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HEARING ON CALL TO ACTION:
VA OUTREACH AND COMMUNITY PARTNERSHIPS

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WEDNESDAY, APRIL 24, 2013

United States Senate,
Committee on Veterans' Affairs,
Washington, D.C.

The committee met, pursuant to notice, at 10:02 a.m.,
in Room 418, Russell Senate Office Building, Hon. Bernard
Sanders, chairman of the committee, presiding.

Present: Senators Sanders, Brown, Tester, Blumenthal
and Burr.

OPENING STATEMENT OF CHAIRMAN SANDERS

Chairman Sanders. Chairman Sanders. Good morning,
everyone, and thank you for coming to what I think is going
to be a very informative and important hearing on how the VA
and other organizations that work with the VA or in support
of the VA do outreach.

But before I begin the hearing, I do want to make a
statement; and that is to point out to Dr. Sowers and to the
VA that it is completely unacceptable, with the vast
resources of the VA, that they were incapable of submitting
their testimony to this Committee on time.

It is disrespectful. For us to do our job of
oversight, we, by rule, are supposed to be receiving

1 testimony in a way that we can absorb it and learn from it.
2 Testimony came in late. This is the second time since I
3 have been chair that this has happened.

4 I just want to make the VA aware that this is not going
5 to continue. I do not think it is too much for this
6 Committee to get testimony on time so staff and members have
7 an opportunity to adequately understand what the testimony
8 is about.

9 There was a survey in October 2010 which indicated that
10 nearly 60 percent of veterans did not understand or were not
11 fully aware of the benefits available to them.

12 The reason I wanted to hold this hearing is the
13 following. I happen to think that in many areas the VA does
14 enormously good work and enormously important work. I was
15 just in the VA center in White River Junction on Saturday
16 and looked at a program that which is just literally saving
17 many lives.

18 But no matter how good the programs are that the VA
19 has, no matter how good the health care program may be,
20 their variety of health care programs may be, or what they
21 are doing in homelessness or many other areas, it does not
22 mean anything to the veteran if that veteran does not know
23 about what the program is about.

24 Now, we have 22 million veterans in this country. Some
25 of them do not want to access the VA and that is fine. But

1 I do think it is our job to do as much as we possibly can to
2 make sure that every veteran in America has the information
3 they need to make the choice, to understand what the VA is
4 offering so they can say, no, I do not want to access it or,
5 wow, I really did not know that. This is terribly important
6 to my family. I did not know about this educational
7 opportunity. I did not know about this health care program.

8 So, the truth is also that we are in the 21st Century
9 and we have things like computers and emails and social
10 media; and while I think we can say historically, the VA has
11 not done a terribly good job in outreach, I think what we
12 can also say in fairness to the VA in the last few years we
13 have seen a significant turn around.

14 I can remember and I got involved in this issue because
15 I would say about ten years ago in the State of Vermont, I
16 was not impressed about how many Vermont veterans knew about
17 VA programs.

18 I went around the State with VA and we had hundreds and
19 hundreds and hundreds of people coming out to these
20 meetings, saying, oh, I did not know that I am entitled to
21 that. I did not know what the VA has to offer in terms of
22 low cost prescription drugs. I did not know how I can
23 access that.

24 So, the bad news I think is historically the VA has not
25 done a particularly good job in outreach. The good news is

1 that I think, and we have seen some significant turnaround.
2 Nobody who looks at their website today will deny that that
3 website is a heck of a lot better than it was a year ago and
4 that they are making progress on other fronts as well.

5 So, what we are here today is to learn from the VA how
6 they are communicating with millions and millions of
7 veterans, some of whom are in desperate need of VA programs
8 but do not know about.

9 A particular problem is with older veterans, Korea,
10 Vietnam, folks who do not necessarily feel comfortable on
11 the internet. How are we reaching out to those folks?

12 So, there is a lot to discuss and I look forward not
13 only to hearing from Dr. Sowers but to hear from our
14 wonderful panel that will follow him and to talk about the
15 very good work they are doing independently of the VA.

16 Senator Burr.

17 OPENING STATEMENT OF SENATOR BURR

18 Senator Burr. Thank you, Mr. Chairman. I will not
19 cover the same thing that Chairman Sanders covered as it
20 related to the timeliness of your remarks; but whatever the
21 chairman chooses to do, I will back him fully. I think that
22 the Committee deserves better from the VA and pledge to the
23 Chairman to work in whatever fashion to make sure that this
24 practice, and I say practice because it is not an isolated
25 incident, stops.

1 Mr. Chairman, thank you for this important hearing that
2 will focus on the outreach of VA and how community-based
3 organizations can help veterans access services.

4 I would like to also take this opportunity to welcome
5 all of our witnesses today. Before I talk about the
6 importance of leveraging community assets that can help
7 identify veterans in need or help veterans find needed
8 assistance locally, I would like to touch on the VA's
9 current outreach efforts.

10 During both the fiscal years 2012 and 2013 budget
11 hearings, I asked the VA to provide information on the
12 amount of money enterprise-wide that VA spent on outreach
13 activities as well as what matrix uses to determine the
14 effectiveness of its outreach initiatives.

15 In response to my questions for fiscal year 2012, the
16 VA's Office of Public and Intergovernmental Affairs, or
17 OPIA, indicated that it had previously stood up the National
18 Veterans' Outreach Office, which was tasked with tracking
19 costs associated with outreach activities, providing
20 training to VA to outreach personnel, and evaluating and
21 developing metrics to measure effectiveness.

22 They stated that they hoped they would be able to
23 provide the cost information within the next year. A year
24 later, pre-hearing questions for the 2013 budget hearing, I
25 again asked VA for information on the amount of money spent

1 on outreach. VA provided the Committee with information
2 showing that from fiscal year 2009 to 2013, VA had spent a
3 total of \$83.7 million on outreach.

4 Although this amount only included an estimate on the
5 spending of 2013, I was pleased that VA had begun to account
6 for the money being spent. I was hopeful that this was the
7 first step towards Public and Intergovernmental Affairs
8 Office and NVO undertaking the needed process of
9 coordinating VA outreach as well as determining what
10 programs were effective in assisting the veterans and which
11 were not.

12 Unfortunately, this has not happened. It is my
13 understanding that from March until August of last year, NVO
14 was without a director. Only in August 2012 was a full-time
15 director hired to run NVO and oversee all the VA outreach
16 activities.

17 To make matters worse, the previous director was on
18 temporary assignment, meaning NVO had been without a full-
19 time leadership for over a year.

20 Because of this, VA has no enterprise-wide metrics to
21 determine whether outreach is effective and is unable in the
22 short term to provide the Committee with updated cost
23 information.

24 Mr. Sowers, VA is a large department and I understand
25 the individual medical centers, regional offices, and

1 programmatic offices are largely responsible for their own
2 outreach activities.

3 However, NVO under your office has been charged with
4 coordinating outreach, and I believe this should be a real
5 priority for you to ensure that NVO is meeting its assigned
6 task.

7 There are veterans in need of services and it is vital
8 that VA effectively reach out to them to ensure that they
9 are aware of the health care and benefit assistance that is
10 available.

11 If VA is unable to quantify their current outreach
12 efforts, I believe it calls into question whether any future
13 outreach will be duplicative or will have the desired
14 outcome.

15 Turning to the second panel, I am interested in hearing
16 more on how we can leverage existing community assets to
17 reach veterans in need. As I have discussed in previous
18 Committee hearings, private-public partnerships in the
19 context of mental health care is a great way to ensure that
20 veterans get the care they earned and deserve.

21 By using a similar model for outreach, veterans will be
22 better placed to find programs offered by local governments
23 and non-profits that can best meet their needs.

24 Finally, I hope to learn more about the existing
25 community integration initiatives, whether there are any

1 best practices that can be expanded nationally, and if there
2 are ways to partner with the VA.

3 Veterans live in both rural and urban areas, and VA
4 resources may not be available close to where they live.
5 However, almost every community in this country has a
6 network of veterans, businesses, or non-profits willing to
7 help in the efforts and can be coordinated in a meaningful
8 way.

9 I look forward to the testimony today and I thank the
10 Chair.

11 Chairman Sanders. Thank you, Senator Burr.

12 Senator Tester.

13 OPENING STATEMENT OF SENATOR TESTER

14 Senator Tester. Yes, thank you, Mr. Chairman and the
15 Ranking Member, and I want to thank Mr. Sowers and the
16 witness that are to come yet.

17 We are at a time when agencies are attempting to do
18 more with less. So, it only makes sense to work more
19 collaboratively with partners, better utilize all the tools
20 that are at our disposal.

21 That means building partnerships with other federal
22 agencies to ensure the we are working efficiently and as
23 productively as possible. It also means jurisdictional
24 issues and duplication of effort that impede progress.

25 It also means that we need to explore and build

1 stronger partnerships with local partners, non-profits, and
2 the private sector. We have got a lot of folks out there
3 that are willing to help and we have a lot of challenges
4 addressing the needs of our veterans.

5 We have got to the folks who are willing to help better
6 engaged in the process. I think that is why you are here
7 and the next panel is here.

8 But I think that if we coordinate better, we can reach
9 that common goals of serving our veterans better, and that
10 is the bottom line.

11 Thank you, Mr. Chairman.

12 Chairman Sanders. Senator Brown.

13 OPENING STATEMENT OF SENATOR BROWN

14 Senator Brown. Thank you, Mr. Chairman.

15 Thank you, Mr. Sowers, for joining us and I appreciate
16 the comments of Senator Burr and Senator Tester.

17 A comment to our Nation's veterans begins at outreach
18 before ending the backlog, before quality of care, before
19 ending homelessness. Our efforts will fall short if we are
20 not reaching every veteran. That obviously almost goes
21 without saying.

22 I appreciate the Chairman holding a hearing on this
23 important issue. An outreach cannot be solely a VA issue.
24 It has to be the responsibility of all of us. I have done a
25 series of events around Ohio promoting VRAP over the last

1 year, for the last several months.

2 People in my State in many cases are not aware of it.
3 They have benefitted greatly from it, those who have signed
4 up. We know that is replicated in state after state.

5 The Ohio Department of Veterans' Services estimated it
6 has contract information for more than 450,000 of Ohio's
7 veterans. Yet VA estimates that Ohio actually is the home
8 some 875,000 veterans. Not all of those accounted for may
9 qualify for benefits. Some of those veterans surely would
10 not.

11 We know from experience that many do from burial
12 expenses to education to health care. So, it is more than
13 just the benefits of VA. The veterans we are not reaching
14 are missing out on a wide network of Veterans Service
15 Organizations.

16 We know that people come home after serving in Iraq or
17 Afghanistan, do not connect with the local either the
18 veterans service office which Ohio has in each of the 88
19 counties or the Veterans Service Organizations.

20 Outreach is not a one-size-fits-all endeavor. I have
21 held a series of field hearings in Appalachia in southeast
22 Ohio. I was taken by the dean of Ohio University's eastern
23 campus who said, "Many Appalachian veterans or families
24 never seek help. They do the best they can through self-
25 help. This is oftentimes not enough for those encountering

1 depression, anxiety, or posttraumatic stress due to their
2 previous combat experience.

3 "If we are to effectively help Appalachian veterans and
4 their families, we will need to educate them and the public
5 about the impact of the combat experience on these veterans.
6 We will need to implement aggressive outreach programs
7 informing veterans about the services that are available to
8 them."

9 He was speaking specifically of Appalachian veterans
10 but we know anecdotally that that is far too common for
11 veterans all over the country.

12 So, we spend a lot of time investing in the VA. We
13 spend money giving VA resources. These investments do not
14 mean a whole of a lot if we have not reach out as well as we
15 should to the people who served our country.

16 So, Mr. Sowers, thank you.

17 Thank you, Mr. Chairman.

18 Chairman Sanders. Let me just do this if I might, Mr.
19 Burr, just take one moment to ask you and the members here a
20 question. I mean, would you say in general, say in North
21 Carolina, is the average veterans aware of his or benefits,
22 do you think?

23 Senator Burr. Mr. Chairman, let me say that North
24 Carolina may be a unique State just simply because of the
25 military footprint that is there and the fact that we are

1 the fastest growing veterans population in the country.

2 So, I think our veterans are pretty aware. It is
3 probably not through the outreach programs of the VA. It is
4 more the size of the infrastructure.

5 Chairman Sanders. John, what do you think in Montana?

6 Senator Tester. I think it depends on what conflict
7 they were involved in. I can tell you there is a lot of
8 vets that were turned down for service years ago. They
9 quite frankly do not know that they can come back and try
10 again, because the rules, we have changed the rules of the
11 game.

12 So, that is a challenge.

13 I think that the VSOs I think if the VA was able to
14 utilize them and if the VSOs could get recruitment to
15 members involved in the different organizations, it could
16 really help the VA get their education out. It is very
17 difficult.

18 I mean, I will just tell you. I had a meeting when I
19 first got on this Committee and there was a veteran that
20 came in to the meeting we had and he says, I just came out
21 of the woods, and it was not a figurative statement. He
22 literally just came out of the woods, and he had been there
23 since the Vietnam conflict.

24 Chairman Sanders. Sherrod.

25 Senator Brown. Yes, briefly. I go back to my dad. My

1 dad was a World War II vet, and he hardly ever talked about
2 it as many in that generation. One of the things I most
3 appreciate about being on this Committee is to encourage
4 older vets, whether they are doing their visits to
5 Washington, World War II vets, to see the veterans memorial
6 or at a veterans' organization in Chillicothe and get them
7 to tell their stories.

8 I think that sort of reluctance to speak out is also,
9 generally they are not particularly aware of this. It is a
10 pretty self-reliant group of people. I also think the
11 military so often does not really give them any guidance
12 when they leave the armed forces and come back to this
13 country.

14 They do not tell them much about how you can go to
15 Youngstown State in a special program for combat veterans or
16 how you can connect with the local community-based
17 outpatient clinic. The military needs to do better. I
18 think we need to do better. I think out culture needs to do
19 better with this.

20 Chairman Sanders. Thank.

21 Dr. Sowers, the mic is yours.

1 STATEMENT OF TOMMY SOWERS, PHD, ASSISTANT
2 SECRETARY FOR PUBLIC AND INTERGOVERNMENTAL
3 AFFAIRS, DEPARTMENT OF VETERANS' AFFAIRS

4 Mr. Sowers. Chairman Sanders, Ranking Member Burr, and
5 distinguished members of the Committee. On behalf of
6 Secretary Shinseki and the employees at the VA, I am honored
7 to be here this morning to update you on the Department's
8 outreach. I would like to briefly explain where we are, the
9 situation, and where we are headed.

10 Chairman, as you mentioned, there are more than 22
11 million veterans in the United States, yet less than half
12 currently access the VA. In addition, the 2010 survey that
13 you referenced said that 60 percent of veterans knew either
14 very little or nothing at all about their VA benefits.

15 I used to be one of the 60 percent. While on active
16 duty in the military, the military had my full attention.
17 Upon leaving the Army, I learned what many other veterans
18 already know, that while service made me strong, the VA can
19 you me stronger.

20 Because of the VA, I was able to file and receive a
21 claim, earn my doctorate thanks to the Post-9/11 GI Bill and
22 get first rate health care at VA facilities. I know
23 firsthand the impact of awareness of these benefits.

24 From early in his tenure, Secretary Shinseki identified
25 increasing veterans access as one of his top three

1 priorities, and today we can see our outreach efforts making
2 a difference.

3 Accessing health care has never been simpler. Across
4 the country, Iraq and Afghanistan veterans are utilizing VA
5 health care at a rate greater than any previous generation,
6 including an unprecedented increase in the number of women
7 receiving care at the VA.

8 Education and compensation benefits have been never
9 been greater. I and about a million other veterans and
10 family members have gone back to school on the Post-9/11 GI
11 Bill. In the last few years, we have added about a million
12 more to our compensation rolls.

13 But in the Special Forces, I learned you cannot
14 accomplish a mission alone. You have got to work by, with,
15 and through others in order to get it done. The secretary
16 and I both meet regularly with non-profits, for-profits,
17 veterans service and advocacy organizations.

18 Following my comments this morning, we will hear from a
19 few of the over 10,000 organizations committed to making a
20 difference in the lives of veterans and their families.

21 Mike Monroe of Point of Light works closely with our
22 caregiver initiative and our benefits administration to find
23 ways to increase economic opportunities for veterans.

24 In New York City, Eric Weingartner of the Robin Hood
25 Foundation helps veterans and families in poverty

1 complementing out aggressive homeless outreach, and our
2 medical centers collaborate with volunteers through Wendy
3 Spencer at the Corporation for National and Community
4 Service.

5 We have also greatly expanded our outreach to state and
6 local governments. Last year the VA signed a memorandum of
7 understanding with the National Association of State
8 Directors of Veterans Affairs.

9 Massachusetts veterans leader, Coleman Nee, does great
10 work from connecting our homeless prevention efforts with
11 local leaders to helping veterans get the training and
12 certifications they need to get a good jobs.

13 And last week in Boston, VA medical staff worked
14 closely with Coleman and other State officials to respond to
15 those events, connecting the victims with our experience
16 with dealing, assessing, and recovering from trauma.

17 Tomorrow, VA is deploying three mobile vet centers
18 throughout the greater Boston area to assist local
19 authorities with counseling those affected by the attack,
20 and we will be there for those injured while they recover,
21 helping them re-define their mission. For decades we have
22 challenged and inspired our injured veterans through our
23 rehabilitative sports programs.

24 I could continue to tell you about where we are from
25 our website, from Make the Connection Campaign to our

1 involvement with think tanks to our expanded social media
2 presence. But I know all good messages are delivered
3 succinctly so I will look forward to say more during the
4 questions.

5 But what I am really excited about today is where we
6 are headed tomorrow. Immediately after my arrival last
7 August, we evaluated our current outreach and initiated
8 planning to launch a new campaign called VA Access.

9 VA Access is a multi-year communication and outreach
10 effort involving our three administrations and VA staff
11 offices. We have incorporated best practices from the
12 private sector, built-in strategic and tactical objectives,
13 set milestones, established quantifiable metrics to measure
14 our performance.

15 The central thing on how we measure our success is by
16 the number of new customers, in our case veterans, accessing
17 the system.

18 VA Access is built around VA's first ever national
19 advertising campaign. We partnered with the Ad Council and
20 are excited to work with the renowned and awarding
21 advertising firm DDB on a pro bono basis. We are learning
22 about our customers with extensive quantitative and
23 qualitative research; and kicking off in the weeks prior to
24 Veterans' Day this year, you will start seeing our
25 coordinated campaign on TV, radio, billboards and magazines.

1 That is our perspective on the situation where we are
2 and where we are going. VA deeply appreciates the continued
3 support of this Committee.

4 On a personal level, I am deeply honored to represent
5 my fellow veterans and help them access the services and
6 benefits.

7 Thank you. I look forward to your questions.

8 [The prepared statement of Mr. Sowers follows:]

1 Chairman Sanders. Thank you very much for your
2 testimony. Give me a guess. Let me begin with health care.
3 How many veterans now access the VA health care?

4 Mr. Sowers. We have 8.9 million enrolled.

5 Chairman Sanders. Who are in the program?

6 Mr. Sowers. That is correct, Chairman Sanders.

7 Chairman Sanders. What is your guess as to how many
8 people might be eligible for the program who are not in it?

9 Mr. Sowers. Well, there are 22.4 million veterans that
10 are out there, Chairman Sanders; and then unless they were
11 dishonorably discharged, they are eligible for the program,
12 they are eligible for health care.

13 Chairman Sanders. How many veterans do we think lack
14 any health insurance at all?

15 Mr. Sowers. That is a good question, Chairman Sanders.
16 I will get with VHA to get that precise estimate.

17 Chairman Sanders. You would agree with me that your
18 job is to make sure that every veteran in America, whether
19 or not he or she wants to access VA services, and many do
20 not for whatever reason, know what those benefits are.

21 Mr. Sowers. That is correct, Chairman Sanders.

22 Chairman Sanders. All right. Now, you are dealing
23 with a wide spectrum of folks. You are dealing with people
24 who just left Iraq and Afghanistan, who are very computer
25 savvy. You are dealing with World War II veterans who have

1 never used a computer in their lives. So, you have a whole
2 bunch of universes out there that you have to access.

3 I am concerned about the older veterans right now, say
4 Vietnam vets. Do you suspect that there are many Vietnam
5 vets who, by the way, might have initially when they
6 returned home from Viet Nam had bad experiences with the VA.
7 What is your strategy of reaching out to that group of
8 people?

9 Mr. Sowers. Chairman Sanders, thank you very much for
10 that question. The strategy is multi-faceted. Actually,
11 Vietnam veterans is the larger proportion of veterans on
12 face book but it is going to require more than face book.
13 It is going to require some direct face time as well.
14 Vietnam veterans represent the largest cohort with a
15 membership within the Veterans Service Organizations.

16 So, when I came in, I initiated meetings with the
17 Veterans Service Organizations and non-profit leaders. We
18 have got to reach these veterans by, with, and through some
19 of these partners.

20 I will give you one other example. About a hundred
21 hours ago I was standing in Wales, Alaska, population 145,
22 looking over the frozen Bering Sea. I was standing there
23 with the Alaska State Veterans' Affairs Director, the head
24 of our health care system, and our local tribal veteran
25 representative.

1 In this town of 145, about as rural as you can get,
2 there are Vietnam veterans there that, as you said, may not
3 want these programs; but once we explained it to them in a
4 face-to-face way, we got veterans to sign up.

5 We need those sorts of interactions to occur in rural
6 communities across the country.

7 Chairman Sanders. For the Post-9/11 veterans, the VA
8 is now providing free health care for the first five years
9 upon their return. What percentage of those veterans know
10 that, do you think?

11 Mr. Sowers. Chairman Sanders, what we have seen is
12 that 56 percent of the 1.5 million Iraq and Afghanistan
13 veterans have utilized VA health care. That is historically
14 unprecedented.

15 We have historically been around the mid 30 in terms of
16 the Iraq and Afghanistan vets, and what we are finding is
17 that Iraq and Afghanistan veterans whether it is the Post-
18 9/11 GI Bill sky-high awareness of this incredible program
19 that you all have supported again and again.

20 Chairman Sanders. Let me interrupt you for a second.
21 My time is running out. So, you think we are doing well.
22 Is that because of the TAP program do you think? Has that
23 been an important part of that?

24 Mr. Sowers. Chairman Sanders, I believe the
25 improvements to TAP have made positive contributions to it.

1 When I got out, it was more like death by PowerPoint. I
2 have seen the new TAP. It is an improvement from what I
3 went through but we have got to do more.

4 There is a lot of confusion out there between the
5 compensation and care, and that is a message that I have
6 been working aggressively to get out.

7 Chairman Sanders. All right. So, you think 56 percent
8 does seem to me to be a pretty high number. So, you think
9 we have done a fairly good job in informing the younger
10 veterans about VA health care and that significant numbers
11 of them are taking advantage of that?

12 Mr. Sowers. Chairman Sanders, the numbers are
13 historically high. I just think we have got to do better.
14 I mean, I have run into veterans, smart veterans. One of my
15 buddies is a Rhodes Scholar who injured his shoulder in the
16 service and did not yet know about the five years of health
17 care.

18 So, it is something we have got to continue to work on
19 although we are seeing historically high numbers.

20 Chairman Sanders. I think you have heard from all of
21 the members the importance of working effectively with
22 state, local government, non-profits. Say a word about what
23 you are trying to do in that area.

24 Mr. Sowers. Chairman Sanders, it is vitally important
25 and within my office is the Office of Intergovernmental

1 Affairs. This memorandum of understanding signed with the
2 National Association of State Directors is absolutely
3 important.

4 When I travel around to the states, when I was in Ohio,
5 I met with Tom Moe. He told me about the unique, innovative
6 programs that they are doing in Ohio. When I was in North
7 Carolina, it was Tim Wipperman there who told about the
8 unique programs that they are doing there.

9 We know that the best solutions are not all coming out
10 of D.C., that they are at the local level where we are
11 seeing great solutions.

12 Part of that memorandum of understanding is working
13 with that organization to recognize and understand the best
14 practices so that we can spread those out across the
15 country.

16 Chairman Sanders. Okay. Senator Burr.

17 Senator Burr. Dr. Sowers, welcome. I covered the
18 numbers that VA provided for me for the five-year period,
19 the \$83 million. However, it is my understanding that NVO
20 and OPIA is currently unable to provide the information that
21 I requested which would be updated cost information and
22 projections as part of the questions for the record for the
23 2014 review.

24 Is that true?

25 Mr. Sowers. Ranking Member Burr, I will inquire about

1 that, the specific question that you asked on that. I know
2 for our outreach efforts we have a specific number that we
3 are tracking for what NVO spends on outreach.

4 Senator Burr. Let me ask on behalf of the Committee if
5 you would provide those numbers for us and as well the
6 metrics that you discussed in your opening statement that
7 you have created to monitor it.

8 I would agree with Chairman Sanders. Fifty-six percent
9 is an awfully good number, and I think it begs us to stop
10 and say, what is different about those separating from the
11 current conflicts from the population that is more of a
12 traditional VA population, that they might be so much better
13 informed about the VA.

14 I think probably we could all point to social media as
15 a tremendous tool which begs the question that if we agree
16 that it has had a major impact on the ability for veterans
17 to understand the benefits that were available to them, why
18 all of a sudden the departure over to \$4.3 million
19 advertising campaign which I sort of look at from a
20 standpoint of it being traditional and social media being
21 the 21st Century mode of communication?

22 Mr. Sowers. Ranking Member Burr, that is a great
23 question. I see this as a combined arms campaign. You have
24 got to be in the air. You have got to be on the ground.
25 You have got to be where the veteran is and the time, tone,

1 medium, and frequency that they care about.

2 I will give you an example of how we are using social
3 media to reach out. The Make the Connection Campaign is a
4 campaign that started in June of last year.

5 Senator Burr. Make no mistake. Clearly, you are doing
6 social media effectively. So, tell me what the theme and
7 what your expectations are of a \$4.3 million advertising
8 buy.

9 Is it to actually increase the reach or is it to be a
10 little more bit high profile relative to the effort?

11 Mr. Sowers. Ranking Member Burr, thank you for that
12 question. You know, a key thing about this campaign, if you
13 are referring to the Ad Council campaign, it works on
14 donated media and it works on pro bono work from the
15 advertising firm.

16 Some folks, as we heard earlier, they want to receive
17 mail. They want to receive things, you know, that they can
18 feel and touch. Some folks want to see the messages on TV.

19 The great thing about working with the Ad Council and
20 the pro bono firm, DDB, is that they bring to us decades of
21 research on how to effectively message across a wide variety
22 of medium.

23 So, it cannot just be social media. That will be part
24 of the campaign but it will not be the entire part.

25 Senator Burr. So, is there a matrix that has been

1 developed to determine whether this effort produces the
2 predicable results?

3 Mr. Sowers. Ranking Member Burr, the key metric that
4 we are using is the number of new customers accessing the
5 VA. After my arrival, we started tracking that for the
6 first time enterprise-wide.

7 You know, I am a customer of three products of the VA
8 from two different Administrations; and so now, on a month-
9 to-month basis, we know the number of new customers that are
10 coming into the VA.

11 This year is the key one where I can level set and get
12 a sense of the exact matrix and how it flows, which months
13 we see a higher intake versus others.

14 When we kick off this campaign in October, we will have
15 a very clear idea with a full year of counting exactly how
16 many folks are coming into the VA.

17 Senator Burr. Last question. The initiative the will
18 kick off in October, how many, if any, outreach programs
19 were terminated and replaced by this program?

20 Mr. Sowers. Ranking Member Burr, I can get back to you
21 with a distinct answer. I see this as an additive program;
22 but I will go back and check the history of it, of exactly
23 what was replaced.

24 Senator Burr. Since you have taken over, have we
25 terminated any outreach programs?

1 Mr. Sowers. Ranking Member Burr, I will get back to
2 you on the specifics of that.

3 Senator Burr. Thank you.

4 Thank you, Mr. Chairman.

5 Chairman Sanders. Senator Tester.

6 Senator Tester. Thank you, Mr. Chairman.

7 Thank you for your service. Thanks for being here
8 today. I want to talk a little bit about partnership with
9 volunteers particularly as it applies to rural America.

10 I was encouraged to see the vets program which is under
11 the Department of Labor and their initiative to provide
12 outreach to unemployed veterans in rural area. It is
13 critically important that we get a better idea of what
14 services particular veterans need to utilize to get back
15 into the work force.

16 So, from your perspective, can you speak to any
17 initiatives launched by the VA to partner with various
18 community groups to expand care or services to rural
19 America?

20 Mr. Sowers. Senator Tester, thank you very much for
21 the question. As you know, I am a rural vet. I grew up in
22 a town of 13,000 and no VA facility there.

23 But what is in my hometown, there is a VFW post. There
24 is an American Legion post. There are a number of VSOs that
25 have their boots on the ground in those communities.

1 And so, what I initiated when I came in was, I need to
2 speak with the communicators of these organization. And so,
3 on a quarterly basis we bring these Veterans Service
4 Organizations and non-profits in, and we bring them in not
5 just to talk but to listen.

6 What we did, for example, on the website is instead of
7 just revealing the website and saying, tah-dah, here it is,
8 we brought in the VSO non-profit leaders to say what do you
9 need, how can we do this better, how can we communicate with
10 you.

11 Rural veterans, we know, are online. So, there is an
12 online portion to it. But then there is also an on the
13 ground. One thing that has happened in the last few years
14 is the expansion of our mobile vet centers.

15 I love the vet centers. They are a phenomenal, low
16 threshold way that people can access VA. But the mobile vet
17 centers has taken the show on the road.

18 Just as we are going to be able to deploy them to
19 Boston tomorrow, they predominantly focus on rural areas
20 where we do not have a VA facility. But it brings
21 counselors. It brings people that know about the benefits
22 to that area.

23 Senator Tester. I want to talk about something the
24 Chairman has been an advocate of for sometime now and this
25 is community health centers.

1 The VA announced steps to partner aggressively with
2 local providers such as community mental health centers.
3 Okay. But there has been I think a lack of communication
4 and collaboration between the VA and the private providers I
5 talked about in the previous meeting, as a matter of fact,
6 the previous hearing, to deliver care at local access
7 points. It has been an issue for a long time.

8 What steps can be taken to improve the communication
9 and collaboration between the VA and actual local health
10 care providers, whether it is mental health or otherwise?

11 Mr. Sowers. Senator Tester, thank you for that
12 question. I have seen it work in a couple of different
13 ways. One is the veterans' crisis line that you may know
14 about. It is 700,000 calls, 26,000 saves.

15 At that center when they receive calls from wherever
16 they are coming in, they immediately connect with the local
17 providers, whether that is law enforcement, whether that is
18 the mental health providers. They connect that call through
19 the VA to the local provider.

20 The second one is what I just saw in Alaska. Since
21 Secretary Shinseki's visit in 2011, we have expanded our
22 sharing agreements with local tribal authorities that
23 provide health care. So now, both tribal veterans and non-
24 veterans can go to their local facility and receive that
25 care instead of having to fly to Anchorage.

1 Senator Tester. Well, you are the point man on
2 intergovernmental affair. Can you talk about conversations
3 that are going on, now we will talk within the government,
4 between for instance you, the VA, and Health and Human
5 Services?

6 Indian Health is another one. You talked about that
7 just a minute ago. Is there a conversation at this level
8 that is being bled down to the ground so that the folks on
9 the ground, so you can work between agencies?

10 Mr. Sowers. Senator Tester, it is a great question.
11 An example is the partnership that we have had with the
12 Indian Health Services. So, that does not just require the
13 VA to communicate out to the veterans but Indian Health
14 Service to communicate out to their local providers as well.

15 So, we have been at the same table as we are forming
16 the policy in partnership and then we both take our lines of
17 operations.

18 Senator Tester. Anything with HHS, Health and Human
19 Services? Any conversations, any partnerships there?

20 Mr. Sowers. Senator Tester, right now we are working
21 closely with HHS on information about the Affordable Care
22 Act to make sure that veterans are informed and understand
23 some of the changes that are moving forward.

24 Senator Tester. All right. Thank you very much.

25 Thank you, Mr. Chairman.

1 Chairman Sanders. Senator Brown.

2 Senator Brown. Thank you, Mr. Chairman.

3 Mr. Sowers, one of the panels, the second panel, one of
4 the witnesses said in his prepared remarks that there are
5 more than 40,000 organizations, overwhelmingly non-profits,
6 working with veterans. And I do not really know even what
7 to recommend on this.

8 Is there any effort or thought or are there plans for
9 VA to sort of have a registry of them to work with them to
10 try to get them, I mean, there are some that work cross
11 purposes. I mean, one group I would worry about is the for-
12 profits, some of the for-profit colleges and university that
13 tend to run up debt for students, veterans and non-veterans
14 alike.

15 Is there reason for you to manage these or try to
16 manage these or is there an ability to do that with all
17 these non-profits out there, most of whom would generally
18 want to help veterans but do not really have much
19 coordination one with the other?

20 Mr. Sowers. Senator Brown, it is a great question.
21 When I was in Ohio with Tom Moe, we did a roundtable with a
22 lot of the local providers that are there. I think it would
23 be very challenging for us and I am not sure I would want to
24 manage or attempt to manage--

25 Senator Brown. I might have used the wrong word. Is

1 there, I mean, tell me about the relationships. How do you
2 look at many of these 40,000? Is there any coordination or
3 advice you give them or anything you can do to sort of make
4 them perform better, if that is the case?

5 Mr. Sowers. So, Senator Brown, there are a few things
6 that we have done on this is one is I have send periodic
7 outreach to Veterans Service Organizations and non-profits
8 to get an understanding of the solutions that they are
9 delivering at the local level.

10 I think a very key set of relationships is we
11 formalized in the case of the state veterans' affairs
12 directors and then working with the counties and cities as
13 well is working through our local veterans' leaders in those
14 communities who know the solutions, who know the local
15 providers.

16 Part of my interest is to make sure that the great
17 solutions that are happening in Ohio that VetCorps is a
18 perfect example which you are doing in Ohio. It is a great
19 example, that those lessons that are being learned there are
20 shared.

21 And so, surfacing those best practices, we are getting
22 those right now through the Association of State Directors.

23 Senator Brown. Okay. Thank you. Talk to me about, I
24 mentioned in my opening statement 870,000 veterans in Ohio,
25 not many more than half can Ohio State government actually

1 identify by name and location and all of that.

2 What do you do with states like Ohio? I mean we have
3 88 county Veteran Service Organizations. We have, as all of
4 us do, many VSOs that are doing terrific work.

5 How do we reduce that gap so we know where they are so
6 state government can communicate with them and let them know
7 of the education, health care, homeless services, all of
8 those?

9 Mr. Sowers. Senator Brown, thank you very much for
10 that question. We have got to do that, you know, we cannot
11 manage what we cannot measure. And having a clear
12 understanding of where the veterans are, what their
13 demographics are, is a key to any outreach campaign.

14 So, you are going to start seeing some changes through
15 the VA's website. For example, when you come to it, it is
16 going to ask you for your zip code and where you are at.
17 That way we can start customizing messages to veterans of a
18 specific regions.

19 But a key thing I have heard from the states, and we
20 want to deliver it, is data on who we are tracking and who
21 they are tracking and getting a good sharing between the two
22 so that we can close that gap.

23 Senator Brown. Thank you.

24 Thank you, Mr. Chairman.

25 Chairman Sanders. Thank you. Let me just ask one last

1 question. Tell me if I am right on this one. But VA
2 standards and eligibility requirements often change. So if
3 I have 20 percent disability and my income is X and next
4 year my income is Y, I may at one point be eligible and the
5 next point not be eligible.

6 Is that a barrier in terms of access to health care
7 that may be somebody applied, they were told that they were
8 ineligible; in fact, three years later standard have
9 changed. Is that a problem for the VA?

10 Mr. Sowers. Chairman Sanders, that is a challenge
11 because, as you mentioned, there were veterans that maybe
12 left the service 20, 30 years ago when the VA was an
13 administration and not a cabinet level department. It
14 offered different benefits and services.

15 So, again it is one of the key things of why a campaign
16 like VA Access is critical, is to ease the ability of saying
17 this is what the current, the current benefits are. We want
18 to drive people to this site and make the site--we made it
19 more user friendly. We want to continue in that trend.

20 Chairman Sanders. There is another issue and I wish I
21 had the book in front of me. It looks like a huge telephone
22 book. But in the State of Vermont, which is a rural state,
23 and incomes and cost of living are different in certain
24 parts of the State, we have one county next to another
25 county; and your income eligibility is different.

1 Right. So, if I am earning X dollars in Y county and X
2 plus one in another county, I might be eligible or not
3 eligible. Does that pose, I mean, does that create problems
4 for you guys?

5 Mr. Sowers. Chairman Sanders, I would say anytime
6 there is a change in requirements, there is some messaging
7 that needs to go with that. That is why we want to bring in
8 some of the best practices of the private sector here.

9 Chairman Sanders. I mean, in this case, I am not just
10 faulting the VA. I am faulting maybe us as well. If people
11 know what they are eligible for and are not in all kinds of
12 different levels, it might be easier for the average veteran
13 to say, yes, I can walk in the door rather than having been
14 rejected and never coming back again even though he may now
15 be eligible.

16 That was my point. It was not a criticism of VA. But
17 when I see a telephone book for eligible requirements based
18 on different incomes in the State of Vermont, frankly it
19 does not make a whole lot of sense to me.

20 Senator Burr, any other questions?

21 Senator Burr. No.

22 Chairman Sanders. Okay. Dr. Sowers, thank you very
23 much for your testimony. Thank you.

24 Mr. Sowers. Thank you.

25 Chairman Sanders. We will have the next panel come up

1 please.

2 Okay. Panelists, thank you very much for being with
3 us. I think what we all recognize and what we have heard
4 from this Committee already this morning and from Dr. Sowers
5 is that we cannot do our job or the VA cannot do its job in
6 terms of outreach, in terms of giving the support that our
7 veterans need unless it is done not only by a strong
8 outreach effort of the VA but by private non-profits as well
9 and other government agencies. And the goal is to bring all
10 of the players together and I know all of you without
11 exception have been actively involved in that.

12 So, we thank you very much for the work that you have
13 done. We want your ideas as to how we can improve upon what
14 we do, how we can make the cooperation between the VA and
15 your organizations stronger.

16 So, let us begin. I am delighted to welcome Wendy
17 Spencer, who is the Chief Executive Officer of the
18 Corporation for National and Community Service. Wendy,
19 thanks very much for being with us.

1 STATEMENT OF WENDY SPENCER, CHIEF EXECUTIVE
2 OFFICER OF THE CORPORATION FOR NATIONAL AND
3 COMMUNITY SERVICE

4 Ms. Spencer. Thank you so much, Chairman Sanders,
5 Ranking Member Burr, I appreciate the opportunity to testify
6 today. I also want to thank.

7 Chairman Sanders. Is your mic on?

8 Ms. Spencer. I also want to thank both of you for
9 entrusting me in the honor of serving as the CEO of the
10 Corporation for National and Community Service. I began
11 about a year ago so I am very excited in my new role.

12 We at CNCS share your commitment to serving our
13 veterans and military families. Personally as a wife, a
14 daughter, granddaughter and even a stepmother of men who
15 served in four branches of the military, this is very
16 personal to me and it is a priority.

17 Meeting the needs of our veterans and military families
18 is a national challenge. National service, what we do, is an
19 innovative, cost-effective, and proven solution to this
20 challenge.

21 We are a grant-making agency built on the public-
22 private partnership. Each year we generate an investment of
23 hundreds of millions of dollars in private and other outside
24 resources.

25 We recruit, mobilize, and manage 80,000 AmeriCorps

1 members, 330,000 Senior Corps participants, and an
2 additional 4.5 million community volunteers.

3 Through our vast network of grantees and partners,
4 dedicated Americans serve in 70,000 locations across the
5 Nation. These are in schools, faith- and community-based
6 organizations, non-profits, many of which you are familiar
7 with like Habitat for the Humanity, Points of Light,
8 American Red Cross, the American Legion Auxiliary, Catholic
9 Charities, and thousands more.

10 National service members are taking on some of our
11 Nation's most pressing problems, including supporting
12 veterans and the military family community.

13 Our commitment to veterans and their families is deep
14 and it is actually two-fold. We serve them and we ask them
15 to serve with us. Those strategies are proving to be
16 tremendously beneficial and have great results.

17 National service members serve at hundreds of VA
18 clinics and hospitals, at Veterans Service Organizations and
19 non-profits. They are connecting veterans to job
20 opportunities, helping them access their benefits, providing
21 peer counseling, mentoring their children, and so many more
22 benefits and programs. Last year, our program served more
23 than 1.5 million veterans and family members in every state
24 in the country.

25 Veterans themselves also bring unique skills and

1 leadership to solve problems at home. National service
2 actually give our heroes, we call them, a new mission on the
3 home front, a pathway to opportunity if you will, and a
4 better transition to civilian life.

5 Last year, more than 27,000 veterans served in our
6 programs. In fact, many of our programs are vets helping
7 fellow vets which we find very successful.

8 In Washington State, for example, the governor
9 appointed Commission for National and Community Service and
10 the State's Department of Veterans' Affairs joined together
11 and in 2009 to launch an AmeriCorps program called VetCorps.

12 VetCorps is made up of veterans or military family
13 members. They serve full-time to support veterans enrolled
14 in public colleges across the State. In fact, every public
15 college.

16 They take their fellow veterans by the hand and assist
17 them with every aspect of their transition. Their mission
18 is to never leave a veteran behind and to help them succeed
19 in college and in life. I am pleased to report that it is
20 working.

21 Last year, 31 AmeriCorps members in VetCorps served
22 7,100 veterans. Nine out of every ten of these veterans
23 served reported to us they had better understanding of how
24 to navigate college and use their VA benefits.

25 Early results show us that VetCorps members have

1 substantially boosted the number of veterans on track to
2 graduate from college, the goal of course that we all share.

3 In conclusion, let me tell you about Mike Bremer. Mike
4 is an Iraq war veteran who served in AmeriCorps as a member
5 of an all-veteran fire team in Colorado. Mike said, and
6 these are his words, "When I returned from Iraq with the
7 Army infantry, I felt like I lost all meaning and purpose in
8 life and I had trouble finding meaningful work. My
9 AmeriCorps experience gave me new purpose and a valuable new
10 skill set. I received incredible training and experience
11 through AmeriCorps."

12 I am pleased to share with you today that Mike now has
13 a full-time job as a firefighter with the U.S. Forest
14 Service. I called Mike yesterday to tell him I was going to
15 share his message with you, and he is doing quite well.

16 Mike found his new mission and we know what ours is.

17 Mr. Chairman, Ranking Member Burr, we are poised,
18 ready, committed, dedicated to work with each of you and
19 each member of this Committee and the VA to serve our
20 veterans and their families as well as they have served each
21 of us. We hope you will consider national service as an
22 important part of the solution.

23 Thank you for the opportunity to testify today. As a
24 moment of privilege, I would like to thank my colleagues
25 here, grantees and partners in the room and especially my

1 senior advisor for veterans issues, Koby Langley, who is an
2 Iraq war veteran, Bronze Star medalist, and a command judge
3 advocate who is advising me and helping us grow services to
4 veterans and the military family.

5 Thank you very much.

6 [The prepared statement of Ms. Spencer follows:]

1 Chairman Sanders. Thank you very much, Ms. Spencer.

2 Secretary Coleman Nee from the Department of Veterans'
3 Services for The Commonwealth of Massachusetts is our next
4 panelist. The reason we asked you to come is that from what
5 we have heard is you are doing as good a job as any state in
6 the country in terms of providing services to veterans, and
7 we want to see what we can learn from you.

8 So, thank you very much for being with us, Mr. Nee.

1 STATEMENT OF COLEMAN NEE, DEPARTMENT OF VETERANS'
2 SERVICES, THE COMMONWEALTH OF MASSACHUSETTS

3 Mr. Nee. Thank you very much, Mr. Chairman, and we do
4 an excellent job in Massachusetts and I would like to take
5 credit for it but I cannot. I have an outstanding team that
6 does phenomenal work everyday. So, I will pass on your
7 thanks to them.

8 And, before we begin, I would also like to thank you,
9 this Committee, the Federal Government, and the VA, as Dr.
10 Sowers mentioned, providing resources, thoughts and prayers
11 to those of us in the Commonwealth of Massachusetts, and in
12 particular the city of Boston over the last two weeks.

13 My name is Coleman Nee and I am Secretary of Veteran
14 Services for the Commonwealth of Massachusetts. I want to
15 thank I want to thank the Chairman and the members for the
16 opportunity to address you and speak about the important
17 role state departments of veterans' services can and do play
18 in order to ensure we are providing the highest quality of
19 benefits and services to our veterans and their families.

20 On behalf of Governor Deval Patrick and Lieutenant
21 Governor Timothy Murray, I am proud that Massachusetts is a
22 leader in providing veterans' benefits and services.

23 Some of our highlights include the fact that by State
24 law we mandate a vet service officer to every city or town
25 in the Commonwealth. We provide over \$70 million in State

1 taxpayer funds in direct financial benefits to veterans and
2 dependents. We launched a first-in-the-nation web portal
3 for veterans benefits, called MassVetsAdvisor.org.

4 We collaborate with the our Division of Career Services
5 to maximize employment opportunities for every veteran; and
6 we are offering unique peer support programs in the area of
7 veteran suicide prevention, crisis intervention, and ending
8 homelessness.

9 The greatest emphasis we have, and I think it has been
10 highlighted here today, is that we placed a collaboration
11 between federal, state, municipal, and private NGOs and non-
12 profits to ensure we are creating meaningful partnerships to
13 maximize resources and provide the finest benefits and
14 services this country has to offer and that all of our
15 veterans most assuredly have earned.

16 In Massachusetts, we found that there is not always a
17 lack of resources for veterans and their families. In fact,
18 the biggest impediment is accessing the benefits and lack of
19 knowledge of those benefits and how to navigate the various
20 bureaucracies associated with those benefits.

21 To that end, we have instituted a number of programs
22 over the past few years to increase access, knowledge, and
23 navigation of those resources and benefits and we feel some
24 of these could serve as national models.

25 Included in this is our SAVE program, Statewide

1 Advocacy for Veterans Empowerment Team. SAVE is a
2 collaboration with our Massachusetts Department of Public
3 Health, Suicide Prevention Bureau. It is comprised of
4 veterans or family members of veterans who have lived
5 through similar transitions and can use their experiences to
6 build a rapport with veterans and/or veteran family member.

7 It offers peer-to-peer crisis intervention coupled with
8 resource navigation to advocate for veterans who are not
9 able to obtain the benefits they have earned due to
10 institutional or personal barriers.

11 In fiscal year 2012, we provided direct outreach to
12 over 1400 veterans in Massachusetts; 234 of those veterans
13 received direct referral and linkage services; 94 veterans
14 received active case management with 10 of those individuals
15 receiving case management for "critical incidences".

16 I can assure you that the young men and women who work
17 on that team have guaranteed that they are men and women who
18 are veterans of the Commonwealth who are alive today who I
19 doubt may be alive were it not for the help and assistance
20 that this team provided.

21 Based on the success of this, we have migrated this
22 approach to peer support to the area of ending veterans
23 homelessness.

24 In our Statewide Housing and Advocacy for Reintegration
25 and Prevention Team or SHARP is an effort and a

1 collaboration between the U.S. Department of Veterans'
2 Affairs and the VA's Center for Ending Veterans'
3 Homelessness, accomplishing through peer support, mental
4 health services, psychiatric evaluations, and linkages to
5 emergency shelters at veterans center facilities as well as
6 non-profits.

7 We are enrolling more veterans in our HUD-VASH program.
8 We are housing them quicker. We are keeping them housed
9 permanently. Our rate of working with these veterans
10 through peer support and maintaining their ability to access
11 services not only has resulted in a 27 percent decrease in
12 the amount of homeless veterans over the past two years but
13 it is resulting in significant cost savings as these
14 veterans are accessing more efficient and more effective
15 treatment and permanent supportive housing rather than
16 continuing through the system of going from shelter to
17 shelter and services to services without any coordinated
18 effort.

19 Our Women Veterans Network continues to increase
20 outreach and direct services. We are very proud of our
21 Women Veterans Network. There are over 27,000 women
22 veterans in the Commonwealth. Women are the fastest growing
23 segment of our veterans' population, and access to outreach
24 and benefits and services for women is more critical than
25 ever.

1 We produce annual newsletters. We are holding our
2 fifth annual Statewide women's veterans conference this
3 June. We do many networking events, and we hold a Women
4 Veterans Appreciation Day where we award the outstanding
5 woman veteran of the year award, the Deborah Sampson Award,
6 to a different woman veteran each year. Last year our Women
7 Veterans Network provided direct case work and referral
8 services to over 500 women veterans alone.

9 And finally, our MassVetsAdvisor.org website which was
10 started with \$1 million in federal funding supported through
11 the American Recovery and Reinvestment Act. It is a
12 collaboration between the Mass Technology Collaborative, the
13 Home Base Program, and the Red Sox Foundation.

14 That is a one-stop resource that streamlines the data
15 of over 400 benefits and services from federal, state, and
16 local non-profits under one web portal easy to search based
17 on your time of service, when you served, and branch of
18 service.

19 So in closing, I would say that the State Department of
20 Veteran's Services operates at the community level and in
21 conjunction with the numerous other human service agencies
22 and providers.

23 This model allows us to be in tune with local resources
24 and programs that can provide on-the-ground critical
25 resources to ensure no veteran or family member is denied

1 access to services.

2 In closing, I would like to thank the Committee for the
3 opportunity to testify here today and encourage you to
4 examine our State programs and services for best practices.
5 We feel that in collaboration with the Department of
6 Veterans' Affairs we can provide the finest resources and
7 care for our veterans and their family members going
8 forward.

9 Thank you.

10 [The prepared statement of Mr. Nee follows:]

1 Chairman Sanders. Mr. Nee, thank you very much for
2 your work and for your testimony.

3 Mr. Nee. Thank you.

4 Chairman Sanders. Our next panelist comes from the
5 Military Initiatives for Points of Light. They do
6 outstanding work.

7 Mike Monroe, thank you very much for being with us.

1 STATEMENT OF MIKE MONROE, VICE PRESIDENT OF
2 MILITARY INITIATIVES, POINT OF LIGHT

3 Mr. Monroe. Thank you, Chairman Sanders.

4 Chairman Sanders, Ranking Member Burr, on behalf of
5 Michelle Nunn, our CEO, and Neil Bush, our Chair, and
6 thousands of volunteers, I would like to thank you for
7 giving Points of Light the opportunity to talk about the
8 Community Blueprint Initiative.

9 My name is Mike Monroe and I serve as the Vice
10 President of Military Initiatives at Points of Light. I
11 came to this role in June of last year after serving as a
12 Marine officer, infantry officer for 12 years, and as a
13 civilian employee of several government agencies.

14 Let me start with a simple statement. The Community
15 Blueprint is a set of tools and resources that individuals
16 and community organizations can use to help veteran, service
17 members, and their families succeed.

18 The Blueprint got its start at the 2010 White Oak
19 Summit where representatives from more than 55 non-profit,
20 corporate, and government organizations gathered to discuss
21 the thousands of non-profits engaged in efforts to help
22 returning veterans and the problems caused by a real lack of
23 coordination of their efforts.

24 Some of those in attendance included the Military
25 Officers Association of America, Blue Star Families, the

1 USO, the National Military Family Association, and the
2 American Legion Auxiliary.

3 Those at the summit were determined to create a way for
4 community organizations to work together to offer better,
5 more comprehensive, and more accessible services to the
6 hundreds of thousands of veterans returning home. Members
7 of this original group stepped forward and created the
8 Community Blueprint Advisory Council.

9 This council, still intact today, created a suite of
10 best practices to help returning veterans in eight critical
11 areas--employment, housing, education, reintegration,
12 behavioral health, volunteerism, family strength, and
13 financial and legal matters.

14 Four things that make the Community Blueprint uniquely
15 useful, powerful, and sustainable are. It is a public-
16 private partnership. It can be customized to a community's
17 needs and scaled to fit a community's size. It is
18 completely volunteer powered, and it engages veterans as
19 part of the solution.

20 The Community Blueprint was officially launched in
21 October of 2012 with the generous support from lead sponsor,
22 ITT Exelis along with the UPS Foundation and the Corporation
23 for National Community Service. The Community Blueprint is
24 a strong public-private partnership bringing on-the-ground
25 organizations and people together, driven by local needs and

1 using proven tools and resources to make the transition to
2 civilian life easier for tens of thousands of returning
3 veterans and their families.

4 Exelis has also formed the Exelis Action Corps to
5 engage its own employees, 10 percent of whom are veterans,
6 as volunteers working to help meet veterans' needs.

7 At Points of Light, we think the best way for
8 government, the private sector, and the non-profit sector to
9 help the over one million projected transitioning veterans
10 reintegrate back into society is by defining what works and
11 implementing proven strategies in a cooperative, coordinated
12 way at the community level.

13 We know that no one organization can provide a lifetime
14 of continued support. Points of Light and its partners are
15 working alongside government agencies to help fill the gaps
16 and connect veterans to critical services.

17 Veterans like David Scott, a third generation Navy
18 veteran who served in Desert Storm and Operation Deny
19 Flight. David is a disabled veteran. On his own, David
20 could not get the health care he needed. Thanks to an
21 intervention by the local Red Cross, a part of the Blueprint
22 Community in Atlanta, David finally got an appointment with
23 the VA Clinic in Oakwood, Georgia, to get help with his
24 long-term care needs.

25 The Community Blueprint engages veterans as part of the

1 solution. With backing from AmeriCorps, the Blueprint has
2 created a Veteran Leader Corps, consisting of 75 members,
3 half of whom are veterans, serving in 19 Blueprint
4 Communities. These 75 men and women add to our “boots on
5 the ground” as AmeriCorps members who are in the field
6 providing direct service to veterans every day. Veteran
7 Leader Corps members use Blueprint tools and resources to
8 help veterans and military families in all areas of need but
9 most specifically in job readiness and volunteerism.

10 Veteran Leader Corps members like Retired Chief Petty
11 Officer Robert Rotkosky, a former U.S. Navy SEAL, who
12 dedicated his career to protecting our way of life. After
13 20 years of faithful service to our country and a second
14 career as a contractor helping the military, “Ski” as he is
15 known to us had more to give. He chose to support his
16 fellow sailors, marines, soldiers, airmen, and guardians by
17 enlisting in the Veterans Leader Corp in Huntsville,
18 Alabama. “Ski” now works with “Still Serving Veterans”
19 Huntsville, where he and his colleagues have used Blueprint
20 tools and resources to help 41 veterans find jobs and 100
21 veterans get proper benefits in just three months.

22 Since the launch six months ago, the Blueprint program
23 has expanded from 20 to 44 communities. Blueprint
24 communities now dot the country from Fayetteville, North
25 Carolina, to Lakewood, Washington; from Denver, Colorado, to

1 Fairborn, Ohio.

2 The Blueprint tools and resources can be useful to
3 hundreds, even thousands of other communities.

4 I want to thank you again, Mr. Chairman, and all the
5 members of the Committee for your service and support of
6 veterans and their families.

7 We look forward to continuing to work with you to
8 provide those who served our country with what they have
9 earned, a prosperous and healthy future aided, as needed, by
10 a network of compassionate support.

11 Thank you.

12 [The prepared statement of Mr. Monroe follows:]

1 Chairman Sanders. Mr. Monroe, thank you for your
2 testimony and for the wonderful work your organization is
3 doing.

4 We are now going to hear from Eric Weingartner. Mr.
5 Weingartner is the Managing Director of Survival and
6 Veterans at the Robin Hood Foundation.

7 Mr. Weingartner, thanks very much for being with us.

1 STATEMENT OF ERIC WEINGARTNER, MANAGING DIRECTOR,
2 SURVIVAL AND VETERANS, ROBIN HOOD FOUNDATION

3 Mr. Weingartner. Thank you, Senator. Good morning,
4 Chairman Sanders, Senators and the Committee staff.

5 On behalf of the Board of Directors and staff of Robin
6 Hood, thank you for including us in this important
7 discussion on community partnerships with the Veterans
8 Administration.

9 My name is Eric Weingartner and I manage those
10 portfolios, Senator, that you mentioned at Robin Hood in New
11 York City.

12 Despite some progress on the part of the Veterans
13 Administration, our work in New York City leaves us to
14 conclude that the VA operates in relative isolation;
15 disconnected from public and private resources that are
16 fundamental to the livelihood and health our Nation's
17 veterans.

18 My intent today is to share with you our experience
19 working in the veterans space with a suggestion or two for
20 how to move forward.

21 For context, Robin Hood's mission is simple--fight
22 poverty in New York City. Since 1988, Robin Hood has
23 focused on finding, funding, and creating programs in
24 schools that generate meaningful results for families in New
25 York's poorest neighborhoods.

1 Over our 25-year history, Robin Hood has distributed
2 more than \$1.25 billion to hundreds of New York City-based
3 not-for-profit organizations.

4 Robin Hood's programs have always served veterans.
5 However, in the beginning in 2009, we noticed an up tick in
6 the number of veterans showing up at our food pantries, our
7 homeless shelters, and our job training programs.

8 In response, we committed to tackling the issue more
9 deliberately, and in partnership with the then-Chairman of
10 the Joint Chiefs of Staff, Admiral Mike Mullen, we raised a
11 \$13-million fund to incubate new programs to support
12 veterans and their families.

13 So, in the summer of 2011, we began to invest locally
14 and were struck by a few underlying challenges. Firstly,
15 when veterans leave the military, they are discharged
16 abruptly and without a support system to make a transition
17 to civilian life.

18 Secondly, demographic data on veterans is incomplete
19 and not centrally managed, making it difficult to reach out
20 to those veterans who could benefit from support services.

21 Number three, the VA and its programs are not properly
22 integrated with local communities; and lastly, Veterans
23 Service Organizations, while very well meaning and in some
24 cases effective, are not at a scale or quality to meet the
25 demand.

1 In the face of these challenges, today we have invested
2 \$7.5 million in over 25 brand new programs. Our programs
3 have placed over 700 vets in jobs, moved 250 street homeless
4 veterans into shelter and connected 1250 veterans to legal
5 services in partnership with our local VA.

6 All of our new models aim to do two fundamental things.
7 One, get help to those veterans and their families that need
8 it most, and secondly, to serve as a testing ground for
9 models that can be replicated nationally.

10 A few underlying principles have guided our investment.
11 Lessons that we believe have national relevance. First, we
12 relied on New York City, the City of New York and the city's
13 major funder of human services to be our partner.

14 The majority of our investment has been made in
15 partnership with our local government, augmenting existing
16 city programs. We believe that this coordination is the
17 primary condition for success.

18 Secondly, instead of relying on Veteran Services
19 Organizations to expand their reach, we instead choose to
20 create new models with New York City's most established not-
21 for-profit service providers such as New York University's
22 medical school, Single Stop, Common Ground, and the Jericho
23 Project.

24 Third, we formed an advisory board to ensure that the
25 private sector both participated in our planning and was

1 engaged in shaping new models of programming. Admiral
2 Mullen and Robin Hood member, Steve Cohen, lead that board.

3 What is ahead of us? I think some daunting challenges
4 relating to reintegration must be addressed fundamentally.
5 Government does not transition soldiers from military life
6 to civilian life and the VA fails to create a safety net for
7 soldiers after discharge.

8 The Department of Defense and the VA need to manage a
9 harm handoff. This coordination would connect soldiers to
10 jobs or college in advance of discharge and would include a
11 commitment to facilitate benefits, housing, and health care
12 very efficiently and right away.

13 While we are hopeful that the DOD's redesigned TAP
14 program will improve the transition, we are fairly skeptical
15 that the plans go far enough to ensure an effective safety
16 net.

17 Today I ask the Committee to help our veterans by
18 committing to a new model of service and accountability.
19 The VA must hold itself accountable to plan that can
20 demonstrate integration and partnership with local
21 communities. One that is measured by the Senate.

22 The City of New York funds and manages an impressive
23 roster of not-for-profits that are both publicly and
24 privately funded. Unfortunately, we believe that the VA is
25 structurally isolated from the system of services and should

1 count on and utilize these resources in a more deliberate
2 and systemic way.

3 To this end, this spring Robin Hood, the City of New
4 York, the business community, and the not-for-profit sector
5 will pilot a first of its kind veterans' collaborative in
6 New York City; and we ask the VA to join our effort to
7 develop the connective tissue between the VA and the broader
8 New York City community.

9 Our team has been formed over the last 18 months and
10 stands ready to formally collaborate with the VA to revamp
11 our shared goal of ensuring financial, physical, and
12 emotional health for our veterans.

13 I ask the VA to commit today to this New York City
14 pilot to create a first of its kind national model for
15 helping our veterans get all the way home.

16 Thank you very much for your time.

17 [The prepared statement of Mr. Weingartner follows:]

1 Chairman Sanders. Thank you very much, Mr.
2 Weingartner.

3 Let me start off with kind of a simple, basic question.
4 I think we all recognize that to do right by our veterans
5 there has to be intensive cooperation from the VA and other
6 federal agencies, the non-profits, state and local
7 governments.

8 Let me just start off with Ms. Spencer. Has the VA
9 done a good job in trying to coordinate those efforts? How
10 is the relationship between the VA and those other entities?

11 Ms. Spencer. Thank you, Mr. Chairman, for that
12 question. We are currently having some very serious
13 conversations with the VA about expanding the VetCorps model
14 I mentioned to you in the State of Washington that is having
15 such success in making sure that those who are enrolled in
16 college today on the GI Bill graduate.

17 We need them to be successful. This is a fabulous
18 tool, the GI Bill is, and we need these veterans who decide
19 to take advantage of this benefit to succeed.

20 I serve on the Interagency Council of Homelessness
21 where Secretary Shinseki currently chairs. I heard him
22 recently talk passionately about this benefit of the GI Bill
23 and how he wants to see a higher rate of graduation as well.

24 So, we are in very serious conversations with his team
25 about how we can have an interagency agreement between the

1 Corporation for National and Community Service and VA to
2 scale and reach more veterans in college and have that peer-
3 to-peer veteran.

4 So, the desire there is certainly there. The passion
5 is there. I think they are doing well. I want to do more
6 with them.

7 Chairman Sanders. Okay. Let me just ask that same
8 question to Mr. Nee. Are you getting the cooperation that
9 you need from the VA? What suggestions do you have as to
10 how that effort can be improved?

11 Mr. Nee. Thank you, Mr. Chairman. We work pretty
12 cooperatively with VA, particularly at the national level.
13 Secretary Shinseki has been very aggressive in terms of
14 signing this MOU with the state directors and secretaries in
15 order to continue that partnership.

16 I think it has a lot of room it can grow in. I think
17 we can demonstrate in collaboration with VA that when we
18 serve veterans and veteran benefits and provide those
19 benefits we do not just need to look at VA as the end all/be
20 all for all veterans to go into.

21 I mean, we certainly do not do that when it comes to
22 public health. I mean, we all have individual public
23 health, state departments, and city departments of public
24 health. We do not just refer to, you know, the Health and
25 Human Services Department of the Federal Government nor do

1 we do that for the Department of Education.

2 We should not do that for veterans either. Veterans
3 have benefits and services that exist at all levels of
4 government and can access, as the panelists have said here,
5 many benefits and services through non-profits and other
6 organizations.

7 We take the approach in Massachusetts that when we
8 serve veterans, we bring them to benefit buffet; and at the
9 end of the buffet, we try to create a plate for them that
10 makes sense for them.

11 That will include some VA. That will include some
12 other entries as well; but at the end of the day, we need to
13 do a better job collaborating that.

14 Chairman Sanders. Good. Thank you. Mr. Monroe, the
15 same question to you. Are you happy with the cooperation
16 that you are getting from the VA at this point?

17 Mr. Monroe. Chairman Sanders, thank you for that
18 question.

19 We launched in October, you know, I consider us still
20 in start-up mode; and so my main focus is building the
21 infrastructure, if you will, around what we have and growing
22 the Blueprint Communities.

23 I do not have a requirement that--we do not have a
24 requirement that a Blueprint Community has to be working
25 with the local VA. As we sign them up, we walk them through

1 a sign-up process and we ask them, are you working with the
2 local VA? If you are, what are you doing? If not, why not?

3 I can tell you that, off the top of my head, of the 44
4 I think about 60 percent have a good relationship at the
5 local level.

6 Once we are kind of up on plain a little bit more, I
7 intend to try to reach out a little bit more to the VA and
8 solidify that a little bit more. But right now, yes,
9 everything at the local level seems to be working well.

10 Chairman Sanders. Thank you.

11 Mr. Weingartner, the same question.

12 Mr. Weingartner. I think I would be less optimistic
13 than some of my colleagues on the panel. I think that
14 fundamentally the VA in New York City leaves on the table a
15 set of collaborations that are so critical for the vets that
16 they are serving and is fairly isolated.

17 So, to push in whether or not it is the City of New
18 York or--

19 Chairman Sanders. Let me ask you. Let me pick up.

20 Mr. Weingartner. Please.

21 Chairman Sanders. You say they are fairly isolated.
22 Are you suggesting that in New York City many veterans do
23 not know about the benefits to which they are entitled, is
24 that your point?

25 Mr. Weingartner. I think it is multifaceted. I think

1 that is a condition. I think that vets that are being
2 served by the VA probably need a broader swathe of services
3 that are not provided by the VA, and then in turn when the
4 VA has the attention of a vet that has a complex social
5 service need, that they themselves are not uniquely
6 positioned to fulfill that and in turn do not know how to
7 push back.

8 So, I think it is a double whammy, you know, you have
9 an isolation from a health care perspective but then
10 secondarily you have a mosaic of human services that are
11 publicly and privately funded that have nothing to do with
12 the VA that are, I think, isolated from that structure.

13 And, you know, I think that is a real, it is a massive
14 loss of opportunity.

15 Chairman Sanders. Thank you very much.

16 Senator Burr.

17 Senator Burr. Mr. Chairman, I think we are beginning
18 to hear more and more that VA from a standpoint of their
19 delivery of services maybe lacks the ability to reach out in
20 a community-based way to figure out how much more they can
21 bring to the table in providing the holistic approach.

22 I think clearly Mr. Weingartner points that out but we
23 have heard it as it related to mental health, specific
24 illnesses; and it is something I hope we are going to dig
25 into.

1 Wendy, I cannot let you come without saying that I got
2 your testimony at 11:06 p.m. last night. I take for granted
3 that OMB had to sign off on your testimony. Is that
4 correct?

5 Ms. Spencer. Yes.

6 Senator Burr. What changes did they make to your
7 testimony? Any?

8 Ms. Spencer. None, Senator. I am not aware of any
9 particular changes. We were in concert.

10 Senator Burr. Okay. I hope you do not mind me asking.
11 But you are held to the same standard that the VA is and we
12 would expect that testimony to be here 48 hours in advance.

13 Ms. Spencer. Thank you, sir.

14 Senator Burr. Mr. Weingartner, I am particularly
15 struck with the honesty that you have communicated with us.
16 How can you find that veterans in New York and the VA
17 cannot?

18 Mr. Weingartner. It has been, let me give you a little
19 bit more background in terms of the answer. Robin Hood this
20 year will grant \$140 million to programs across a massive
21 range of programming. The only set of programs where we
22 will struggle around recruitment is with vets.

23 Literally, every program we fund has a waiting list
24 except for veterans. It is a really, really complex
25 struggle. There are a lot of different approaches. Each

1 program has their own plan to find vets. Some of it is
2 through the VA, some of it is through the City of New York.
3 Some of it is through individual recruitment.

4 And, part of it is that, for example, we augmented a
5 city program with \$700,000 to find 1250 vets jobs. Jobs
6 sell. So, we are marketing vets for find jobs. So, each
7 one of these is literally clawing fill the spaces with vets
8 and can take a part of it.

9 Senator Burr. I am not taking a shot at the VA. But
10 all of you have something unique. You are finding people
11 that they are not finding. You are providing services to
12 people that currently are not being supplied that service
13 within the Veterans' Administration.

14 I want to sort of take a different tact than the
15 Chairman did because I do not want to plow ground that has
16 already been plowed.

17 What can we do to strengthen the partnership between
18 you and the Veterans' Administration? Naturally, it would
19 start at the beginning of any initiative that they went out
20 on, and I would be curious to ask, has the VA reached out to
21 you on their August campaign to say, here is what we are
22 getting ready to do. We are launching this massive ad
23 campaign and here is how you fit.

24 Is there any dialogue between you guys and the VA about
25 how you fit and how your organizations supports what their

1 mission is?

2 Let me just go backwards if I can.

3 Mr. Weingartner. So, I think that is a big problem,
4 what you are articulating; and from my perspective, I think
5 it would go both ways.

6 Firstly, if a vet is in our purview in any of, say, the
7 30 programs that we recently funded, it is incumbent on the
8 VA to make it really, really easy for us to push them into
9 services that are uniquely funded by the VA.

10 Secondly, I would ask the VA to say, how do you
11 demonstrate that every single vet that walks in this door
12 has had some level of assessment and that the VA has
13 established a partnership locally in literally every
14 community where you would know that there is a warm hand off
15 between the medical services and getting that vet a job and
16 connecting that vet to food stamps and connecting that vet
17 to housing, because literally right now vets are walking in
18 the door and there is no structure around the ability to
19 hand-off a vet into community programs which makes up the
20 vast majority of human services in any local community.

21 So, I would have them report back to you on what
22 exactly is their structural relationship between the
23 resources that are local.

24 So, I think Mr. Monroe talked a little bit about a
25 Blueprint. Admiral Mullen, who is essentially our tutor in

1 the veterans' space, basically indicated that you have to
2 conceive of and implement a local approach that is unique,
3 and the VA would have to master that in everyone of their
4 communities and they should be held accountable for that.

5 Senator Burr. Just go down the line if anybody would
6 like to comment on that.

7 Mr. Monroe. Ranking Member Burr, thank you.

8 For me again back to we are in start-up mode. Big VA,
9 if you will; have not had many touch points with them. I
10 intend to get to where when I am up on plain reaching out
11 with them. At the local level, I said a lot of the
12 Blueprint communities, they are very nimble. They are small
13 organizations. They are out there. They know where people
14 are so they are able to make--

15 Senator Burr. You are in 22 states. You are in an
16 unlimited amount of communities, 44 communities, 22 states,
17 75 veteran lead corps. You are a major force in the non-
18 profit world to supply services to veterans.

19 Has the VA reached out to you and said, what is it you
20 are doing so that we can figure out how it complements what
21 we are trying to do?

22 Mr. Monroe. Not yet, sir.

23 Senator Burr. Okay. Mr. Nee.

24 Mr. Nee. Thank you, Ranking Member. I think what we
25 see with VA is the collaboration really exists. It depends

1 on the medical center. It depends on the vet center. It is
2 all local to local.

3 So, if we have a vet center that is committed to
4 working with the state, then we will do very well. When
5 those veterans come in to get mental health services or VA
6 specific health care services, they will then turn them over
7 to us and we can do a benefits assessment to see what other
8 state or local or non-profit benefits they are eligible for.

9 I think when we look at national models, what I would
10 hope is that we are not talking about the Federal Government
11 seeing what we are doing and then adopting it themselves but
12 rather providing the states the resources to augment or
13 increase their local models.

14 So, for instance, Women Veteran's Networks, we have a
15 very good one. We run it on a very tight budget, \$75,000 a
16 year. It is not a lot of money but it does a lot of great
17 good.

18 If VA were to make grants available for states to apply
19 to establish state-based Women Veterans' Networks, that
20 would go a long way to its helping access benefits and
21 services for women vets.

22 Senator Burr. Let me just ask you on the program.

23 Mr. Nee. Sure.

24 Senator Burr. Has VA come to you and said, gee, this
25 is a very interesting model. We would like to roll this out

1 in communities across the country. Can you help us do that?

2 Mr. Nee. They have a national Women Veteran's Network.
3 They have not come to us specifically on our program,
4 although we do collaborate pretty closely with them on
5 accessing women into getting women into VA health care
6 services.

7 Senator Burr. But the unique thing about what you have
8 provided, all of you, provide to us is the re-enforcement
9 that these community-based programs are absolutely essential
10 if, if the goal is to try to get everybody.

11 Now, if the goal is only to get 40 percent, then that
12 is one thing; but if the goal is 100 percent, is there
13 anybody that realistically believes that it can be done
14 without a partnership within the communities that the
15 veterans live in?

16 And, I think is the uniqueness of your program. You
17 are more effective because it is community based.

18 Mr. Nee. Correct. I mean, I do not believe if we just
19 rely on VA to serve veterans in this country that we will
20 reach all the veterans. I think in order for us to serve
21 all the veterans in this Nation and their family members as
22 well, we need to have tight and coordinated partnerships
23 with state, local, and non-profit organizations.

24 Otherwise, you just cannot meet all the needs.

25 Senator Burr. Mr. Chairman, you have been very

1 generous. Thank you.

2 Chairman Sanders. Thank you, Senator Burr.

3 Senator Blumenthal.

4 Senator Blumenthal. Thank you, Mr. Chairman, and thank
5 you for holding this hearing.

6 Thank you all for being here today and your excellent
7 work in this very important area.

8 I was interested, Ms. Spencer, in your discussion of
9 reserving spaces for veterans in some of the volunteer
10 programs, Teach for America I think you mentioned and
11 Volunteers of America, the Washington Conservation Corps.

12 And, I wonder if you could provide some additional
13 details as to other organizations that reserve spaces, what
14 more can be done to provide those kinds of opportunities for
15 veterans, and whether you think the veterans have been
16 responsive to it.

17 Ms. Spencer. Thank you, Senator Blumenthal.

18 We are very excited about the progress. When the Serve
19 America Act was signed three years ago, we had seen a huge
20 interest in our veterans work because it has become a key
21 priority in our work with veterans and military families.

22 So, we are seeing the success in several ways. One is
23 in the way which you have described is encouraging out
24 grantees, our partners in the field, to reach out to
25 veterans, and military families as well, to recruit them to

1 become AmeriCorps members or Senior Corps participants and
2 also to become volunteers to serve alongside our formally
3 enrolled AmeriCorps members or Senior Corps participants.
4 That is one way.

5 Another way is adding more grantees with our annual
6 notice funding opportunity, increase the number of grantees
7 who are serving veterans. This will also grow the
8 opportunity to serve as well.

9 We are having very serious conversations. I just
10 shared a few minutes ago with the VA about expanding a
11 program called VetCorps which is helping veterans enrolled
12 in college on the GI Bill succeed and graduate. We need
13 them to graduate, and this is a program where we have
14 veterans who are AmeriCorps members serving other veterans.

15 That is a real sort of sweet spot success for us
16 because you have got that peer-to-peer. They understand
17 what they are going through. They can relate. We are
18 seeing a lot of success. And that also applies to family
19 members, because family members also understand the life of
20 a veteran.

21 So, we are aggressively reaching out to our partners,
22 our grantees, Veteran Service Organizations, working even
23 with other federal agencies. We have just announced a
24 partnership with the National Guard Bureau where we are
25 going to place AmeriCorps/VISTAs in every National Guard

1 Bureau in the country that would like them to support
2 veterans and military families with their needs.

3 We hopefully very soon, we are days away from signing
4 an interagency agreement with the Department of Labor, and
5 where this will work is our Senior Corps participants from
6 RSVP will reach out and help transitioning service members
7 get a job, help them with job training, job skills,
8 counseling.

9 So, it is endless the ways that we can work. We are
10 working right now. We have five million volunteers,
11 AmeriCorps members or Senior Corps participants,
12 opportunities.

13 So, there is not a stone that are not turning over for
14 reaching out and including them.

15 Senator Blumenthal. You mentioned VetCorps?

16 Ms. Spencer. Yes. VetCorps in Washington State.

17 Senator Blumenthal. Is it just in one state right now?

18 Ms. Spencer. Well, that particular program labeled
19 VetCorps is in the State of Washington where we currently
20 have about 50, it is growing, 50 veterans or military family
21 members serving in every public college in the State of
22 Washington, reaching out and working.

23 Last year, they served 7,100.

24 Senator Blumenthal. There are similar organizations
25 around the country.

1 Ms. Spencer. Right. There is one in Georgia, Piedmont
2 College in Georgia is a very similar model. We are
3 encouraging other grantees to consider this as a great model
4 also.

5 Senator Blumenthal. I appreciate what you said about
6 veterans helping other veterans which seems to be the most
7 productive way to help veterans, something about that common
8 experience or bond that I think is almost irreplaceable.
9 And I wonder if there is more that we can do to enlist
10 veterans in these programs, either part-time or full-time.

11 Ms. Spencer. I think there is, and it is working with
12 my colleagues here today. It is working with other federal
13 agencies like the VA, Department of Labor, National Guard
14 Bureau, others, who are interested in this. It is getting
15 that word out.

16 But we have, as I mentioned, five million either
17 volunteers or AmeriCorps members or Senior Corps who are
18 passionate about this. We are in 70,000 locations across
19 the country.

20 So, we have got the capacity. We have offices in every
21 state. We have state commissions, governor-appointed state
22 commission we work with very closely, all have our same goal
23 to help these 1.5 million veterans returning and those who
24 have already returned home and need our help.

25 Senator Blumenthal. Thank you.

1 Thank you very much, Mr. Chairman.

2 Chairman Sanders. Thank you, Senator Blumenthal.

3 Let me just conclude by reiterating what I think you
4 have heard from every member here. We appreciate that if we
5 are going to do justice for our veterans, the older
6 veterans, those who are just returning, we are going to need
7 a level of cooperation, a very strong level of cooperation
8 between the VA and other federal agencies as well as non-
9 profits and state agencies throughout the country.

10 And, you are here today because in many ways you are
11 examples, models of what we would like to see. So, I just
12 want to personally thank all of you for the great work that
13 you are doing. We look forward to working with you in the
14 future.

15 This hearing is adjourned.

16 [Whereupon, at 11:34 a.m., the Committee was
17 adjourned.]