



Progress In Advancing Convention Resolutions

Current Convention Resolutions are posted at www.vva.org/OrgDocs/VVA-Resolutions.pdf

Agent Orange/ Dioxin Committee

BY HERB WORTHINGTON, CHAIR



The Agent Orange/Dioxin Committee provides this resolution update.

AO-1 Research on Agent Orange/Dioxin Effects: We continue to move our agenda forward regarding this resolution.

The research into the health effects of exposures to the ingredients of Agent Orange/dioxin and other herbicides and toxic chemicals used in Vietnam needs to be continued to provide a complete understanding of these effects on Vietnam veterans and their progeny. We believe that the VA must expand its list of presumptive diseases associated with exposure to Agent Orange/dioxin. Further, we insist that the National Academy of Sciences review all studies that need replication in order to reach a scientifically accepted standard of significant association and take action toward that goal immediately.

AO-2 Agent Orange/Dioxin Children's Registry; Recognizing the Connection Between Dioxin and Learning Disabled Children: We continue to push the movement of this resolution to register on a national basis all children of veterans who have exhibited physical or developmental impairments due to their parents' exposure to Agent Orange/dioxin. Currently the only registry is that of Birth Defect Research for Children. VVA supports BDRC in its efforts to register the children of Agent Orange/dioxin-exposed veterans.

AO-4 VVA Agent Orange/Dioxin Guide: We continue to provide copies of *The VVA Self-Help Guide to Service-Connected Disability Compensation for Exposure to Agent Orange* to all VVA chapters, state councils, service officers, congressional offices, and veterans and their families. We continue to update the publication on a biannual basis with the latest in Agent Orange/dioxin information.

AO-5 Ensure Proper Implementation of the Agent Orange Act of 1991: We continue to move this agenda. Although the legislation enacted on February 6, 1991, PL 102-04, showed marked progress toward a long-term resolution of the Agent Orange/dioxin issue, we must monitor closely the panels assembled by the National Academy of Sciences and the VA to

In the last Agent Orange/Dioxin Committee Report, the phone number for Birth Defect Research for Children was listed incorrectly. The correct number is 407-895-0802.

accept the NAS recommendations and to implement them correctly.

AO-6 Dioxin Disposal Methods: We continue to work hard on this resolution whenever the chance arises. The disposal and storage of dioxin-contaminated materials and sediments can have a direct health impact on all the people of this country. Only proper and safe disposal of dioxins is acceptable. VVA must remain on guard about the science of dioxin-contaminated sediments, and we support the necessary research to guarantee minimal health risks to our communities. VVA supports research on existing methods of disposal of dioxin-contaminated sediments and stands ready to work with all concerned scientific and ecological groups to ensure proper disposal or storage of these materials.

AO-7 Children's Health Care: Only spina bifida in veterans' children is recognized by the VA for the exposure during their fathers' service, yet many other toxic chemicals besides Agent Orange/dioxin were used. This leads to the conclusion that there is a wide variety of other birth defects in the children of veterans who were exposed to Agent Orange and other toxic chemicals. VVA supports a comprehensive health care and special needs program and compensation to help Vietnam veterans' children and subsequent generations who have birth defects, deficiencies, or disabilities reasonably associated with parental exposure to Agent Orange/dioxin and other toxic chemicals while in military service.

AO-8 Agent Orange/Dioxin Network: We are continuously working on this resolution and making strides whenever we can. Although Vietnam veterans have information available to them on Agent Orange/dioxin, they don't have the immediate help and support that could be achieved through an Agent Orange/dioxin network. Due to the releases of the NAS reports, we need a much broader expansion and development of the network. The AO Committee and its chair will hold an Agent Orange/dioxin symposium at each VVA Leadership Conference. Questionnaires will be distributed for the purpose of recording and measuring the past and current health status of VVA members and their families. We also plan to promote and expand the Agent Orange/dioxin town hall meetings.

AO-9 Papermaking Manufacturing Process: This resolution is being worked on by the Agent Orange/Dioxin Committee. We promote the elimination of dioxins introduced into the environment by the papermaking process.

AO-10 Ban the Manufacturing, Sale, and Use of 2,4-D: The committee is continuously working on this resolution. Due to the use of 2,4-D in Vietnam, our members are being diagnosed with many rare

cancers, sarcomas, immune deficiencies, and central nervous system disorders many years after their service. Children of these exposed veterans are born with birth defects, learning disabilities, and other deficiencies. Today this same deadly chemical (2,4-D) is being used for weed control across the United States at national cemeteries, schoolyards, golf courses, and even hospitals. More than 250,000 veterans have died from diseases caused by their exposure to Agent Orange/dioxin, and that number is climbing every day. VVA is seeking legislation to ban the manufacture, sale, and use of 2,4-D worldwide.

AO-12 National Institute of Environmental Health Sciences (NIEHS) Funding for Research in Vietnam: The best laboratory for research on the environmental impact and health risks associated with Agent Orange/dioxin contamination is Vietnam. Continued funding must be provided for this research to find the final solution/resolution to the dioxin catastrophe. VVA supports increased funding for NIEHS for health-related studies in Vietnam in conjunction with the protocol established by the memorandum of understanding signed by the government of Vietnam and the United States on March 10, 2002.

AO-13 Agent Orange/Dioxin Awareness Month: The committee continues to work on this resolution diligently by promoting and developing programs for Vietnam veterans and their dependents. The Agent Orange Committee will work with state councils and chapters to develop programs in their local areas. VVA will publicize the Agent Orange flag, preserve its history, and make it available to the entire organization and interested parties.

AO-14 Hearing Loss Added to the List of Birth Defects Due to Exposure to Agent Orange: The committee continues to work on this resolution. Hearing loss is a birth defect due to exposure to Agent Orange and must be added to the birth defect list.

AO-15 Government's Responsibility for Veterans' Right To Know: The committee has maintained its status of pressing for answers on this ongoing resolution, which has mired veterans' claims and information needed to prove aspects of their service. The Department of Defense has a history of using military personnel for covert medical experiments. During deployments military personnel are often exposed to dangerous chemicals and other toxic substances that are harmful to their health. Often, these individuals are discharged without any knowledge of their exposure or the possible consequence to both their health and that of

their families. When men and women risk their lives in service to our country, their rights to informed consent must be paramount. Our veterans and their families deserve to have a full accounting of any exposures or experiments they were part of.

The Agent Orange/Dioxin Committee: Herb Worthington, Chair; George Newell, Vice Chair. Members: Wayne Cartier, Bob Caswell, George Claxton, James Cripp, Billee Culin, Mike Demske, Bill Dumsick, Stan Goodwin, Alan Grant, Dr. Tom Hall, Ken Holybee, Steve House, Darrel Martin, Marc McCabe, Luther Newberry, Tom Owen, Francis Rowan, Nate Washington, John Weiss, William Whaley, and Sandie Wilson. Special Advisors: Dr. Linda Schwartz and Paul Sutton. AVVA Advisors: Nancy Switzer and Patsy Varnell. Staff Support: Bernie Edelman.

Economic Opportunities Committee

BY FRANK BARRY, CHAIR



The January meeting of the Economic Opportunities Committee included a lively discussion about veterans, labor statistics, and job opportunities.

Jim Borbely and Jim Walker, economists at the Division of Labor Force Statistics for the U.S. Bureau of Labor Statistics, explained how employment statistics for veterans are compiled. There are more than twenty million veterans in the United States. Some six million are Vietnam-era veterans—making us the largest contingent.

Their questions to the committee dealt with how to improve outcomes. Committee members gave positive suggestions and ideas on how to focus resources so that the statistics can benefit veterans and the organizations that serve them.

Other guests at the meeting included Tony Camilli, executive assistant to John Moran at DOL's Veterans' Employment and Training Service; Stanley Fujii, veterans procurement liaison for the Small Business Administration's Office of Veterans Business Development; and Jennifer Franco from the District Communications Group—a service-disabled, veteran-owned small business.

Rhett Jepson from the SBA's Office of Veterans Business Development updated members on two important initiatives to help veterans:



The Boots to Business course, which guides veterans in starting their own businesses. It also can include an eight-week on-line course. Returning veterans are offered three pathways: higher education, vocational education, and entrepreneurship.

Access to capital. One in ten small businesses are veteran-owned; the big obstacle is capitalization. Some solutions being worked on are improving lending and giving special consideration to veterans and the ability to use the GI Bill for start up.

Legislatively, the Economic Opportunities Committee in April will join other VVA committees in promoting two initiatives on Capitol Hill: making new congressional staff members aware of the legacy of toxic exposures in military service, and having a plan to fix the VA.

Committee members are reviewing the EOC Convention Resolutions to ascertain which need to be retired and which need to be amended. We also will consider new resolutions. This review will be finalized at the April BOD meeting and will include these resolutions:

E-1 Jobs in the Public Sector

E-2 Job Training and Other Services

E-3 Veterans in Business

E-18 A Comprehensive Employment Resource Development Program

E-19 A Meaningful Job at a Living Wage

I want to take this opportunity to thank the committee members whose service continues to have an impact on the livelihood of all veterans.

The Economic Opportunities Committee: Frank Barry, Chair. Members: Dennis Andras, Bob Caswell, Ric Davidge, Ted Daywalt, Marc Goldschmitt, Bob Hesser, and Dave Johnston. Special Advisors: Paul Ignosh and Joe Wynn. Staff Support: Rick Weidman.

Government Affairs Committee

BY RIC DAVIDGE, CHAIR



G-7 Service Connection for Hepatitis C: VVA seeks to have veterans compensated for hepatitis C unless it can be established that the disease was acquired post-service. There continues to be very little support in the VA or in Congress to accomplish this, and we have been unable to identify a member to champion this issue and introduce the legislation necessary. We do not think it likely such a bill would stand a chance of passing.

G-9 Awarding of the Combat Medevac Badge: The Department of Defense awards the Combat Medical Badge (CMB) to medics assigned to aviation units now in

service. Several members of Congress have asked the Secretary of the Army to allow the CMB to be awarded to medics who were assigned to aviation units back to the Korean War. We have continued to ask the Secretary of the Army about this issue, but no response has been received. There is support on Capitol Hill, and we will continue to ask for attention to this during this Congress.

G-10 Endorsement for Legislation To Create Minimum Private-Sector Health-Care Coverage for Uninsured and Underinsured Veterans and Their Families: The status of this resolution is unclear. We await implementation of the Affordable Health Care Act and how that law and its regulations will affect veterans. No one seems to know. The committee believes this resolution should be retired.

G-13 Cessation and Prohibition of the Utilization of U.S. Military Personnel as Non-Consensual Participants in the Testing by the U.S. Government of Vaccines and Other Medical Treatments: Current law now allows the Commander-in-Chief to order troops to get inoculated in times of national crisis with vaccines that have not yet been approved by the FDA. We have continued to raise the issue in direct communications with members of Congress and via Letters to the Editor, but have had no responses. It may require a serious error by DOD, causing the loss of human life or serious injury, before this situation gets changed.

G-14 State Veterans Homes: Quality of care at state veterans homes has been undermined by budget cuts. We have encouraged the VA to include funding for state veterans homes in its budget for the past several years, but the Senate has refused to pass a budget for four years. If a sequester goes into effect, maybe a budget will be passed.

G-15 Vietnam War In Memory Memorial Plaque Project: The In Memory Plaque honors the men and women who served in Vietnam and returned home, only to die later as a direct result of their service. Although the plaque was dedicated in 2004, its placement on the ground at the Vietnam Veterans Memorial has remained problematic. AVVA has led the effort to have the plaque raised and has made some progress, but congressional action is required to move the Secretary of the Interior to make the corrections we insist on. We are now in search of House and Senate champions to introduce such bills.

G-16 Sexual Harassment: Sexual misconduct can be found in every community, corporation, and culture; nonetheless, its presence in the U.S. military is unacceptable. VVA urges Congress to require permanent DOD oversight regarding the development and implementation of sexual misconduct policies and the treatment of service members affected by sexual misconduct.

Ultimately, however, sexual harassment and assault are a failure of command in service, not a function of law. The laws are

in place, but DOD command needs to fully enforce them. There is discussion that such should be taken out of the Chain of Command. The thinking is that this would enable more complaints to be filed and encourage active prosecution by JAG. This is not something we need more speeches about. We need absolute commitments from the top down at DOD.

G-17 Proper Use of Real Estate at West Los Angeles VA Medical Center: A parcel of real estate adjoining the West Los Angeles VA Medical Center, intended by its donor to be used for providing services to veterans, has never been developed as intended. Efforts have been made to refocus on the land's intended purpose. VVA continues to oppose any commercial development inconsistent with the express purpose of the deed that established the West LA VA Medical Center, and we have communicated that to everyone we think may be helpful.

The Government Affairs Committee: Ric Davidge, Chair; Ted Daywalt, Vice Chair. Members: Dennis Andras, Frank Barry, Pat Bessigano, Tom Burke, Stephen Carr, Marsha Four, Wayne Gatewood, Jr., Dr. Tom Hall, Terry Hubert, John Margowski, Sandy Miller, Alan Oates, Jacqui Rector, Pat Toro, and Jerry Yamamoto. Special Advisor: Dr. Tom Berger. AVVA Advisor: Nancy Switzer. Staff Support: Bernie Edelman.

Homeless Veterans Committee

BY SANDY MILLER, CHAIR



HV-1 Homeless Veterans as a "Special Needs Population" urges the Presidential Interagency Council on Homelessness to recognize homeless veterans as a Special Needs Population.

Further, it urges mandatory reporting on homeless veterans and supports legislation that would incorporate a fair-share approach for the federal funding of all homeless programs and services. The committee continues to support this resolution. The recent requirement for reporting information on homeless veterans through the Homeless Management Information System and working in conjunction with the Department of Veterans Affairs on the compilation of the Annual Homeless Assessment Report provides a better picture of the homeless veterans population.

HV-6 Homeless Grant and Per Diem Funding urges that the VA Homeless Grant and Per Diem Program provide payment for services rather than the reimbursement for services it presently provides for transitional housing. It also supports legislation to establish Supportive Service Staffing Grants for VA Homeless Grants and Per Diem Service Center Grant awardees. Recent legislation provides for a one-year study of the

entire Grants and Per Diem Program, including the method of payment. This legislation mandates that service providers will be represented in the study. To date, the study has not begun. The committee is waiting for the establishment of this panel and study with great anticipation, as it has been a continuing concern for many years.

HV-7 Homeless Veterans Reintegration Program To Remain at the U.S. Department of Labor and Be Fully Funded at \$50 Million opposes the transition of the HVRP Program from DOL and holds DOL accountable for the program's function, oversight, and performance. The committee continues to support this resolution until mechanisms are put into place to move it to the VA.

HV-8 Support for Continued Funding and Oversight of the U.S. Department of Housing and Urban Development/U.S. Department of Veterans Affairs Supportive Services (HUD/VASH) Program urges the continued funding and expansion of the HUD/VASH voucher program, as well as program oversight. The committee continues to totally support the HUD/VASH program, and feels that the implementation of the HUD/VASH program has had a very positive impact on homeless veterans. However, we continue to have concerns over the distribution, outcomes, and effectiveness of the program. We anxiously await the results of the most recent Point in Time Count and the Annual AHAR.

HV-10 Continued Funding for "Special Needs" Grants Under the Department of Veterans Affairs Homeless Grants and Per Diem Program advocates for legislation that would extend PL109-461, Section 706, Homeless Veterans with Special Needs, due to expire on September 30, 2011, until 2015. This resolution was accomplished immediately following the 2011 Convention. It will be retired.

HV-11 The Department of Veterans Affairs To Identify Best Practices Model Addressing Homeless Women Veteran Transitional Residential Treatment Programs Through the VA Homeless Grants and Per Diem Program urges the VA to identify and implement best-practice models that address the unique needs of homeless women veterans. The committee is working with the VA's Homeless Research Center on this issue and will be prepared to report on progress at the Convention.

The Homeless Veterans Committee: Sandy Miller, Chair; Marsha Four, Vice Chair. Members: Dr. Tom Berger, Pat Bessigano, Ric Davidge, Dr. Tom Hall, Terry Hubert, Dave Johnson, Tom Johnson, Jacqui Rector, and Jerry Yamamoto. Special Advisors: John Driscoll (NCHV), A.J. Paige, and John Weiss (CSCP Liaison). AVVA Advisors: Suzanne Blohm-Weber, Sharon Hobbs, and Nancy Switzer. Staff Support: Sharon Hodge.



Membership Affairs Committee

BY CHARLIE HOBBS, CHAIR



The Membership Affairs Committee was asked to look at two resolutions:

M-1 Verification and Security of DD Form 214. Vietnam Veterans of America requires that all applicants for individual membership provide a copy of their DD Form 214 or other acceptable documentation establishing eligibility for membership. These documents are to be kept at the local level in a confidential and secure manner in accordance with the provisions of the Constitution. Verification to the national organization shall be done by the local chapter secretary or, in the absence of the secretary, a designated chapter official.

The committee supports this resolution and feels verification and storage of these confidential documents must continue in order to ensure that only eligible veterans are accepted into the organization.

M-2 Communication Between VVA's Organizational Levels. The national office must reply to all communications from state councils and chapters within five working days and state councils and chapters must reply to all communications from the national office within ten working days.

The committee supports this resolution as written and strives to support the Membership Department in a timely manner with issues forwarded to us from the national, state, chapter, and individual levels.

Committee Members: Charlie Hobbs, Chair; Steve Mackey, Vice Chair. Members: Carol Baker, Pete Bessigano, John Weiss, Len Ignatowski, Charlie Montgomery, Richard DeLong, Carol Schetrompf, Dick Southern, Rex Moody, Jim Pace, Richard Lindbeck, and Bob Barry. Special Advisors: National Secretary Bill Meeks and Cathy Keister (AVVA). Staff Support: Eric Harris.

Minority Affairs Committee

Minority Affairs Committee

BY JERRY YAMAMOTO, CHAIR



The VVA Minority Affairs Committee is required by Convention resolution to provide this yearly report on actions that are taken that further the implementation of active Convention resolutions. The current committee resolutions are referenced below.

MA-1 Language-Translated VA Benefits Materials. The committee continues

to monitor the VA benefits materials to ensure that they are translated in the relevant language for veterans and their families, because the VA is not doing it.

MA-2 Minority Affairs Coverage in The VVA Veteran. The committee is continually looking for articles to publish in *The VVA Veteran* about minority veteran activities.

MA-3 Asian American/Pacific Islander Veterans. The committee chair will continue to monitor activities of the White House Initiative on Asian American Pacific Islanders and to participate when possible.

MA-5 Foreign National Vietnam Veterans Immigration. The committee continues to actively support foreign national Vietnam veterans who seek medical services in the United States.

MA-6 Involvement by Minority Veterans Welcomed in VVA. The committee annually has health information and recruitment booths at the NAACP National Convention and the Congressional Black Caucus Foundation Conference, and attends the conferences and dinners of the Congressional Hispanic Caucus Institute, the Asian Pacific American Institute for Congressional Studies, and local ethnic veteran community programs. It also works with the VA Center for Minority Veterans staff and the VA Office of Tribal Government Relations. The directors of the Center for Minority Veterans and Office of Tribal Government Relations addressed the committee at its January 2013 meeting.

MA-7 Puerto Rican Veterans and U.S. Virgin Islanders. The regional director inspected the San Juan, Puerto Rico, VA Hospital with several committee members.

MA-8 Recognition of the Services and Sacrifices Made by the Veterans of the Territory of Guam and U.S. Pacific Islanders. The committee continues to support the improvement in health services for Vietnam veterans of Guam and the U.S. Pacific Islands. This is the reason for the ongoing involvement of the committee in the White House Initiative on Asian American Pacific Islanders.

MA-9 Awareness and Sensitivity to Racial, Cultural, and Gender-Related Equity Issues. The committee will monitor the training of VA staff in cultural competency and the staff's ability to display that skill. The VA needs to have staff available who can speak to family members of patients in their native languages.

MA-10 Self-Determination for Puerto Rico. The committee continues to monitor the progress of attempts to have a plebiscite vote in Puerto Rico to determine its future.

MA-11 U.S. Montagnard Veterans. The committee is attempting to work on a study of the status of Montagnard veterans to provide the mandated report to the National Board of Directors by Spring 2014.

A Native American and Alaskan Natives Resolution will be introduced at the 2013 National Convention because the VA has not employed a person knowledgeable in Native American law in the office of its Legal

Counsel as was specified in 1992. The committee plans to monitor the progress of the VA Office of Tribal Government Relations and its director in helping Native American veterans.

The committee will continue to maintain its contacts with the ethnic minority congressional caucuses. It will continue to coordinate with the VA Center for Minority Veterans, the National Association for Black Veterans, the Asian Pacific American Institute for Congressional Studies, and other ethnic minority veteran organizations.

The committee also continues to try to set up a point-of-contact minority affairs person in each state with the assistance of each state council president.

The Minority Affairs Committee: Jerry Yamamoto, Chair; Dave Simmons, Vice Chair. Members: Cecilio Besares, Paul Crowell, Ric Davidge, Tommy Gipson, Virgie Hibbler, Joe Jennings, James Maddox, Tom Meinhart, Pete Peterson, Alvin Roberts, Ron Speight, Connie Steers, Pat Toro, Henry Urioste, Buster Newberry, and Tom Wilson. Special Advisor: Joe Wynn. AVVA Advisors: Donna Crowell and Mary Miller.

POW/MIA Affairs Committee

BY RICHARD DeLONG, CHAIR



Forty years ago, on February 12, 1973, America welcomed home 581 American POWs from North Vietnam.

To our comrades in arms who endured captivity and to their families we extend our deep respect and admiration for their extreme sacrifices.

PM-8 Fullest Possible Accounting of POW/MIAs in Vietnam: The fullest possible accounting of the fate of America's POW/MIAs remains VVA's top priority. We continue our work on multiple fronts—with government agencies charged with the mission of personnel recovery; with the National League of Families; with our chapters and state councils; and with our former adversaries in Vietnam and elsewhere. VVA's highest priority is accounting for those Americans last-known alive—those known to be in captivity in Vietnam, Laos, and Cambodia who were not returned at the end of the war. As of January 2012 DOD listed 1,654 unaccounted-for Americans missing in Southeast Asia.

VI-1 The Veterans Initiative, A National Effort on Vietnam's Missing in Action: Since 1994 VVA, through the Veterans Initiative Program, has supported the Joint POW/MIA Accounting Command in its mission to account for Americans listed as POW or MIA. By returning artifacts taken during the war and helping locate Vietnamese grave sites of missing Vietnamese soldiers, VVA's Veterans Initiative program

encourages Vietnamese witnesses to locate and recover Americans still listed as unaccounted for.

In March 2011 the 22nd Veterans Initiative delegation travelled across Vietnam, taking information—photographs and maps provided by American veterans—to help in the accounting of Vietnamese combatants, with the intent of furthering an environment of mutual cooperation and exchange of fate-clarifying information.

In keeping with **PM-3 Declassification of Information and Diligent Effort**, VVA continues to press for the declassification of fate-clarifying information.

In February 2011 Robert Necci, former POW/MIA Affairs chair, donated to VVA his carefully selected library of the history of the Vietnam War beginning with the French involvement and continuing to the attempts at resolution of the POW/MIA issue. We are grateful to have access to this collection at the national office in Silver Spring, Md.

In search of answers, the POW/MIA Affairs Committee travelled to Ukraine on three occasions to meet with former Soviet veterans. As a result of this effort, VVA was presented with a list of the coordinates of 209 downed American aircraft—this list contained fate-clarifying information that had not been available to the Defense POW/Missing Personnel Office. In gratitude for Ukrainian assistance, members of the POW/MIA Committee, along with VVA Chapters 10 and 55, shipped eight tons of wheelchairs and medical equipment to Ukraine. These were distributed to needy veterans by the All-Ukrainian Union of War Veterans.

PM-4 Americans Missing in Laos and Cambodia: VVA will continue to press for answers regarding the 314 missing Americans in Laos and 54 missing in Cambodia.

PM-13 Public Awareness and Education on the POW/MIA Flag: While Section 1082 of the 1998 Defense Authorization Act requires that the POW/MIA flag fly six days each year—Armed Forces Day, Memorial Day, Flag Day, Independence Day, National POW/MIA Recognition Day, and Veterans Day—at specified government buildings and installations, our members have been instrumental in enacting legislation that provides for the POW/MIA flag to be displayed at state, county, and municipal levels. Members of VVA and AVVA have worked hard to ensure the display of the POW/MIA flag. We extend our thanks to those who continue to educate and advocate, thereby ensuring that the American people do not forget.

In keeping with **PM-14 Forever POW/MIA Stamp**, VVA continues to urge Congress to enact legislation that recommends the reissue of the POW/MIA stamp as a Forever Stamp.

The POW/MIA Affairs Committee: Richard DeLong, Chair; Grant Coates, Co-Chair. Members: Patricia Dumin, Ron Zink, Allen Harvey, and Terry Courville. AVVA Advisor: Kay Gardner. Staff Support: Sharon Hodge.



PTSD And Substance Abuse Committee

BY THOMAS C. HALL, PH.D., CHAIR



The PTSD and Substance Abuse Committee, as required by the VVA National Constitution, provides this annual report on its Convention Resolutions to the membership.

Vietnam Veterans of America will continue to press Congress to take whatever measures are necessary to ensure accountability for the organizational capacity and funding for the diagnoses and evidence-based treatments of the neuropsychiatric wounds of war, particularly for post-traumatic stress disorder, substance abuse, and traumatic brain injury.

VVA will continue efforts to extend the authority of the Vet Centers to treat all veterans and their families and to increase the number of staff at each Vet Center to be able to do so.

VVA will continue its congressional efforts to ensure that the Departments of Defense and Veterans Affairs develop, fund, and implement evidence-based, integrated psychosocial mental health and substance abuse recovery treatment programs through the Vet Centers for all veterans and their families, active-duty troops and their families, as well as for Reservists and members of the National Guard released from active duty.

Your comments and suggestions to improve your VVA membership experience are always welcome.

The PTSD/Substance Abuse Committee: Thomas C. Hall, Ph.D., Chair; Fr. Phil Salois, Vice Chair; Sandy Miller, Secretary. Members: Pat Bessigano, Paul Crowell, Tom Devlin, Marsha Four, Dave Johnson, Sandy Miller, Jacqui Rector, Dr. Ed Ryan, Dan Stenvold, Wayne Reynolds, and Jerry Yamamoto. AVVA Advisors: Kathy Andras, Frances Cartier, Donna Crowell, and Beverly Thomas. Staff Support: Dr. Tom Berger.

Public Affairs Committee

BY TOM BURKE, CHAIR



In compliance with Public Affairs Resolution P-7, the following update is provided on the committee's efforts to advance the 2011 Convention Resolutions passed at VVA's National Convention in Reno.

P-1 Community Service encourages community service as a positive expression of Vietnam veterans' participation in their communities. I am happy to say that VVA chapters and state councils are actively attending to the needs of their communities. In this issue, for example, you can read of the achievements of Clinton Co., Ill., Chapter

269; Sumner Co., Tenn., Chapter 240; West Valley, Ariz., Chapter 1043; and a unique approach to fundraising by Northeast South Dakota Chapter 1054. Also, in every issue of *The VVA Veteran* you will find "Membership Notes," which briefly lists many local achievements and projects of VVA members, chapters, and state councils. The electronic magazine—www.vvaveteran.org—further disseminates our message.

Recently, this coverage has been supplemented by Facebook, which allows quick and virtually free coverage of local events. Check out Facebook.vvaveteran.org. In addition, click on the VVA Facebook page. Yet broader coverage is provided by the Web Weekly and by our Twitter accounts.

P-2 Children's Welfare encourages efforts to safeguard children and infants. Although this area of interest is generally considered outside the purview of VVA's legislative agenda, VVA members, chapters, and state councils have initiated and maintained many programs—ranging from support of food pantries and soapbox derbies, to hurricane relief, to scholarships—that benefit America's children. These efforts are often recounted in *The VVA Veteran*, where they honor the achievements of our chapters while inspiring others.

P-3 Chapter Involvement with the Educational Institutions on Teaching the Vietnam War. VVA remains committed to the concept that those who participated in the Vietnam War are best suited to educate our young people about the war. We have encouraged the participation of VVA members in teaching the war by highlighting their work in *The Veteran*. In addition, the committee's Education Subcommittee, chaired by Florida's Tom Hall, is in the process of updating and revising VVA's *Education Guidebook*.

P-4 Regulation of Certain Activities at the Vietnam Veterans Memorial. All VVA members recognize the hallowed nature of The Wall and wish for it to remain unsullied by politicians and hawkers. We have consistently discouraged vendors at The Wall and objected to politicians who have tried to use our memorial as a partisan backdrop.

P-5 Endorsement for Participation in Local Environmental Efforts. Although this resolution was born out of Vietnam veterans' first-hand experiences with environments damaged by Agent Orange and other herbicides, it is outside the purview of VVA's Legislative Agenda and best tended to by VVA chapters. We recommend that it be retired at the 2013 Convention.

Further, the committee believes the environmental concerns articulated in Resolution P-5 would be better handled by the Agent Orange/Dioxin Committee. At the same time, Public Affairs welcomes the opportunity to help the AO Committee craft its message.

P-7 Requirement To Report Progress on All Currently Approved Convention Resolutions at Least Annually. This report fulfills the requirement for the Public Affairs Committee. To encourage general compliance, the process has been formalized: While any committee may report in any issue of *The Veteran*, every committee with resolutions *must* report on progress in advancing those resolutions in each March/April issue.

P-8 The Vietnam Veterans Memorial Wall reaffirms VVA's commitment to the conservation and legacy of The Wall. VVA encourages the active participation of VVA members in the care and maintenance of The Wall. One striking example is the monthly washing of The Wall by Silver Spring, Md., Chapter 641 (*see p. 50, September/October 2012*).

P-12 Public Awareness for Veterans Benefits Campaigns. There are ongoing discussions within the Public Affairs Committee on the best ways to promote VVA's concerns about federal veterans benefits.

P-13 Gold Star Mothers National Monument supports the establishment of a memorial in Washington, D.C., that will honor the singular sacrifices of America's Gold Star Mothers. VVA continues to support those efforts.

The Public Affairs Committee: Tom Burke, Chair; Herb Worthington, Vice Chair. Members: Grant Coates, Connie Christensen, Ken Holybee, James Maddox, Tom Owen, Wayne Reynolds, and Dan Stenvold. AVVA Advisors: Suzanne Blohm-Weber and Carol Southern. Staff Support: Wes Guidry, Michael Keating, and Mokie Porter.

Veterans Benefits Committee

BY JOHN MARGOWSKI, CHAIR



This is the Veterans Benefits annual report on its VVA Resolutions from the 2011 Convention.

VB-1 Judicial Review: VVA continues to advocate for due process for veterans, including access to competent attorney representation at any point in the claims process.

VB-3 Less-Than-Honorable Administrative Discharges: VVA joined two lawsuits handled by the Yale Law Clinic related to administrative discharges and personality disorders. One relates to disclosing statistics on administrative discharges made by the Department of Defense. The other relates to the resolution's goals of being able to challenge an unfavorable discharge after the fifteen-year mark after service. These lawsuits are ongoing.

VB-5 Civil Liberties of Active Duty Military Personnel: Ongoing until resolved.

VB-6 Just Compensation for Injuries Sustained by Active Duty Military Personnel: The committee continues to work with VVA Government Affairs and Veterans Benefits staff to improve the VA compensation system through legislative action, administrative advocacy, and meetings with VA executive staff. We have been involved in addressing several issues related to the backlog, such as improving work credit, suggesting improvements to VA computer systems, and simplifying VA regulations.

VB-7 Class Actions at U.S. Court of Appeals for Veterans Claims: Ongoing until resolved.

VB-9 VA Implementation of U.S. Court of Appeals for Veterans Claims Decisions: VVA joined in an amicus brief on a lawsuit with Veterans for Common Sense that sought to use the federal courts to improve the speed and quality of VA benefits decisions. Unfortunately, this lawsuit was not successful, so veterans still have to pursue individual claims to the VA. The committee continues to work with VVA Government Affairs staff to urge Congress to provide for class actions to address veterans' concerns instead of making them fight their own battles.

VB-10 Veterans Benefits and Services: VVA continues to ask Congress to intercede and make the VA implement processes to drastically improve its claims processing and delivery of services to veterans. The committee reports local issues that it finds to VVA National and the Board to address systemic problems at the VA.

VB-11 Veterans Benefits System: The VA claims processing times continue to worsen. An interactive map pulled from VA's weekly reports outlines this stark reality: www.thedailybeast.com/newsweek/2012/08/29/interactive-map-tracking-wait-time-for-veterans-disability-claims.html. The committee continues to urge Congress to demand that the VA improve its claim processes to reduce the claims backlog and to provide timely and quality services to veterans. Recent VVA congressional testimony to the House Veterans' Affairs Committee reflects this ongoing commitment.

VB-12 Department of Veterans Affairs Service-Connected Disability Compensation Payments and Military Retirement Pay: Concurrent receipt of military retired pay and VA disability has been phased in over the past several years and will become complete in 2014. However, it only applies to those with 50 percent or higher VA disability ratings. Combat-related special compensation is also a way veterans can receive both military retired pay and VA disability benefits, although only those related to combat. Veterans must choose between the two programs each year. The committee continues to work with VVA Government Affairs staff to urge concurrent receipt for all veterans retired due to length of service with any VA disability rating.

VB-13 Preservation of VVA Service Representation at the National Level: At the national level, VVA continues to hire and maintain high-quality attorneys to represent veterans' claims. For our service officers, the Veterans Benefits Program Policies is being rewritten to more clearly define a service officer's duties and responsibilities. Service officer training is now available through the VVA website. The VVA Service Officer Grant Program procedures have been streamlined and now are in house.

VB-14 Attorney Representation at the VA: The committee continues to urge Congress to allow attorneys to charge a reasonable fee at any stage of the claims process, but in concert with VB-1, a fee agreement



must be able to be dissolved upon misconduct of an attorney.

VB-16 Copy of Military Records Upon Discharge: The committee has worked with VVA Government Affairs staff to improve the integration of DOD and VA health records to create a virtual lifetime electronic record. Providing complete and workable records has been a subject of testimony and meetings with VA staff. The committee also works with VVA Veterans Benefits and Government Affairs staff to monitor the records disposition schedules of the service departments to ensure that health and personnel records are protected and not destroyed.

VB-18 The Department of Veterans Affairs Voluntary Service (VAVS) Program: Ongoing.

VB-19 Veterans Environmental Health Effects: The committee, with Tom Berger's help, has rewritten this resolution. It will be presented at the National Convention in Jacksonville.

VB-20 Participation in the Process of Accrediting VA Medical Centers: Ongoing until resolved.

VB-26 Amend Post-9/11 G.I. Bill for Assessment of Military Schools and Courses for Credit: The committee will recommend that this resolution be retired at the Convention in Jacksonville. This issue has now been enacted into law.

VB-27 Reduction of DIC Survivor Waiting Period: Ongoing until resolved.

VB-28 Removal of 5 Percent Annual Deductible for VA Pension Eligibility: The committee continues to work with VVA Government Affairs staff to urge that all allowable medical expenses incurred by a low-income veteran eligible for VA pension be subtracted from his or her house-

hold's income, not just those expenses that exceed the 5 percent deductible. This will be included this term in our work on reducing the backlog, as the calculations required make this annual task more onerous on veterans and VA employees.

VB-29 Extend Filing Date for VA Pension Eligibility Verification Reports: The committee will recommend that this resolution be retired at the Convention in Jacksonville. Due to enhanced income-matching programs, the VA has eliminated the requirement to submit annual EVRs.

The Veterans Benefits Committee: John Margowski, Chair; Jim Pace, Vice Chair. Members: Ned Foote, Dick Southern, Herb Worthington, Pete Peterson, Joe Jennings, Sandie Wilson, Pete Bessigano, Pastor Toro, Jerry Klein, Joe Kristek, Robert Mello, Ben Humphries, Andy McGrath, and Paul Richards. AVVA Advisors: Nancy Switzer and Sharon Hobbs. Staff Support: Jim Vale and Lauren Kologe.

Veterans Incarcerated Committee

BY TP HUBERT, CHAIR



VIN-2 VVA Chapter and State Council Relationships with Veterans Incarcerated calls on VVA to support veterans involved with the criminal justice system. Local chapters such as Harrisburg, Pa., Chapter 542 and many state councils remain active in promoting

veteran court treatment programs supported by a wide range of VA medical and mental health services. The evolution and benefit of veteran courts unfortunately skipped Vietnam-era veterans and are not available for the quarter million veterans already incarcerated. Incarcerated veteran service groups are functioning in many state institutions supported by local chapters and state councils. VIN-2 remains viable and appropriate for endorsement by VVA.

VIN-3 Veterans Incarcerated Benefits and Entitlement calls on the VA to provide medical treatment and counseling services with special emphasis on PTSD and service-related disabilities. It urges the VA to work closer with federal, state, and local correctional facilities to further veteran rehabilitation. The identification of veterans encountering justice authorities continues to improve to provide better veteran justice statistical data for jail and detention facilities. "It is likely that many offenses leading to incarceration were either directly or indirectly related to substance abuse," said James McGuire of the VA's Veterans Justice Program, "evidenced by the sizable proportion who endorsed using substances at the time of their offense and the number of veterans who were currently incarcerated for drug offenses." VIN-3 should be reaffirmed.

VIN-4 PTSD and Parole/Clemency was overwhelmingly endorsed at the 2011 National Convention and supports sentence mitigation efforts for veterans imprisoned to excessively lengthy terms for offenses attributable to PTSD. The effort of the Pennsylvania State Council and the Pennsylvania Prison Society to address sentence mitigation reflects VVA's commitment. VIN-4 should be reaffirmed.

VIN-5 Retention of Benefits for Incarcerated Veterans urges that the Code of Federal Regulations be amended. It currently requires reduction of payments to veterans incarcerated with service-connected disabilities who become incarcerated for more than sixty days. VVA believes the reduction of these payments is unfair and discriminatory. Although progress may be slow, it is important for VVA to endorse this resolution.

VIN-6 PTSD Treatment of Incarcerated Veterans acknowledges the importance of providing PTSD treatment and counseling programs for veterans incarcerated. VVA believes the VA should be a sole-source provider of PTSD treatment. PTSD treatment is a low priority in correctional facilities, many of which struggle to maintain constitutional standards of mental health and medical services. VIN-6 remains viable and appropriate for VVA endorsement.

At the 16th National Convention in Jacksonville the committee will propose a constitutional amendment waiving compliance for the filing of financial reports by incarcerated chapters when prohibited by higher authorities.

The Veterans Incarcerated Committee: TP Hubert, Chair; Allen Manuel, Vice Chair. Members: Tom Burke, Connie Christensen, Richard DeLong, Larry Holman, Roland Kaufman, Patrick Lavin, Ed Ryan, Virgie Hibbler, and Dave Simmons. Special Advisors: Bob Barry, John Cheney, Steven Konstenius, John Birch, and Wayne Miller. AVVA Advisor: Penny Meinhardt. Staff Support: Elaine Chaney.