was unavailable. Go home and wait for a phone call tomorrow, the counselor said, as Marianne Schulze, his stepmother, describes it.

When a clinical social worker called the next day, Jonathan, 25, told again of his suicidal thoughts and other symptoms. And then, with his stepmother listening in, he learned that he was 26th on the waiting list for one of the 12 beds in the center's ward for post-traumatic stress disorder sufferers.

Four days later, on Jan. 16, he wrapped a household extension cord around his neck, tied it to a beam in the basement, and hanged himself.

In life, Jonathan Schulze didn't get nearly what he needed. But in death, this tough and troubled Marine may help get something critical done.

The apparent failure of the Department of Veterans Affairs to offer him timely and necessary care has electrified the debate on the blogs and websites that connect an increasingly networked and angry veterans community. It has

triggered an internal investigation by the VA into how a serviceman with such obvious symptoms faced a wait for hospital care.

And it is being cited by veterans' advocates and their allies in Congress as a searing symbol of a system that they say is vastly unprepared and under funded to handle the onslaught of 1.5 million veterans of the wars in Iraq and Afghanistan who are returning home, an estimated one in five of them with post-traumatic stress disorder, or PTSD. One in three Iraq war veterans is seeking mental health services, according to a report by an Army panel of experts last year.

The death of Jonathan also raises questions, among veterans and in Washington, about how far the military culture still has to go in dealing with the stigma often attached to cases of mental illness. Marines, especially, just aren't supposed to cry out for help.

"My feeling is no veteran should be turned away, and definitely not a veteran who is openly saying he needs help and that he feels like taking his life," said Jonathan's father, James, who is a Vietnam War veteran and comes from a family with a long tradition of military service.

"My son did his duty, he risked his life for his country, and he came home a broken person. And then the VA failed in its duty to care for him," he said, sitting in the family home in front of a coffee table transformed into a shrine for his son, with framed photos and, folded in a neat triangle, the flag that draped his coffin.

Across the country, there are stories of veterans suffering with combat stress and PTSD, who are struggling to find help at VA facilities to deal with the problems they face, according to Steve Robinson, director of veterans affairs for the Washington-based Veterans for America, an advocacy group.

"Sadly, there are a lot of Jonathan Schulzes out there," said Robinson, a veteran of the Gulf War who investigates cases all over the country of service members suffering from mental illness and other injuries who are struggling to get the care they deserve.

A plea for help

Jonathan's case has prompted the US Department of Veterans Affairs, with 235,000 employees at a network of medical centers for servicemen and women, to launch an ongoing internal investigation into the details surrounding Jonathan's death, according to Phil Budahn, a VA spokesman in Washington.

But beyond that, Budahn could say little. All patient files are confidential, he said, declining comment on any of the specifics of Jonathan's case.

But VA officials have released 400 pages of documents on the case to the Schulze family. One document from that file showed that the VA clinical social worker, Daniel Ludderman, with whom Jonathan spoke by phone on Jan. 12 did not indicate in his notes that Jonathan had expressed suicidal thoughts.

A VA spokesman told local news organizations that there were emergency beds available in a psychiatric hold unit throughout January. But the VA has not responded to questions about why, if that was the case, Jonathan was not placed in one. Another looming question in the VA investigation is why there are only 12 beds for in-patient PTSD treatment in Minnesota. That number has remained unchanged for a decade, former state VA officials say, even as the nation has engaged in two wars, in Afghanistan and Iraq, in the past five years.

James and Marianne insist they both heard Jonathan clearly state that he was suicidal on Jan. 11. Marianne says she heard it again when Jonathan was speaking with the VA's Ludderman on the phone the next day.

James believes the VA response thus far indicates that officials are worried more about protecting the VA's image than in meeting the overwhelming need for more and better PTSD counseling for veterans returning from Iraq and Afghanistan.

"I heard what Jon said. They can doctor the records all they want; it is not going to change what I heard," he said.

Major Cynthia Rasmussen, who worked for 18 years as a psychiatric nurse at the VA and who now runs the Army

Reserve Combat Operational Stress Control Program at Minnesota's Fort Snelling, said, "Jonathan's case is classic and classically tragic."

Rasmussen said that there are many excellent programs and treatment centers within the VA, but that effective delivery of service is spotty and inconsistent and that problems of poor communication between the military and the VA are thwarting attempts by service providers to treat those veterans who need help.

"That is what happened to Jonathan, and there are just hundreds of cases like this across the country. We are seeing them every day," she added.

Descent into mental illness

Behind the stark details of the case is a more complex and nuanced picture of Jonathan's descent into mental illness.

He arrived home last fall after a hellish tour of duty with Second Battalion, Fourth Marines in the Ramadi/Fallujah area of Iraq, where fighting was particularly intense in the spring of 2004. In letters home, Jonathan had described the combat deaths of 16 men he called friends. He himself was wounded by shrapnel twice.

In his neat grammar-school cursive, Jonathan described the death and danger that confronted his unit daily. He made it very clear: He was terrified.

"My heart is filled with sadness. And I ask God why," he wrote on May 13, 2004, the day after two close friends were killed. "I pray so much and ask God to keep me out of harm's way and get me back in one piece."

One of his fellow Marines in the Fallujah area was 25-year-old Eric Satersmoen, who knew Jonathan from local bars in the Minneapolis area where Jonathan had worked as a bouncer. They traded news about mutual friends and the Vikings and the Minnesota Wild hockey team, and they vowed to stay in touch when they got back home.

When they did return, in the winter of 2005, they found they shared some other things: persistent nightmares, sleeplessness, anxiety, anger, and a tendency to use alcohol to numb themselves to all that.

But their experiences diverged in a critical way that underscores how the VA system sometimes succeeds and why it so often falls devastatingly short -- right from the moment demobilized troops get ready to go home.

Returning Marines and soldiers are routinely asked to fill out a form in which they are told to self-evaluate their own mental health on a questionnaire about nightmares, anxiety, aggression, and suicidal thoughts.

The military says the forms are a way to highlight problems early. But veterans advocates say that all too often servicemen, eager to reunite with family and friends, give the forms short shrift. They simply check "no" to every question because they do not want to be delayed at the base with mental health appointments.

That's what Jonathan told friends and family he did. And that's also what his close friend Eric had done after his first tour, but was determined not to repeat this second time around.

This time he knew he had a problem. He checked "yes" to the boxes that asked about nightmares, anxiety, and violent outbursts. He was given a schedule of appointments and began to enter a long process of counseling that has allowed him to slowly heal and eventually to have in-patient treatment at the Minneapolis VA where he was given a bed in the PTSD ward.

Jonathan, meanwhile, returned home for 30 days' leave. His family immediately saw that he was depressed and anxious. They heard him thrashing and yelling in his sleep. He was not the big, fun-loving young man he was before he went off to war, they said.

The family doctor, William Phillips, saw him and wrote a report that Jonathan appeared to be suffering classic symptoms of PTSD. He prescribed Valium and encouraged Jonathan to seek help when he returned to Camp Pendleton.

"I told him that when I came home from Vietnam, I just closed up and hardened my shell. It hurt me in life. I was a pole cat to live with, and I wanted to be sure he didn't make the same mistake," said his father.

After his 30 days' home leave, Jonathan returned to Pendleton for 90 days before his final discharge notice would be given. That was when he really went off the rails. He was drinking heavily and getting in violent confrontations at local bars off the base and even with his own Marines. He had nightmares of firefights in which comrades died and civilians were caught in the crossfire. He refused to admit he suffered mental problems.

"Marines don't do weakness," said his older brother Travis, 27, a Marine who also joined up straight out of high school. Travis served in Afghanistan in the fall of 2001 during the US-led military response to the attacks of Sept. 11, 2001. "That's the attitude, and Jon was caught up in that world," said Travis.

Jonathan was completely out of control. In the fall of 2004, he brutally beat a fellow Marine. He also threw a 200-pound potted tree through a plate glass window during a bar fight. He ended up spending one month in the brig. Military Police searched his locker and found steroids -- he was an obsessive body builder. He was busted in rank from lance corporal to private and given a "general" rather than an "honorable" discharge.

Drinking and self-loathing

These kinds of discharges are on the rise among returning veterans, particularly among those suffering from mental trauma who veer into violence and substance abuse, according to Lieutenant Colonel Colby Vokey, who supervises the legal defense of Marines at Camp Pendleton.

For Jonathan, the "general" discharge status meant that he was ineligible for GI Bill benefits, including assistance for college tuition, and it was technically up to the discretion of the VA whether he would receive medical treatment.

The VA did accept Jonathan for treatment of his shrapnel wounds and back pain. Eric, his Marine buddy, tried to help him get assistance for his mental health issues as well. They sometimes waited the entire day for appointments and group counseling.

Through it all, Jonathan never stopped drinking. Friends and family say that every night he drank his trusted Wild Turkey by the shot glass and one beer after another to chase it down. When he was tired, he drank "Jager-bombs," a mix of the potent German liqueur Jagermeister mixed with the energy drink Red Bull.

His friend Eric drank with him. It was not easy for either one of them when they talked about the war. Eric lost control sometimes, but nothing compared with the bouts of anger and depression and violence that he watched Jonathan go through. "Crazy Jonny," as he called him, was on a different path.

Jonathan was wracked with feelings of self-loathing about his demotion in rank, his tainted discharge, and what he felt was a failure on his part to save his friends, several of whom were killed right by his side in Iraq. The obsession with lifting and steroids, Eric believes, were an expression of low self-esteem.

"He just never could be big enough and bad enough . . . It was like he was going to drink and lift his way through the mess," Eric said.

Then at 8:35 p.m. on Jan. 16, Eric, who was in Florida on business, received a phone call from Jonathan, who was staying in an apartment in New Prague, Minn., that Eric owned and where he gave Jonathan a room.

Jonathan told Eric he was in the basement standing on a stool and tying a noose around his neck with an extension cord. A bottle of Captain Morgan rum, three-quarters' full, was at his side, and he was slurring .

"I tried to stall him by being nice, and then I tried getting mad at him, telling him he was taking the easy way out. I told him, 'What about your faith?' I was doing everything I could," said Eric.

"He said: ' The hell with it all, the Marines, the VA, the hell with religion. The hell with it all. I am doing it,' " said Eric.

Then, Eric said, he heard the phone fall to the floor.

A family mourns

Last week, it was 10 below zero with the windchill factor in the farming town of Stewart . Before his shift at a nearby dairy plant, Jonathan's father crunched through dry, drifting snow toward the St. Paul's Lutheran Church cemetery to visit his son's grave .

Dead flowers from the funeral and a small American flag that marked the grave were disappearing beneath the drifting snow.

"This never should have happened," said James, tears welling behind a pair of sunglasses.

"This country should have taken better care of one of its sons. They owed that to Jon."

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