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VETERANS OF AMERICA

Statement Of

VIETNAM VETERANS OF AMERICA

Submitted By

By

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and
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Before the
Senate Veterans Affairs Committee

Regarding

Pending Legislation

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Mr. Chairman, Ranking Member Burr, and other distinguish members of the Senate Veterans Affairs Committee, thank you for allowing us to appear here today. We appreciate you giving Vietnam Veterans of America (VVA) the opportunity to express our views in regard to the important pending proposed legislation before this committee today.

S. 1780 - Honor America's Guard-Reserve Retirees Act – A bill to deem certain service in the Reserve components as active service for purposes of laws administered by the Secretary of Veterans Affairs.

Vietnam Veterans of America (VVA) favors enactment of this proposal. As should be readily apparent to all, the Reserves and National Guard have become integral and indispensable part of our nation's Armed Forces, vital to our overall total force that enables our military to meet the stresses and strains of fighting global war on terrorists. This proposed legislation is just one more step in recognizing that ongoing contribution of those who serve in this manner, and is needed step toward treating their service in an equitable manner after their term of service is completed. VVA thanks Senators Lincoln, Hutchison, and Snowe for their leadership on this issue.

S. 1866 - A bill to amend title 38, United States Code, to provide for the eligibility of parents of certain deceased veterans for interment in national cemeteries

VVA favors enactment of this legislation. It has no cost to the government, does not require further use of National Cemetery lands beyond that already required for interment of the servicemember. It will mean a great deal to the relatively few parents who will be affected to be interred with their lost servicemember.

S. 1939 - Agent Orange Equity Act of 2009 - To amend title 38, United States Code, to clarify presumptions relating to the exposure of certain veterans who served in the vicinity of the Republic of Vietnam, and for other purposes.

VVA reiterates our strong support for passage of S. 1939 the Agent Orange Equity Act, and the companion bill in the House of Representatives, H.R. 2254. VVA particularly thanks Senator Gillibrand of New York for introducing this proposed legislation. We must do whatever needs to be done, in this thirty fifth year since the end of the Vietnam war, to ensure that these veterans receive some measure of justice as soon as possible.

In the latest biennial update pursuant to the Agent Orange Act of 1991, the panel of the Institute of Medicine (IOM), of the National Academies of Science (NAS), unequivocally reiterated that there was no valid scientific reason for the exclusion of so-called "Blue Water" Navy veterans from the presumption of exposure to Agent Orange and other harmful toxins present in South Vietnam during the war. It is clear that the study performed by the University of Queensland regarding the desalination plants on board Australian ships at the time is directly applicable to American Navy personnel. Not only did the desalination plants on the American vessels work in exactly the same manner as those on Australian ships, they were manufactured and installed by the same company. The methodology for creating fresh water for both the boilers and for drinking, cooking, etc. actually had the perverse effect of concentrating dioxin in the "cleansed" water that was then ingested by the fliers and sailors on board.

It is important to note that the reason that the Australian government commissioned this study is that the Third Epidemiological Study of Australian Veterans of Vietnam showed that their Navy personnel actually had higher rates of cancers and other diseases thought to be caused by exposure to dioxin than their Army personnel. This prompted the government of Australia to commission the Queensland study.

Let me reiterate that the Australians have completed three epidemiological studies of all of their citizens who served in their Armed Forces during the Vietnam War, and they are now starting on a fourth such study. When they found anomalies, they then commissioned further studies to discover why. That is what responsible democracies do when it is alleged or suspected that their citizens who placed their lives on the line in defense of country have been harmed by said service.

The United States government has done no such epidemiological study of our veterans.

Even more egregiously, the VA Office of Research & Development currently does not fund a single study related to the long term adverse health care effects on our veterans or their progeny of exposure to Agent Orange and other toxic substances in Vietnam.

When the VA challenged the Australian study on Navy veterans and desalinization before the IOM meeting specifically considering the matters of American “blue water” Navy veterans’ potential exposure to dioxin on May 3, 2010 as being “bad science”, the VA officials could not say how or why it was bad science. When the scientists on the IOM panel asked the VA if they had done an epidemiological study similar to the three such studies done by the Australians, the VA had no response. When the same scientists on that panel asked the VA officials if they had funded an attempt to replicate the acclaimed and peer reviewed work of the study of Australian Navy desalination plants done by the University of Queensland, the VA had no real response except to say that they had failed to do so.

Further, that same VA Office of Research & Development (ORD), funded at an annual rate of more than a half a billion dollars, has yet to contract for completion of the replication of the landmark National Vietnam Veterans Readjustment Study (NVVRS) thereby making it a robust longitudinal study that will serve as a statistically valid national mortality and morbidity study for Vietnam veterans. From the testimony given in another Committee earlier this month, and in statements made to the General Accountability Office (GAO) and reflected in their testimony on this subject, “Progress & Challenges in Completing the National Vietnam Veterans Longitudinal Study” (<http://www.gao.gov/new.items/d10658t.pdf>) on May 5, 2010, it is clear to us at VVA that the staff of the ORD and of VHA does not intend to make a good faith effort to complete this study properly.

It is clear to us that the VA ORD intends to act in a way that is plain unethical in regard to research that involves human subjects, and threatens to violate the assurances of confidentiality given to the original participants in the NVVRS twenty five years ago. That will guarantee that most reputable scientific institutions will not bid on completing this study given the way in which VA wishes to violate the original rules guaranteed in the Institutional Review Board rules for the study set at the onset of the original study, and that the veterans who originally participated will likely not do so again given the VA’s bad faith effort to change the ground rules, and renege on assurances of confidentiality.

What does all of this mean in relation to the bill S.1939 that you have before you for consideration? What it means is that there was no valid scientific reason for VA to exclude the “blue water” Navy veterans from the presumption in the first place. Further, it means that the permanent bureaucracy of the VA continues to do everything it can to prevent any decent scientific research to be funded by the United States government into the long term health care effects of exposure to Agent Orange on American who served in Southeast Asia during the Vietnam War, or our children, or our grandchildren.

It is clear that the right thing for that VA bureaucracy to do would be to recommend to the Secretary that he declare all of the “blue water” Navy veterans covered under presumption immediately, reverse course, and honestly try and successfully complete the NVVLS, and start to fund proposals to examine the epi-geniological impact of exposure to dioxin and other toxins on

second, third, and fourth generations of the progeny of Vietnam veterans, as well as the impact on the veterans themselves.

However, while it is clear as to what the right and just and honest thing to do is in this situation, it is highly unlikely that these leopards will change their spots and start to act decently. Therefore in regard to action by the Executive branch, we can only hope that Secretary Shinseki, who we do believe to be a good, honest, and decent man, will do the right thing despite the recommendations of the permanent ORD staff.

The veterans involved have been done a great injustice. That injustice needs to be made right. Early enactment of the Agent Orange Equity Act will provide such justice for many veterans who are now suffering and dying as a result of the harmful exposure to Agent Orange during the Vietnam War. We urge this distinguished Committee and the Senate to take the necessary steps to pass this bill as soon as possible.

S. 1940 - A bill to require the Secretary of Veterans Affairs to carry out a study on the effects on children of exposure of their parents to herbicides used in support of the United States and allied military operations in the Republic of Vietnam during the Vietnam era, and for other purposes.

Vietnam Veterans of America (VVA) also thanks Senator Gillibrand for sponsoring this very important bill requiring the Secretary of Veterans Affairs to perform a study on the effects of Agent Orange and other toxins used in Vietnam on the children of veterans so exposed. Perhaps the most emotional issue for our membership is the clear suffering of what we believe is an extraordinary rate of birth anomalies and abnormally high rates of disease and adverse health care conditions in the children, and in the grandchildren, of Vietnam veterans. We do urge that this distinguished committee consider amending the language of this bill to direct this study to also review the extent of such conditions in the grandchildren and great-grandchildren of veterans exposed to Agent Orange and other toxins in Southeast Asia, or veterans so exposed elsewhere in the world where these chemicals were used by the United States military during that same period.

This will provide a starting point for assembling the evidence that may be available regarding these high rates of disease and conditions in this population. VVA does caution, however, that since there has been a consistent policy, particularly in the past eight years, of not providing any Federal funding for original science in this area that there may not be nearly enough peer reviewed scientific work for the VA to review. Therefore, VVA urges that early passage of S.1940 be followed up by steps to ensure that there are funds available specifically for original scientific studies into the effect of dioxin and other toxins on the progeny of Vietnam veterans.

VVA has been working on just such a proposal and looks forward to discussing these issues and working with you, your distinguished colleagues, and your able staff, Mr. Chairman, to bring forth a proposal that will accomplish this and other purposes.

S. 3035 - Veterans Traumatic Brain Injury Care Improvement Act of 2010, To require a report on the establishment of a Polytrauma Rehabilitation Center or Polytrauma Network Site of Department of Veterans Affairs in the northern Rockies or Dakotas and for other purposes

Traumatic brain injury suffered by our troops in Afghanistan and Iraq has become so relatively common that its acronym, TBI, is becoming almost as infamous as PTSD. While this affliction is not new; it has only been so codified because of the carnage caused by IEDs, (Improvised Explosive Devices), another acronym that has been incorporated into the dialect of war. The Veterans Administration and the military medical system is already screening all returning troops for mild to moderate cases of TBI; to varying degrees of effectiveness. Those whose brain injuries are more serious are quite obvious to clinicians.

VVA does not object to the intent or the specifics of this proposed legislation/project. We would suggest that it incorporate an element that takes into account PTSD, which is often present when there is either polytrauma or TBI.

Further, VVA recommends that this project be coordinated with the Montana National Guard, which has become the singular model of how to effectively de-stigmatize and more effectively treat PTSD in those who choose to remain in the Guard/Reserves or active duty forces, as well as in general. Further, since this is the most rural military force that the United States has fielded since World War I, it is certainly appropriate that the VA start developing new models of how to deal with returning troops closer to their home, which is so often not in a major urban area. This would seem to be as good a place to start as anywhere, particularly because of the leadership of the Montana National Guard.

S. 3107 - Veterans' Compensation Cost-of-Living Adjustment Act of 2010, To amend title 38, United States Code, to provide for an increase, effective December 1, 2010, in the rates of compensation for veterans with service connected disabilities, and the rates of dependency and indemnity compensation for the survivors of certain disabled veterans, and for other purposes. VVA supports this legislation. Disabled veterans and their families fall victim to the rising costs of living no less so than anyone else. S. 3107 would increase the current levels of disability compensation, additional compensation for dependents, the VA clothing allowance and the various rates of Dependency and Indemnity Compensation (DIC). The percentage of increase would be equivalent to the percentage of the cost of living adjustment (COLA) for Social Security beneficiaries, and would become effective as of December 1, 2010. These COLA increases are absolutely necessary to ensure that veterans and their dependents receive meaningful benefits, and to prevent them from falling through inflationary cracks.

S. 3192 - Fair Access to Veterans Benefits Act of 2010

While VVA is in general in favor of speeding up the process of adjudicating veterans' claims, there may well be some instances whereby, through no fault of the veteran, the time for appeal to the Court of Veterans Appeals should be extended in the interest of justice. Therefore, VVA favors passage of this proposal.

S. 3234 - Veteran Employment Assistance Act of 2010, To improve employment, training, and placement services furnished to veterans, especially those serving in Operation Iraqi Freedom and Operation Enduring Freedom, and for other purposes.

Vietnam Veterans of America (VVA) strongly endorses the clear good intent of this effort at a comprehensive act, and generally endorses much of what is in each of the major titles of this proposed legislation.

There are significant flaws in the section 3 outline for veterans' business centers, including a confusing mix of grants for various purposes to the proposed centers, and no overall outline of how the Small Business Administration (SBA) is to develop the organizational capacity to support such centers. Certainly there is nothing in the experience of the last five or six years that should lead anyone to believe that that SBA has any particular organizational capacity to much of anything at all beyond the Patriot Loans for veteran business owners or would be business owners. Further, the history of trying to secure matching funds for such endeavors is certainly less than salutary. None of the veteran business centers funded via any federal entity that we are aware of actually was able to produce matching funds in the past decade.

Section 5 of the proposed Act, requiring that all DVOPs and LVERs veteran staff in the state workforce development agencies attend training within two years of being hired will require additional funding of about \$2.8 million dollars per year for the next two years to implement. One can argue that this is a much needed and excellent proposal, and a good investment in these staff members who will be trained, that can only help them do a better job for all persons served by the state workforce development agencies, including veterans.

However, this title begs the question of holding the state workforce development agencies accountable for what is done and/or not done for veterans returning from OIF/OEF, disabled veterans, and veterans at risk of being homeless. Without real measures of effectiveness placed upon the state workforce development agencies that are directly tied to financial awards/rewards, experience strongly suggests that the states will not suddenly change their behavior and stop treating the DVOP/LVER program as anything but a "cash cow" and continue to give lip service only to veterans who are desperately seeking assistance in securing a job. The problem with this section is that it appears to take significant action while not fundamentally changing anything. Therefore it betrays the returning warriors.

The only responsible action if the Congress is serious about wanting to really help returning veterans get meaningful assistance to getting a job is to federalize the DVOP and LVER positions, and make them employees of USDOL, training and requiring them to actually work with employers to place veterans into decent jobs that pay a living wage. Sections 6 through Sections 16 all have significant promise, particularly the sections that redirect some significant Workforce Investment Act (WIA) funds toward veterans (although more such funds should be re-directed).

The central question that this proposal does not address is how to get the management of the One Stop Centers to be motivated to let their staff that is supposed to deal with veterans full time actually do their job, and support them in doing that job. Without a dramatic change in this behavior on the part of management and supervisory personnel in the state agencies, none of the rest of the titles in this legislation will work because there will be no effective workforce staff to match the potential veterans up with the possible training and job opportunities.

Mr. Chairman, VVA stands ready to work with you, your colleagues, and your staff to develop some possible mechanisms that will work and provide better services to returning veterans from the current conflict.

S. 3286 – A bill to require the Secretary of Veterans Affairs to carry out a pilot program on the award of grants to State and local government agencies and nonprofit organizations to provide assistance to veterans with their submittal of claims to the Veterans Benefits Administration, and for other purposes.

One of the primary reasons for the “backlog” of claims at the Veterans Benefits Administration (VBA) is the poor development, preparation, and presentation of claims that are actually submitted to the VBA for adjudication. The problem is that there are just not enough properly trained and supervised preparers of such claims. This pilot program has the potential to make a significant difference in both the accuracy of claims adjudicated, and the increased speed in which reasonable decisions can be rendered when claims are properly presented in a uniform organized manner.

S.3314 To require the Secretary of Veterans Affairs and the Appalachian Regional Commission to carry out a program of outreach for veterans who reside in Appalachia, and for other purposes.

Additional outreach, education, and assistance to veterans and their families who reside in this very poor and much under-served region can only be a help in assisting these deserving veterans and their families to be accorded the benefits, rights, compensation, and services which they have earned by virtue of military service to country. VVA favors enactment of this bill.

S.3325 - To amend title 38, United States Code, to authorize the waiver of copayments for telehealth or telemedicine visits of veterans, and for other purposes.

VVA favors waiving of copayments for services delivered utilizing this new methodology for delivery of care in neuropsychiatry and counseling both because it entails much less use of VA resources per patient contact, and because there have been no good clinical studies in the U.S. of the efficacy and effectiveness of this new modality for delivery of counseling services. VVA further urges the Congress to press VA to perform good clinical studies as to the effectiveness of various treatment modalities using this new technology, and to do so before we invest too many more tens of millions of dollars in fancy gear for teleconferencing or for so-called virtual reality treatment modalities. All use of such technology must be subjected to the same rigorous evidence based medical precepts that should govern the rest of VA delivered medical care.

S.3330 – Veterans Health and Radiation Safety Act of 2010, To make certain improvements in the administration of medical facilities of the Department of Veterans Affairs, and for other purposes.

VVA favors not only much more rigorous controls and quality assurance for use of nuclear medicine, but particularly favors much more stringent quality assurance on the too many services currently contracted out by the VHA to the private sector, often needlessly and without systematic review as to whether these services could be more effectively and efficiently provided by fulltime VHA personnel.

S.3335 – Veterans One Source Act of 2010, To provide for an internet website for information on benefits, resources, services, and opportunities for veterans and their families and caregivers, and for other purposes.

The VA has done such a consistently poor job of outreach and education of veterans and their families as to what benefits, services, and entitlements that accrues to them by virtue of the veterans' military service to country that the need for such a bill as this is virtually self-evident. VVA favors the intent of this proposal, and commends Senator Klobuchar for taking the initiative to introduce this comprehensive legislation.

S.3367 -To increase the rate of pension for disabled veterans who are married to one another and both of whom require regular aid and attendance, and other purposes.

VVA strongly favors this bill, which will correct an unintended consequence of other legitimate restrictions which had the perverse effect of greatly penalizing disabled veterans who are married to one another, and need aid and attendance in order to survive.

S.3370 – To improve the process by which an individual files jointly for social security and dependency and indemnity compensation, and for other purposes.

VVA strongly favors this bill and any other proposal that has the effect of reducing redundancy, red tape, and making it easier for veterans and survivors to access their legitimate benefits and services, which were earned by virtue of the veteran's military service to country.

Multifamily Transitional Housing Loan Program – Senator Burr

In regard to possible improvements in the multifamily transitional housing loan program, VVA favors significant expansion of this program beyond five loans. We have been stuck at no more than five loans since this program was first enacted as a loan guaranty program in 1998. The animus of the permanent bureaucracy at the Office of Management & Budget (OMB) to this program from the outset continues to be a classic study in the irrationality of a runaway and virtually unaccountable fourth branch of government. Initially the OMB opposition was because it was a loan guaranty program, and therefore less subject to tight control by the OMB bureaucracy.

Whether this move to change this from a loan guaranty program to a direct loan program is due to finally acceding to bureaucratic wishes, or simply a reflection of a very different reality in the private capital markets due to financial problems of the last few years, we do not know. However, we do know that if this program is worth doing, and we believe it is, then after being in existence for more than a decade it must be expanded beyond something that can and is used for the benefit of only one or two private investors.

This program in an expanded form is very much needed if we are to virtually eliminate, or at least to dramatically reduce, homelessness among veterans within the next five or six years.

Mr. Chairman, VVA again thanks you for this opportunity to express our views here today, and will be pleased to answer any questions you or your colleagues may have.