



Statement of Jeremy Butler
Chief Executive Officer
of
Iraq and Afghanistan Veterans Of America
before the
Senate & House Veterans Affairs Committee

March 2, 2022

Chairman Tester, Chairman Takano, Ranking Member Moran, Ranking Member Bost, and distinguished members of the Committees, on behalf of Iraq and Afghanistan Veterans of America (IAVA) and our more than 425,000 members, I would like to thank you for the opportunity to testify here today.

This is my fourth year in a row testifying before this joint body as CEO of IAVA and every year I have discussed the need to address the health issues brought on by 20 years of military toxic exposures, including from burn pit usage in Iraq and Afghanistan. Small steps have been made but, like the incremental moves taken to address Agent Orange, we are decades too late in the government owning up to this self-inflicted wound. Veterans are sick and too many have already died. Even though IAVA has been discussing this for more than 4 years, by no means were we the first or loudest to raise this issue. In fact, and quite frustratingly for the many who have been harmed, the danger of burn pit exposure was raised nearly from the beginning.

We know that we have already lost veterans to toxic exposure induced illnesses, we know that many others are sick and we know that more will die. What we don't know is how much longer Congress will delay and make excuses. The only reason that comprehensive toxic exposure legislation has not passed is because of the financial cost. But there was virtually no debate by this body during the 20 years that the country sent millions to war where they were repeatedly exposed to the hazards of burn pits. Burn pits that were banned from use in the United States as far back as the 1970's.

So, on behalf of the 3.5 million veterans who were exposed to burn pits and other airborne hazards. And on behalf of the veterans behind the nearly 70% of burn pit related claims that were denied by the VA, I implore you to pass the comprehensive toxic exposure legislation supported by nearly every veterans group in the country and finally keep America's promise to take care of those who fought to defend us.



2021 was another incredibly impactful year for the veteran community, largely thanks to Members of both the House and Senate Veterans Affairs Committees. Coming off of the momentum of 116th Congress, and the passage of two landmark IAVA-backed bills, the *Commander John Scott Hannon Veterans Mental Health Care Improvement Act*, and the *Deborah Sampson Act*, we continued our work to improve the lives of veterans. In 2021 we built on the momentum of the 116th Congress to pass critical reforms within the military justice system, create a commission to account for the last 20 years of war in Afghanistan, create opportunities for veterans who lost jobs due to the pandemic, ensured that those who sacrificed in support of the Global War on Terror will have a memorial on the National Mall, and finally closed a loophole in the law that made military-connected students the target of predatory schools.

In 2021 IAVA continued to fight tirelessly for servicemembers, veterans, and their families, conducting over 200 Capitol Hill meetings by our staff, speaking directly with leaders of VA, and other agencies impacting our community, and executing robust traditional and social media outreach nationwide to highlight the needs and concerns of post-9/11 veterans and military families. We conducted a soon-to-be-released comprehensive membership survey in order to understand the pressing issues facing the post-9/11 generation of veterans.

We must recognize that the COVID-19 pandemic continues, and the effects of this unprecedented event are long lasting. IAVA is proud to be part of the Veterans Coalition for Vaccination, which is helping to combat COVID-19 to raise awareness, expand access, and ensure that all Americans have equitable access to COVID-19 vaccines. According to our 11th Member Survey, 85% of IAVA members reported being vaccinated. However, we must also continue to address issues caused by this pandemic, such as veteran unemployment and homelessness. Veterans were not immune to the damage that COVID-19 caused to the American economy and the effects of our recovery are still ongoing. While there has been progress, we will remain vigilant that veteran unemployment remains at pre-pandemic levels.

I thank all the Committee members that worked tirelessly to ensure that pressing issues facing our nation's veterans were not forgotten. As we look to 2022 and the remaining time in the 117th Congress we must continue to press forward.



Burn Pits and Toxic Exposures

According to IAVA's latest member survey, over 80% of IAVA members were exposed to burn pits during their deployments and a shocking 90% of those exposed believe they already have or may have symptoms. IAVA and our allies within the VSO community have spent years educating Congress, national leaders, and the public on the enormous scope of these injuries faced by our community.

Year after year, the concern grows surrounding the health impacts of burn pits and other toxic exposures in recent conflicts. Burn pits were a common way to get rid of waste at military sites in Iraq and Afghanistan. The effect of toxic exposure is not just the chemicals in the smoke, but the particulate matter, dust, ashes and other pollutants these men and women breathed in. Approximately 3.5 million veterans were exposed to burn pits and other airborne hazards. Yet VA continues to deny approximately 70% of burn pit-related claims. Much-needed legislation would finally take the burden of proof off the veteran by creating a presumption of service connection for a list of illnesses and diseases, including cancer, as well as allowing veterans to receive health care from VA.

While VA has made many strides forward in the past year, creating presumptives of three illnesses due to toxic exposure, it is simply not enough. Veterans are looking towards Congress for bold action and leadership. The time to pass critical, comprehensive legislation to ensure that veterans have the healthcare, benefits, and a new framework for how presumptive illnesses are handled, is now.

It is for these reasons that IAVA will continue to tirelessly advocate for the *Honoring Our PACT Act* (H.R. 3967). This critical piece of legislation is a culmination of years of work, to finally address veterans that have suffered from their exposures. The *PACT Act* is moving to the House floor for a vote and IAVA has urged all House Members to vote for its passage and we call on the Senate to swiftly pick up this landmark legislation. We understand that there have been a number of bills introduced in both the House and the Senate, yet the *PACT Act* is the legislation that will provide the most comprehensive solution. Veterans that have been exposed and are now sick can not wait any longer for the healthcare and benefits that they have earned through their service. We must ensure that the 117th Congress is when veterans finally receive comprehensive legislation that addresses one of the signature injuries of the post-9/11 wars.



Combat Suicide Among Troops and Veterans

For nearly a decade, IAVA and the veteran community have called for immediate action by our nation's leaders to combat the crisis suicide among our servicemembers and veterans. In the last two years, we made groundbreaking strides towards addressing this epidemic.

Despite our progress through legislation, more can and must be done. According to the most recent VA data, veterans aged 18 to 34 have the highest rate of suicide. And while not always an indicator of suicide, mental health injuries continue to impact the post-9/11 generation. In our latest member survey, a stunning 61% of IAVA members have a service connected mental health injury. Meanwhile, the nation and VA struggle to keep up with the demand for mental health care and mental health care providers such as psychiatrists and psychologists, both of which are in the top 5 for VA staffing shortages. Despite these shortages, IAVA members overwhelmingly seek care for their mental health injuries from VA professionals, with 73% of those receiving care for their injuries choosing to do so at VA. Despite additional funding and scrutiny, VA still faces a shortage of mental health care professionals, specifically in rural areas.

It is for these reasons that IAVA will continue to advocate for the *Post-9/11 Veterans Mental Health Care Improvement Act* (S. 3293), which we were pleased to see included in the *Supporting The Resiliency of Our Nation's Great (STRONG) Veterans Act* (H.R. 6411), which has recently passed out of the House Committee. This legislation will address a number of key issues regarding mental health and suicide prevention by increasing access to care, strengthen VA's workforce, and continuing to increase mental health research. We look forward to working with your Committees for a timely passage of this crucial legislation.

2020 was a significant year in mental health and suicide prevention. The *Commander John Scott Hannon Veterans Mental Health Care Improvement Act* resulted in critical reforms in how America combats the suicide crisis. Key provisions included the creation of a community grant program to help identify isolated veterans and provide mental health services, modeled after the extremely successful Supportive Services for Veteran Families (SSVF) program. These targeted programs are designed to identify the veterans who die by suicide that are not currently participating in VA services and connect them to lifesaving resources. Additionally, this legislation expanded VA's tele-health services at a time when veterans may be feeling more disconnected than ever before. These are critical improvements to VA care. But the work is not done. Now that the *Commander Hannon Act* has been successfully passed into law, it is our responsibility to ensure its successful implementation. Oversight of the execution of this new law is a top priority for IAVA, especially considering its 34 separate provisions. Staffing



improvement plans for mental health professionals, increased tracking metrics, and funding for numerous studies are just a few of the disparate sections of this comprehensive legislation.

We will also continue to spread public awareness for the suicide crisis as thought leaders forums with policymakers, and through the media. Sobering statistics on suicide continue to be released, identifying women veterans at especially high risk of suicide. IAVA's groundbreaking Quick Reaction Force (QRF) is a safety net for veterans and families and provides comprehensive care management, resource connections and 24/7 peer-to-peer support for any veteran or family member in need. QRF's services are free and confidential and are available regardless of era, discharge status or location, making the barrier of entry very low. The needs of veterans remain high, particularly in light of the pandemic and in 2020, QRF saw a 400% increase in clients served from 2019, and we continued to see steady increases in 2021. QRF is built to address all aspects of a veteran's life that are in need of intervention and support and we do this by providing holistic and comprehensive care for all of our clients. In 2021 more than 15% of all client requests were directly related to mental health needs, and 59% were related to emergency financial assistance or the threat of homelessness, or both, which directly impacts an individual's overall well-being and stability. IAVA continues to have a strong working relationship with the Veterans Crisis Line (VCL) and also has 24/7 in-house clinical support for clients that reach out to the program and are at risk for suicide.

Women Veterans

Women veterans and servicemembers are currently the fastest-growing populations in the military and veteran communities. Despite these numbers consistently growing since the 1970s, veteran services and benefits for women often fall behind. Over the past few years, there has been a groundswell of support for women veterans' issues. From health care access to reproductive health services to a seismic culture change within the veteran community, women veterans have rightly been focused on and elevated on Capitol Hill, inside VA, and nationally. While this growing interest has been encouraging, VA continues to have a motto that explicitly leaves women veterans out. It is past time that we recognize the service of all veterans from the moment they walk through the doors of a VA. This change must start at the top. At the end of the 116th Congress, we were encouraged when the House unanimously passed legislation to approve the motto change; however, the Senate was not able to take it up before the Congress ended. IAVA will continue to call for changing the current VA motto to be gender-neutral and we encourage your committees to pass the *Honoring All Veterans Act* (H.R. 2806/S. 1313) soon.

At the end of 2020, we celebrated as the *Deborah Sampson Act*, the cornerstone of IAVA's #SheWhoBorneTheBattle campaign for four years, officially passed Congress. It was a historic



year for women veterans and will ensure that VA is a place for all veterans. We thank all those that were relentless in their efforts to push this instrumental piece of legislation over the finish line. The *Deborah Sampson Act* includes provisions that will address sexual harassment and assault in VA facilities, establish an Office of Women's Health directly under the Undersecretary of VA for Health, and improve access to care and benefits for survivors of Military Sexual Trauma (MST). We should most certainly celebrate this historic win but recognize that our work is far from over. We will continue to work with Congress and VA to ensure that this monumental legislation is properly implemented.

For years, VA has faced scrutiny for sexual harassment and assault within their medical centers, and the lack of action by top leadership. While not solely a women veterans issue, it is known that these issues disproportionately affect women and the lack of action by VA furthers the problem of women veterans feeling unwelcome at their facilities. Of the 3.5% of IAVA Members that reported having experienced sexual harassment while seeking care at a VA facility, 77% of them are women, and women veterans are less likely to feel safe while at a VA facility. We know that this issue of sexual assault and harassment stems from a larger issue within the military community. While this is a hearing to address issues within the veteran community, I am underscoring the need to address the problem of sexual assault and harassment within our military as some of you also sit on the Armed Services Committee.

In IAVA's 11th Member Survey, 58% of our female members stated that they are survivors of military sexual trauma. Of those, only 34% reported the crime, and 63% reported experiencing some sort of retaliation as a result of their report. Those who did not report listed their reasons for not reporting as fear of retaliation by their peers or commander, concern about the impact on their career, and doubt that their commander would believe them or nothing would be done. We also found that women reported being retaliated against 67% of the time, as opposed to 47% of men that reported. Our survey data, and the recent stories that have made this issue impossible to ignore. This is why IAVA fought for years to ensure a trained military prosecutor will have the authority to decide to move forward with a sexual assault case, instead of a commander. We thank Congress for the inclusion of some critical components of the *Military Justice Increasing Prevention & Improvement Act (MJIPPA)* (S. 1520) within this year's NDAA. We will continue to work alongside our Congressional allies for the full implementation of MJIPPA and urge Congress to take up the legislation for a full floor vote.

The VA reports that about 1 in 4 women veterans and 1 in 100 male veterans report experiencing MST while serving in the military. For years, the claims process has received a fair amount of criticism due to the gruesome process a veteran must go through to prove their experienced MST. This past August, the VA OIG released a glaring report detailing that VA potentially denied



thousands of veterans benefits related to their MST claims due to errors during claims processing. The report also found that VA failed to implement recommendations made by OIG back in 2018 that had resulted in similar issues. The lack of implementation resulted in an increase from 49% of claims being improperly processed to 57%. Additionally, VA's claims process for MST is already a difficult road for a survivor. It is imperative that VA does not further traumatize and instead make veterans feel safe and secure as they embark on the difficult process of filing their claim.

IAVA strongly supports the *Servicemembers and Veterans Empowerment and Support Act* (H.R. 5666/S. 3025) that will greatly improve the MST claims process and adjust the standard of proof a veteran has to provide, lessening the potential for re-traumatizing any veteran. It also would require VA to review the claims process yearly to ensure accuracy. Finally, the legislation would require VA to study the training and accuracy of VBA's disability claims process for MST.

Defend and Expand Veterans Education and Economic Opportunities

The effects of the COVID-19 pandemic on the American economy will be long lasting. Veterans, and especially the post-9/11 generation of veterans, have been hit extremely hard by unemployment. Younger veterans have consistently had higher rates of unemployment than their older veteran peers, and their civilian counterparts. It is clear that we need bold, aggressive legislation to confront these challenges. This is why IAVA worked hard to pass the *Veterans Economic Recovery Act* as part of the *American Rescue Plan*. This critically important legislation provides up to 12 months of retraining assistance for veterans who are unemployed due to the pandemic.

To further address employment and to fight the pandemic, IAVA worked with Rep. Conor Lamb and Sen. Gary Peters to develop the *Supporting Education Recognition for Veterans during Emergencies (SERVE) Act* (H.R. 2587) to ensure veterans' service-connected medical qualifications and expertise are utilized by the VA and civilian healthcare facilities to meet the challenges of the Coronavirus.

Veterans who gained critical medical skills in the military are an under-tapped source, and we need to get them into the fight and help alleviate medical staffing shortfalls across the country. The *SERVE Act* is an easy, impactful solution that Congress should immediately enact to address the continuing crisis.

The Post-9/11 GI Bill has now sent more than one million veterans and dependents to school, and remains one of the military's best retention and recruiting tools. In IAVA's latest member



survey, 73% of IAVA members reported that they would have been unable to go to school without the GI Bill. 79% agree that the Post-9/11 GI Bill is essential to military recruitment and 84% believe it is extremely or very important to transition to civilian life. This is why IAVA is proud of the work done to finally close a loophole in the law that allowed underperforming actors to take advantage of military-connected students burdening them with unnecessary debt and a subpar education. Additionally, IAVA is currently working with the Department of Education directly to ensure that this loophole is closed for all military-connected students. We thank all the Members of both Committees that worked hard to ensure the 90/10 loophole was closed once and for all and ask that you continue to remain vigilant, as will IAVA and the VSO community, to ensure that military-connected students are protected from predatory actors within higher education.

While we must always protect students that have been taken advantage of by predatory schools, we can also look forward and ensure that these schools are not able to access veterans benefits without providing a quality education. We must strengthen protections surrounding how VA approves schools to receive taxpayer dollars. Veterans rely on VA to approve schools for GI Bill with an understanding that they are only approving quality schools. The current regulations are outdated and have a low standard of entry. IAVA looks forward to working with the Committees and our VSO allies to ensure that standards of quality are increased to ensure that schools approved for the GI Bill are giving military-connected students a quality education and are being good stewards of taxpayer dollars.

In 2020 and beyond, many military-connected students had to quickly adjust to 100% online classes, and the uncertainty of what that would mean for their housing allowance. IAVA was quick to work with our VSO and Congressional partners to ensure that military-connected students would continue receiving their full housing allowance if their school shifted online. While these protections were crucial for students that were forced into an online-only environment, there remains concerns with making this a permanent change going forward. Stronger protections for military-connected students attending online-only classes may be needed to help safeguard these students from predatory institutions, while ensuring students that are online due to the pandemic are protected.



Afghanistan Withdrawal and War Commission

IAVA's 11th Member Survey opened on September 8, just over a week following the official withdrawal of U.S. troops from Afghanistan. In our 2020 survey, 62% of our members stated that our engagement in Afghanistan was worth it or somewhat worth it and the data for our current survey shows now only 52% of our members feel that way, a 10% decrease. The recent data also showed that, although 59% agreed with the need to withdraw troops, only 21% of respondents approve of the way President Biden withdrew from Afghanistan and 85% of IAVA respondents agreed that more should have been done to support the evacuation of Afghan allies during the withdrawal.

War affects every veteran differently and the circumstances that took place late last year will no doubt have caused a lasting effect. IAVA's Quick Reaction Force saw an 80% increase in mental health inquiries from August 16-31, 2021 when compared to those dates in 2020. This speaks to the high level of connection our generation of veterans have with regards to Afghanistan.

IAVA fought hard alongside our allies in order to ensure the *Afghanistan War Commission Act* was included within the FY22 NDAA. This commission will be responsible for a thorough investigation of every aspect of US involvement in Afghanistan and must include examining top level strategic decisions, combat operations, efforts to train Afghan forces, intelligence work, diplomatic efforts, congressional oversight, corruption in the US-backed Kabul government, the development and execution of the Special Immigration Visa (SIV) program, the failure to evacuate our Afghan wartime allies prior to the withdrawal of US troops; the entirety of Operation Allies Refuge; and the collapse of the Afghan government and security forces after 20 years of American aid and investment.

Additionally, tens of thousands of US-affiliated and at-risk Afghans have been or will soon be welcomed into the United States via humanitarian parole. Unlike immigrant visa or refugee programs, humanitarian parole is not a pathway to permanent status; it is a temporary allowance to enter and remain in the United States.

The *Afghan Adjustment Act*, patterned after similar legislation such as the Cuban Adjustment Act following the Cuban Revolution, offers an important correction by allowing these Afghan refugees to apply for lawful permanent resident status, the same legal status they would have received had they been admitted as refugees. Rather than punishing Afghan arrivals for being evacuated, Congress has an urgent obligation to ensure they have a chance to become lawful permanent residents. We urge all Members of this Committee to support this legislation.



Veterans suffered a profound moral injury when our country failed to keep its promise to evacuate all of the Afghan wartime allies who stood shoulder to shoulder with us throughout the war. Currently, an estimated 80,000+ Afghan wartime allies - interpreters and their immediate family - remain left behind. Veterans bear the brunt of this failure - we continue to field the daily pleas for rescue from the Afghans whose lives are at risk under Taliban rule because of their support for the US and our NATO allies. Should we fail to pass the *Afghan Adjustment Act* and adequately provide for the Afghans we were able to evacuate, the moral injury suffered by many veterans will be exacerbated. We already suffer from an epidemic of veteran suicides in this country - we fear what additional moral injuries will do to our veteran community as it still comes to terms with the fiasco of last August. We urge Congress to pass the *Afghan Adjustment Act* and streamline the resettlement of the thousands of our Afghans who placed themselves in danger to stand with us when we needed them most.

Support for Veterans Who Want to Utilize Medical Cannabis

Support for the use of medical cannabis to treat the wounds of war has been growing among the veteran population for years, and IAVA members have repeatedly voiced their support. Veterans consistently and passionately have communicated that cannabis offers effective help in tackling some of the most pressing injuries we face when returning from war. In our latest Member Survey, over 80% of IAVA members supported legalization for medicinal use. Across party lines, medicinal cannabis has been rapidly increasing in support, yet our national policies are outdated, research is lacking, and stigma persists.

Over the past few years, IAVA members have set out to change the national conversation around cannabis and underscore the need for bipartisan, evidence-based, common-sense solutions that can bring relief to millions, save taxpayers billions and create thousands of jobs for veterans nationwide.

In 2022, IAVA will continue our fight on behalf of veterans who want to use medicinal cannabis and we remain committed to the goal of VA conducting research into the efficacy of medical cannabis as a treatment for veterans with chronic pain, PTSD, and other conditions. However, as a Schedule I drug under the FDA, research into the effects and efficacy of cannabis has been stagnant, cumbersome, and convoluted. While not impossible, federal research into cannabis faces many bureaucratic hurdles that hinder good research. A January 2017 National Academy of Sciences study found “conclusive or substantial” evidence that cannabis is effective in treating chronic pain, moderate evidence that cannabis helps with sleep, and the science is inconclusive on cannabis as an anxiety and PTSD treatment option. However, federal bureaucratic hurdles continue to halt the system and stymie good research. We will never get a definitive answer on



the efficacy of cannabis as a treatment option while federal regulations that actively undermine solid research studies remain in place. The system is antiquated and must be adjusted to match state laws and research needs. For these reasons, in the 117th Congress IAVA will continue our work to remove these barriers to research and usage to those veterans where it is already legal by advocating to remove cannabis as a Schedule I drug.

Extremism Within the Veteran Community

Last Fall, IAVA was asked to join the first of what we hope will be more hearings on the important topic of extremism within the military and veteran community. Due to many of the conversations that followed the tragic events of January 6, this year for the first time ever we surveyed our membership on extremism within the military and veteran communities. Survey data shows about 3 in 10 participants reported personally witnessing extremism in the military ranks and among post-9/11 veterans, but while that number presents a problem, a third say it is not a problem, and a third say they do not have enough information to determine. This speaks to the need not only for DoD to continue educating servicemembers about the dangers of extremism, but also for the need for all of leadership, including within Congress, to take this issue seriously.

IAVA applauded the efforts of Defense Secretary Austin conducting a ‘stand-down’ to address extremism in the ranks. However, we were also concerned with reports that some units and commanders treated this training as just another check in the box. This training, much like suicide prevention training, must be robust and have the full support of all levels of leadership in order to ensure it is effectively educating servicemembers on the dangers of extremism within the military and veteran communities. This training must extend through the Transition Assistance Program, as servicemembers transition to the civilian world. Leadership must be held accountable to ensure that their servicemembers are receiving the best possible training to combat attempts from any extremist group to take advantage of servicemembers.

We also surveyed our membership on trust in different news sources. When asked if they trust political news from elected officials and political figures, 36% of IAVA membership reported “not at all,” with less than 7% reporting “a great deal” or “a lot.” Any work by VSOs, DoD, and VA could easily be outdone if elected officials use their positions to spread misinformation.

One of the most stressful times for a veteran is their transition out of the military. Almost 80% of IAVA members cited having at least “some challenges” during their transition. Many veterans fill this void and disconnect by continued service to their communities in positive ways.

Approximately half of IAVA members report volunteering, mostly in service to other veterans



and servicemembers, youth, and the elderly. Half of our members that do report volunteering, do so at least five hours per week. It is clear that many veterans seek a larger connection with their communities after the transition out of the military.

One veteran participating in an extremist organization is one too many. However, veterans are a microcosm of society. Like many other problems within American society, those problems will also exist within the veteran community. If there is an extremism problem within society, it will exist within the veteran community. And like many other problems it cannot be solved by the veteran community alone. This will require efforts across Congress, federal agencies, law enforcement, and the VSO community. We look forward to working with leaders across all spectrums of government to address this issue.

Members of both Committees, thank you again for the opportunity to share IAVA's views on the pressing issues of 2022. I look forward to answering any questions you may have and working with the Committees in the future.



Biography of Jeremy Butler

Jeremy Butler serves as IAVA's Chief Executive Officer. Jeremy joined IAVA with 15+ years of experience providing substantive and strategic counsel to leaders in high-profile government and private sector offices, including the Departments of Defense and Homeland Security. He is a graduate of Knox College and the U.S. Naval War College. Butler has recently contributed to NPR, Fox News, CNN, C-SPAN, Sirius XM, and other veteran and military media outlets. He is also a Surface Warfare Officer in the Navy Reserves with 20 years of uniformed service.