ALLISON T. YANO, OIF VETERAN/FIRST SERGEANT, HAWAII ARMY NATIONAL GUARD

STATEMENT OF ALLISON T. YANO, OIF VETERAN/FIRST SERGEANT, HAWAII ARMY NATIONAL GUARD, BEFORE THE SENATE VETERANS AFFAIRS COMMITTEE, CONCERNING VETERAN'S AFFAIRS FOR GUARD/RESERVE

August 27, 2007

Mr. Chairman, thank you for the opportunity to appear before you today to present my personal experiences and observations with the VA as a Hawaii Army National Guardsman returning from Operation Iraqi Freedom III.

Streamlined access to VA health care and benefits must get to all combat veterans. The Iraq-Afghanistan Post-Deployment Screen was initiated throughout the Department of Veterans Affairs in 2004 to identify OEF/OIF veterans who may have had the need for clinical intervention for conditions such as PTSD, depression, alcohol abuse, chronic and infectious diseases (ID). Early intervention was the goal to identify those who screened positive for mental health conditions and to refer others to specialty care for ID or chronic medical conditions. The inability to complete the post deployment survey with the VA, soon after their war experience hampered the opportunity to prevent a quality transition and readjustment to civilian life as well as identify those with possible PTSD, depression, alcohol/substance abuse or other psychological issues as a result of our National Guardsmen's and women's service within a combat zone. The screening is conducted only with OEF/OIF veterans who have enrolled with the VA. As of two months ago, not all soldiers who returned from our deployment enrolled and only a small number of combat veterans who signed up for VA benefits were contacted and received the screening. A vast majority of combat veterans failed to receive early intervention. We are only now getting our soldiers enrolled. This was due to the recent incident involving a fellow soldier and the failure of qualitative counseling by the DA after returning from a combat zone. Coupled with this is the lack of a streamlined process of continued care with the VA as well as stressing the importance to the soldier in following up with their recommended care.. Only after this incident were we able to put in perspective the importance in enrolling and utilizing the services of the VA health care system. Additionally, we had to make our own coordination for readjustment counseling and educational briefings with the VA, which should have been completed during the demobilization procress. Furthermore, the insufficient number of Social Workers available to handle the large number of OEF/OIF veterans prevented the screenings to be conducted.

A recommendation would be to make enrollment in the VA health care system mandatory and part of the demobilization process. This would allow the VA to administer the Iraq-Afghanistan Post-Deployment Screen to a greater number of the returning veterans at an earlier point after deployment.

The lack of medical specialists and our geographical location is another concern. The islands of Hawaii, Maui, Molokai, Lanai, and Kauai do not have the same resources of medical specialist as on Oahu, therefore, veterans who reside on these islands and referred to see specialists on the island of Oahu, are asked to pay for their transportation cost. This is a deterrent to having soldiers get the necessary examinations and help.

A recommendation is to have referred visits to specialist paid for by the VA or to have specialist flown to the outer islands on a periodic schedule.

I would like to acknowledge the efforts of the staff at the VA Hilo Community Based Outpatient Clinic in assisting myself and other fellow combat veterans in providing the best service they can with the minimal staffing that they have.

In closing, there are needed adjustments to ensure that access to VA health care and benefits get to all combat veterans. Although there are other concerns that are in the minds of my fellow combat veterans, what is provided in this testimony is of the greatest concern. It is hoped that this testimony along with others being given today will expedite necessary changes.

Mr. Chairman, this concludes my statement. I would be pleased to answer any questions you or other members of the subcommittee may have.