Ranking Member Richard Burr

Burr Opening Statement at Veterans' Committee Hearing on DoD/VA Response to Potential Exposures

WASHINGTON, D.C. – Good morning, Mr. Chairman, and thank you for calling this extremely important hearing. I want to welcome our witnesses and to recognize all of the veterans and their families who have joined us here today. I also want to give a special welcome to two North Carolinians, Jerry Ensminger and Shelly Parulis, and to thank them for their tireless leadership and advocacy on behalf of veterans and their families. Your interest in this hearing only serves to underscore the importance of the issues we are discussing today.

Over the years thousands of military personnel -- and their families -- have been exposed to dangerous chemicals where they were living and working while serving our country. Today, we will hear about some of those exposures, including the plumes from an incinerator near a base in Japan, smoke from burn pits being used in Iraq and Afghanistan, dust from a facility in Iraq coated in a known carcinogen, and contaminated drinking water at a base in North Carolina.

I want to express my sincere appreciation to the veteran and family members on our first panel for their willingness to share with us their painful personal experiences about these exposures. Your perspectives will help guide our efforts to find answers for veterans across the country about how these exposures may have affected their health or the health of their loved ones. More importantly, your testimony will help us determine what steps we need to take to protect and improve the lives of those who have been harmed.

My remarks will focus on one exposure issue that is very personal to me – the contaminated drinking water at Camp Lejeune in my home state of North Carolina. I know we'll hear from several witnesses about this issue, but I'd also like to acknowledge two former Marines, Jerry, who is here today, and David Briscoe, who could not be here. They both lived on Camp Lejeune during the years the water was contaminated and have their own painful stories.

David, who lived on Camp Lejeune in the 1980s, was later diagnosed with cancer of the hard palate and underwent treatment that reduced his ability to eat, speak, and work. Jerry's daughter, who was born on Camp Lejeune in 1975, was diagnosed with leukemia at the age of six and, tragically, died three years later. Jerry, I commend your personal strength in the face of such tragedy and appreciate you being here.

Unfortunately, Jerry's and David's heart-wrenching stories are not unique for veterans who served on Camp Lejeune between 1957 and 1987. The residents of Camp Lejeune didn't know it at the time, but the water they were drinking, cooking with, and bathing in contained harmful chemicals – including TCE, PCE, benzene, and vinyl chloride -- which are known or probable human carcinogens.

Some of them are now living with rare cancers, like one of our witnesses today, Mike Partain. He is the son of a Marine, a former resident of Camp Lejeune, and one of over 20 former Lejeune residents diagnosed with rare male breast cancer at an unusually young age – he was just

39 years old. This condition usually strikes less than 2,000 men each year in the U.S. and most are over age 55.

Although a number of studies have suggested a possible link between the water at Camp Lejeune and these types of conditions, we still don't have an answer about what made Jerry's daughter, or Mike, or David sick or what has caused other former Lejeune residents to become ill.

The government's role in scientific discovery is clear. Camp Lejeune was designated by the EPA as a National Priority List site. Under Title 42 of the US Code, the Agency for Toxic Substances and Disease Registry is conducting a number of studies of the Camp Lejeune contamination. These studies include sophisticated computer modeling and future mortality and health surveys. It would have been valuable to have ATSDR here so that they could respond to testimony being given by our witnesses and answer questions from this Committee. Mr. Chairman, in order to strike a balance of scientific opinion on this important issue, I ask that ATSDR's official response to the National Research Council's report on Camp Lejeune be included in the record.

We have an obligation to figure out how much of these dangerous chemicals veterans and their families were exposed to at Camp Lejeune and what impact these exposures have had on their health. For these patriots who have endured unbearable heartache and suffering, they deserve no less than our best efforts to provide them with answers about why they are sick. Also, we must make sure that the claims these families have pending are not prematurely denied by the government before science has had the opportunity to provide more answers.

But, while we wait for the science, we must deal with the fact that many of these exposed veterans and their families continue to suffer from devastating conditions. It is simply not right for us to continue to tell our veterans and their families to just wait for another study. They have already waited two decades. We owe them much more than that.

That's why I have introduced legislation, the Caring for Camp Lejeune Veterans Act, S. 1518, which would allow veterans stationed at Camp Lejeune while the water was contaminated to get medical care from the VA. Perhaps more importantly, it would also allow the VA to treat their families for any conditions associated with exposure to the contaminated water. Providing health care to veterans and their families would be one step towards meeting our moral obligation to those who were put at risk.

As we'll discuss today, there are many other veterans and their families who may have been exposed to dangerous chemicals in other places around the world. For all of them, it's important that we have a framework in place to determine – in a fair, hassle-free, and timely manner — what benefits and services they need and deserve. To that end, I hope we will have a candid and productive discussion today about what is currently working well and where improvements are needed.

Mr. Chairman, for veterans and their families put at risk by exposures – whether in Japan, Afghanistan, Iraq, North Carolina, or elsewhere – we have a solemn duty to take care of those who were put in harm's way while serving our nation. And I hope we can work together to provide these veterans and their families with the answers they deserve and, more importantly, the help they may need.

I thank the Chair.

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