



Gold Star Wives of America, Inc.

Statement for the Record

Gold Star Wives of America, Inc.

Before the Joint Senate and House Committees on Veterans Affairs

February 25, 2025 Hearing

Presented By Government Relations Committee

Gold Star Wives of America, Inc.

“With malice toward none; with charity for all; with firmness in the right, as God gives us to see right, let us strive to finish the work we are in; to bind up the nation’s wounds, to care for him who have borne the battle, his widow and his orphan.”

... President Abraham Lincoln, Second Inaugural Address, March 4, 1865

Introduction

*Gold Star Wives of America, Inc. exists to preserve and enhance benefits to surviving United States Military spouses and children; to help our members and their children face the future with courage and determination; and to honor the memory of our military spouses who made the ultimate sacrifice. **We are a non-profit organization and receive no federal grants.***

Our written testimony will be addressing a number of our concerns including

The Caring for Survivors Act

Burial Allowance

Aftermath of Mental Health Deaths (suicide)

Love Lives On Act (remarriage)

Toxic Exposure Issues

“...to care for him who have borne the battle, and for his widow and orphan....”

These words from Abraham Lincoln’s Second Inaugural Address in 1865 succinctly state the sacred promise our country has made to our Veterans and survivors. Congress has always had the important role in ensuring that this promise is kept. The promise began with the Continental Congress in 1780 when Congressional action created survivor benefits for certain Revolutionary War survivors. The need to keep this promise to care for Veterans and their survivors is critical.

Dependency and Indemnity Compensation (DIC)

In 1956, the death compensation was provided to survivors regardless of income. The amount was determined by wartime or peacetime service. Compensation was amended again in 1969 by Congress with a fixed rate of compensation assigned to each rank. In 1993, Congress established PL 102-568, which resulted in two types of DIC. The first is referred to as rank based DIC determined by pay grade of the deceased military service member/veteran. Rank based DIC is in the process of being phased out through attrition. The second type of DIC is flat rate DIC. All surviving spouses whose military spouse died on or after January 1, 1993 receive the monthly flat rate DIC regardless of rank.

In the Fiscal Year 2023, the VA reported that there are 479,023 surviving spouses who receive DIC. This is around 8% of the number of Veterans receiving compensation. The largest group of DIC recipients, 93% of all those receiving DIC, are over the age of 57 and 43% are over the age of 75. **Over 70% of all those receiving DIC are surviving spouses of those who served in Vietnam.** 10% of those receiving DIC are surviving spouses of those who served in WWII or Korea. Most are well past their most productive earning years and most do not qualify for the Survivors Benefit Plan (SBP). Prior to the Vietnam War, society encouraged women to work in the home, maintain the house, and raise the children. Because of the effects of Agent Orange used during the Vietnam War, many of these same women became the long-term caregivers for their disabled Veteran spouses.

Since over 70% of those receiving DIC are surviving spouses of those who served in Vietnam, ***this really is another unpaid bill come due from the Vietnam War.*** It is time to take care of the families who were tasked with taking care of our Vietnam Veterans while Agent Orange slowly ravaged their lives.

Why is an increase so needed? Let’s look at the numbers. A **married** Veteran rated 100% disabled, receives monthly compensation in the amount of \$4,044.91. When that Veteran dies, the compensation for the surviving spouse left behind drops to 43% of a **single** Veteran’s compensation (single = \$3,831.30). This means that the household income drops from \$4044.91 to only \$1653.07 per month. The annual household income of **\$48,532 drops to a mere \$19,836**, while the fixed expenses, such as the mortgage or rent, utilities, and property taxes remain the same.

By contrast, if a Federal Government employee dies, the surviving spouse can receive up to 55% of the employee's salary. Certainly, the sacrifices made by our Service Members are just as important and worthy as other Federal Employee jobs.

Since the flat rate was implemented in 1993, the only changes to the DIC have been the Adjustment (COLA) increases. There has been no raise to either flat rate or rank based DIC and it is long overdue. When DIC is compared to payments to surviving spouses of other Federal employees, DIC lags by almost 12%.

Since 1993, surviving spouses of military Veterans are finding themselves falling further and further behind in meeting their financial obligations from month to month. Many surviving spouses of the WWII, Korea, and Vietnam eras are receiving only DIC; some receive DIC and minimum Social Security benefits. These DIC recipients struggle monthly with their budget of \$1,653.07, juggling bills to meet rising costs of housing, utilities, food, clothing and other personal living expenses. This scenario can lead too often to homelessness, a plight we do not wish to befall anyone, and least of all the surviving spouses of our military Veterans.

Only 15% of those receiving DIC also receive SBP. Those that receive SBP include those widows of military spouses who attained full retirement status both pre and post 9/11; AND widows of active duty deaths post 9/11. **85% of surviving spouses do NOT qualify for SBP because their spouse died on active duty prior to 9/11; or because their non-retired spouse died due to service connected (such as Agent Orange and other toxins). For many of these widowed, the DIC is their only source of compensation.**

The following are examples of two of our Gold Star Wives today and the impact on their lives.

A member of GSW, living in OR, is now in her 70's and relies on DIC and Social Security. Her spouse was killed on active duty in the 80's when her children were very young. In order to make ends meet she still has to work part time by house sitting and running errands for neighbors. An increase in DIC, which would amount to just a few hundred dollars a month, would allow her to not have to keep looking for ways to supplement her income to pay her bills. This should not be happening to a surviving spouse in the United States of America.

When her husband flew home after serving in Vietnam, he got off the plane in Alaska, and the first thing he did was kiss the ground. His love for our country never wavered, even when he faced harsh treatment, including being spit upon.

A 68 year old widow of a Vietnam Veteran living in MN has been living on DIC and Social Security since her husband passed from Agent Orange related diseases two years ago. Since her husband was unable to care for even his basic needs and did not want to go to a nursing home, she had to quit work to take care of her husband for many years before he passed. The hospice nurse stated that the Veteran probably survived longer because of the spouse's loving care.

The Social Security is at a reduced rate due to early retirement to care for her husband. She has been unsuccessful in finding part-time work to augment her income. The proposed modest increase in DIC would assist her in obtaining needed dental work. It would also help with

purchasing groceries. She states that with the rising cost of groceries her ability to purchase healthy foods has been adversely affected.

It is incumbent upon Congress to take action to rectify this inequity by increasing the current amount of DIC paid at least to a level comparable to other Federal employees. This would be in keeping with the promise our country made to its Veterans and survivors. Our widows from WWII, Korea, and Vietnam eras are now in their seventies through nineties. These are the survivors who need the increase the most.

It is no secret how our Vietnam Veterans were treated upon their return home after serving their Country. Now we can send a message to them by showing our respect for their service by ensuring that their families left behind are treated with the respect they deserve by providing them with more financial support.

Passage of **The Caring for Survivors Act of 2025** would increase the DIC from 43% to at least 55% of a single 100% disabled Veterans' compensation. Bringing DIC compensation to at least 55% would provide parity with other Federal survivor programs.

Moreover, the passage of this bill would allow the surviving families of Veterans who are rated as 100% disabled to receive benefits at the 5 year mark instead of the 10 year mark of a death *deemed* not caused by the disability.

These families have put their lives on hold while caring for their disabled Veteran. Providing this financial assistance is vital to the stability for these families. After caring for their loved one for many years, having the household income be reduced to less than 50% causes severe financial hardship and may result in the loss of their home.

We need to provide peace of mind to Veterans, especially Vietnam Veterans, and their families that their sacrifices are recognized and those left behind will not be forgotten.

Burial Allowance

We are in favor of an increase in the amount of burial allowance provided for the burial/transportation of our Veterans. The current burial allowance for a service-connected death is a mere \$2000 and the amount for a marker is \$231. We all know that a burial can cost more than \$10,000.

At a time when the family is grieving and facing a drastic reduction in finances, they also must find a way to pay for a proper and respectful burial of their Veteran. The allowance amount should be raised to \$10,000.

Issues for Surviving Families of Veterans Mental Health Deaths

We need to address a major problem that not only has consequences for some survivors, but it also impacts Veterans with mental health. That problem is the death of a Veteran who did not have a 100% VA rating. A service connected-connected Veteran may have a rating from 70% to 90% and a Military Base access privilege ID is still not available to the surviving family.

Only surviving spouses of active duty deaths and survivors of Veterans rated at 100% can get an ID. A rating change can only occur after death if there is an open claim. This is all too common a scenario when dealing with a mental health death of a Veteran. The way to fix this is to either have an automatic 100% rating when it is decided the death is service-connected or a DOD ID policy change that includes " Veteran service-connected surviving spouses."

We know that data is not kept regarding the number of Veterans, or surviving spouses, from service-connected mental health deaths. Mental health deaths can occur from alcohol and other substance abuse, poor decision-making, and suspected suicide (and suicide). We know that the Veterans Administration and our Government has a high priority to prevent active duty and Veteran suicide. We need this critical data which could be used to **prevent** these deaths, get a clearer picture of what is happening, and know how many survivors had a Veteran with a rating under 100%. We also need to know how many survivors are denied claims due to mental health claims.

A young GSW member, living in RI, and mother of two children with disabilities:

In 2019, I lost my husband to a PTSD death. The VA gave him a rating of 90% when he got out and that rating stayed until death. He was in a crisis at the end, and he asked for an increase in rating to 100%; he was denied, and he died less than a year later. At the time of death, his rating should have automatically be increased to 100%. At the least, when I was awarded DIC due to his death, his rating should have been raised to 100%.

When he died, I was unable to focus on grieving and healing because all my attention was on how I was going to survive caring for two children with significant disabilities. I worried about homelessness, keeping my car, and, most importantly, health insurance to keep my children alive. Due to the needs of my children with disabilities, I am unable to work. I immediately applied for DIC. Almost three years later he was rated as service connected.

Suicide Prevention

According to the VA 2022 National Veteran Suicide Prevention Annual Report, Veterans make up an estimated 8.2% of the U.S. population, yet account for nearly 14% of all reported suicide deaths in the U.S. There is an increasing trend in the suicide rate across all military branches, including Active Duty, Reserve, and National Guard; however, the rate has decreased slightly among active-duty service members in recent years.

There is still a great stigma attached to death by suicide. We are strongly in favor of more research into the causes of death by suicide. The Veterans Administration is making strides in the area of mental health and the relation to death by suicide. However, we would like to see more research done on the relationship between TBI (Traumatic Brain Injuries) and death by suicide.

Trine Madsen, Michael Benros, and their colleagues conducted a (non-military) study in 2014 and found that the rates of suicide increased with severity of the injury, but even those who had experienced even one mild TBI/concussion had almost double the rate (38.6 per 100,000 person-years) when compared to those without TBI (19.9 per 100,000 person-years).

Many of our Service Members have experienced multiple concussions in the course of their service. More needs to be done to provide protection from TBI, early detection, and prompt treatment.

Love Lives On Act

Currently Survivors over the age of 57 are allowed to remarry and retain their financial benefits. Many of those under the age of 57 would like to remarry, to have children, to find love again after losing their Service Member. The prospect of losing their benefits looms as a large barrier to them in moving forward with their lives.

Recent passages now allow them to retain their educational benefits and to retain commissary/exchange privileges. However, there is still much to be done for these Survivors to be able to retain all of their financial benefits. To quote Senator Moran: *“A survivor who remarries is still a survivor, regardless of when they remarry. No survivor should have to choose between getting married again or keeping benefits that are actively supporting their family.”*

Toxic Exposures

The PACT Act made great strides in addressing issues of toxic exposures experienced by our Military and their families. However, we still have a long way to go.

Just one instance is the higher incident of cancer among air crews. We are in full support of the “ACES Act” which would provide for a study by the National Academies of Sciences, Engineering, and Medicine on the prevalence and mortality of cancer among individuals who served as active-duty aircrew in the Armed Forces, and for other purposes.

Previous findings have indicated that Active Component aircrew members had higher incidence of melanoma (by 87 percent), thyroid (by 39 percent), and prostate (by 16 percent) cancers compared to demographically similar U.S. population in SEER.

Findings have indicated that Active Component ground crew members had higher rates of cancers of brain and nervous system (by 19 percent), thyroid (by 15 percent), melanoma (by 9 percent), and kidney and renal pelvis (by 9 percent) cancers compared to demographically similar U.S. population in SEER.

We are also strongly in favor of the *Veterans Exposed to Toxic PFAS Act* - the VET PFAS Act.

This bill provides eligibility for Department of Veterans Affairs (VA) hospital care and medical services to veterans and their family members (including those in utero) who have specified conditions and resided at a military installation where individuals were exposed to perfluoroalkyl and polyfluoroalkyl substances, commonly known as PFAS. PFAS are man-made and may have adverse human health effects.

As surviving spouses, as parents of Active Duty Service Members, as Veterans, as citizens grateful to our Military, we support further research in every area of toxic exposures which are brought to light. We want and need our Service Members to know that they are not needlessly exposed to toxins harmful to their health and longevity. We need to know that studies will continue to be done to reduce known exposures, and that treatments will be provided to those exposed and harmed. We need to act swiftly to make resulting health issues presumptive of these exposures.

Conclusion

Gold Star Wives of America, Inc. is appreciative for the work Congress has done to provide vital benefits and support for surviving spouses and children of our military members who gave their lives in service for our country. It is our duty to stand together with you to ensure that President Lincoln's words still ring true that we provide for our brave men and women who answer the call to service, believing that our Nation will take care of their wounds both seen and unseen, and will properly care for their loved ones they leave behind.

We honor their memories by asking for your help to properly care for our Veterans and their surviving families. President John F. Kennedy said: "A nation reveals itself not only by the citizens it produces, but also by the citizens it honors, the citizens it remembers."

Our benefits are not "entitlements", but have been earned through the blood, sweat, and (our) tears of their service and sacrifice. While our spouses paid the ultimate sacrifice, we are the ones left behind to live that sacrifice each and every day.

Contributors

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