



Statement of Ryan Britch
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of
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before the
House Veterans Affairs Committee

July 23rd, 2020

Chairman Takano, Ranking Member Roe, and Members of the Committee, on behalf of Iraq and Afghanistan Veterans of America (IAVA) and our more than 425,000 members worldwide, we thank you for the opportunity to share our views, data, and experiences on the pending legislation before the Committee today.

IAVA appreciates the Committee for bringing forward important legislation that touches on a number of our Big Six priorities for 2020, which are: the Campaign to Combat Suicide, Defend Veterans Education Benefits, Support and Recognition of Women Veterans, Advocate for Government Reform, Support for Injuries from Burn Pits and Toxic Exposures, and Support for Veterans who Want to Utilize Medicinal Cannabis.

Women Veterans

Women veterans are the fastest growing population in both the military and veteran communities and make up over 13 percent of IAVA's membership. Nearly 350,000 women have deployed in the Global War on Terror since 2001, and they continue to serve in critical roles around the world today. Yet, while women have played a critical role in the military throughout history, their contributions continue to be overlooked. IAVA often hears the far too common story of a female veteran checking into a VA facility and being asked whose dependent she is.

In 2017, IAVA launched our groundbreaking campaign, #SheWhoBorneTheBattle, and its centerpiece, the *Deborah Sampson Act* (H.R. 3224), focused on recognizing the service of women veterans and closing gaps in care provided to them by VA. The *Deborah Sampson Act* successfully passed the house in 2019 and we thank the Committee for their dedication to this important legislation. We made the bold choice to lead on an issue that was important to our entire membership: the future of healthcare and America's national security. While women have served on the front lines, the Department of Defense (DoD) only recently officially opened combat posts to women - a move that IAVA strongly supported. More women will lead our military in the years to come and it is past time that the military culture embrace that and that the services promised to all veterans embody that.

The Department of Veterans Affairs (VA) has made great progress over the last decade improving services for women, but they are still struggling to provide comprehensive, quality care to women or even ensure their safety. Our female members are more likely than their male



counterparts to report not feeling respected in VA facilities or report feeling unsafe. So while support for women veterans issues is growing there is still much more to do to ensure that women veterans are treated equally and welcomed at VA.

A big step in this direction can be made with the VA's motto, "To care for him who shall have borne the battle and for his widow, and his orphan." That is the first thing a woman veteran sees when she walks into a VA facility... for HIM who shall have borne the battle. That is not the message we want to send the women who have served this nation. IAVA supports the *Honoring All Veterans Act* (H.R. 3010), which would update the VA motto to include all who have served. It is necessary to update the motto to reflect the increasing number of women veterans utilizing the VA and the inclusive nature of services available to all. Sixty-eight percent of IAVA members support changing the motto or are neutral on the issue.

Since 2001, the number of women using VA services has tripled but access to contraceptives and reproductive care is lacking and outdated. It is for this reason that IAVA supports the *Access to Contraception Expansion for Veterans Act* (H.R. 4281). This legislation would reduce unintended pregnancies, cut healthcare costs, and provide women veterans with equal care of their civilian and active military counterparts.

Additionally, it is time for VA to expand maternity and newborn care to be comparable with care received in other clinical settings. IAVA supports the *Protecting Moms Who Served Act* (H.R. 6141), which would appropriate funds to VA in order to improve maternity care coordination for women veterans throughout pregnancy and the one-year postpartum period. Additionally, the legislation would require GAO to report on maternal mortality among women veterans with a focus on racial and ethnic disparities.

Veteran Employment

Our nation is entering the six month of the COVID-19 pandemic, and it appears that many public health strategies to curb the spread of the disease are starting to ease up. Many states have begun to reopen their economies or have plans to do so in the near future. However, the economic damage may be already done and our country will likely feel the economic impact for the foreseeable future. During April 2020, our country experienced the highest spike in unemployment that we have had for nearly a century. According to the Bureau of Labor Statistics, the post-9/11 veteran unemployment rate jumped from 4.1 percent to 13 percent, its highest levels since 2011. In our most recent Annual Member Survey, 35 percent of IAVA members reported that it is difficult to cover their expenses in a typical month, which only compounds this issue.

IAVA supports the *Veterans Economic Recovery Act* (H.R. 7111) which would create a rapid retraining program for unemployed veterans and reservists and provide them with up to 12 months of educational benefits and a housing stipend. Veterans hit hard by this economic crisis would be able to use this program to pursue training in high-demand occupations. This is a program many unemployed veterans desperately need and IAVA strongly supports this bill.



Mental Health

In our most recent annual survey, IAVA asked our members what they believe contributes to the military and veteran community not getting the mental healthcare they need. The number one response was that the stigma of seeking help is too great. Outdoor and adventure based therapy programs are a potential way around the stigma of traditional mental health care. Many veterans report frustration with pharmacotherapy and symptomatic treatment. High percentages of veterans underutilize traditional mental health care and many drop out of care after just one appointment.

IAVA has long supported complementary and alternative therapies for mental health injuries and have advocated to increase investment in adaptive sports to support disabled veterans. IAVA supports the *Accelerating Veterans Recovery Outdoors Act* (H.R. 2435). Numerous studies conducted on the therapeutic impact of outdoor and wilderness therapy have shown the therapeutic value and personal growth that one can receive from the outdoors.

VA Reform

IAVA advocated to adjust the Feres Doctrine under DoD so that medical malpractice cases due to reasons outside of direct military involvement are eligible for federal tort claims and family settlements. IAVA believes that veterans should have similar protections and for that reason we support the *Brian Tally VA Employment Transparency Act* (H.R. 4526) which would help to increase transparency and efficiency at the VA. Sadly, medical malpractice occasionally happens, and when it does there must be accountability and protections in place to protect the veterans harmed by a medical provider's mistakes.

Since IAVA's inception, we have consistently advocated for diversity and equality for all troops and veterans. It is our foundational belief that diversity is a force multiplier for our armed forces and our nation. We were the first mainstream veteran service organization (VSO) to support repealing "Don't Ask, Don't Tell". Similarly, IAVA led the veteran community in endorsing the repeal of the Defense of Marriage Act. IAVA supports legislation to expand the scope of the VA Advisory Committee on Minority Veterans (H.R. 3582). IAVA believes that this Advisory Committee would benefit by the inclusion of LGBTQ veterans.

In 2019, IAVA advocated to create a pilot program that would expand dental care to veterans that have certain chronic conditions. Timely dental care has been proven to increase overall health and reduce health care costs. IAVA supports the bill to require the VA Secretary to furnish dental care in the same manner as any other medical service (H.R. 96). IAVA believes that proper health care includes dental care.

IAVA has advocated for the expansion of telemental health care coverage across VA. VA has made impressive progress but there is still room for improvement. Despite VA's recent hiring



initiative there is still a shortage of medical professionals. IAVA supports the *VA Mission Telehealth Clarification Act* (H.R. 3228), which clarifies who is allowed to administer telehealth to veterans. Currently, “trainees” who have already graduated medical school are barred from using telehealth with patients. This will improve telehealth training and increase access to care by increasing the number of potential providers that can treat veterans.

While American troops began serving in combat during the Vietnam War in 1955, VA’s official date for recognition of service is 1961. There are over 3,000 Vietnam veterans who served during this timeframe and are unable to access wartime pension benefits or access mental healthcare at Vet Centers. IAVA supports the *Forgotten Vietnam Veterans Act* (H.R. 6082) which would revise VA’s definition of “Vietnam Era” to 1955 through 1975, inline with DoD definition.

Veterans continue to wait for long periods of time to receive decisions on their claims for disability compensation. Twenty-three percent of IAVA members live in rural areas and have to drive long distances for healthcare appointments. The COVID-19 pandemic has made things even more difficult. In 2015, IAVA supported legislation which expanded examination authority for contract physicians that examine veterans' claims for disability compensation. IAVA supports legislation to allow certain specialty health care providers to conduct disability exams across state lines via telehealth (H.R. 7287). Extending examination authority and extending contracts with licensed physicians will help veterans receive more timely medical examinations and would allow veterans to receive the exams they need to quickly apply for disability benefits and ensure that VA has the necessary tools to maximize veterans’ access to direct medical care through VA by freeing VA medical providers from the added responsibility.

In 2016, the Veterans Benefits Administration changed its policy and stopped allowing veterans unrepresented by a VSO from using Disability Benefits Questionnaires (DBQs), which allowed for the collection of evidence in claims for disability compensation benefits. IAVA supports the *Veterans Benefits Fairness and Transparency Act* (H.R. 6493) which would require VA to make DBQs available on its website and eliminate the inequality between represented and unrepresented veterans.

The Freedom of Information Act (FOIA) allows Americans to request access to government documents and information. In many cases, veterans or VSOs make requests to VA in order to gain access to information that would assist in an application for benefits or to appeal a decision. According to a 2019 VA report, there were 2,631 FOIA requests waiting for response longer than 60 days. Shockingly, the oldest unfulfilled FOIA request dates back to 2011. IAVA supports the *VA FOIA Reform Act* (H.R. 7163) which will help to reduce the backlog of FOIA requests for information made to VA. Improving transparency and reducing the number of FOIA requests at VA would create a more informed citizenry, which is essential to the success and longevity of our nation.

Mare Island Naval Cemetery was transferred to the City of Vallejo, Calif. during a Base Realignment and closure process in 1996. Due to the economic decline the city has not taken proper care of the cemetery in which three Medal of Honor Recipients are buried. It is time we



rectify this national disgrace and place this cemetery under the steadfast care of the National Cemetery Administration (NCA). IAVA supports the bill to require the VA to enter into an agreement with Vallejo for the transfer of Mare Island Naval Cemetery to the NCA (H.R. 6039).

American Indian and Alaskan native veterans have played significant roles in our nation's military since our existence and have served in the post-9/11 conflicts at a higher rate than all other races. Due to the *Indian Health Care Improvement Act*, Native Americans do not pay co-pays for services provided through an Indian Health Service or other tribal facility. IAVA supports the *Native American PACT Act* (H.R. 4908) which would give the same benefits to Native Americans at VA facilities.

Furthermore, Native veterans experience some of the lowest health outcomes and largest barriers to care in our nation. IAVA supports the *Department of Veterans Affairs Tribal Advisory Committee Act* (H.R. 2791). Forming an advisory committee would improve outreach and the healthcare and benefits that Native Veterans receive.

Reserve and National Guard

The National Guard has played a significant role in the Iraq and Afghanistan wars. According to the Congressional Research Service, 741 National Guardsmen have been killed in the post-9/11 conflicts. In 2018, the suicide rate for the National Guard was the highest of all military components, a sign of the heavy burden they bear. More recently, there has been a heavy reliance on the National Guard for natural disasters, civil unrest, and pandemic response. The COVID-19 crisis has shown our nation how important the National Guard is to the health and safety of our citizens. These citizen soldiers have maintained the same readiness of their active duty counterparts and served this nation honorably.

In this spirit, IAVA supports the *Burial Equity for Guards and Reserves Act* discussion draft to prevent VA from withholding grant money from any state veterans cemetery solely because they may choose to inter a veteran who does not meet NCA's definition. VA's definition does not include members of the Guard and Reserve who were honorably discharged or members of the Reserve Officers Training Corps (ROTC) who die under honorable conditions while a member of ROTC.

IAVA also supports the draft legislation to expand eligibility for VA home loans to certain members of the reserve components of the Armed Forces. The VA home loan has catapulted American families into the middle class since the end of the Second World War. Accessing the VA home loan would provide Guardsmen and Reservists the ability to foster self-reliance, stability, and generational change.

While our Guard and Reserve activate on state or federal orders around the nation it is imperative that we protect their rights to civilian employment. IAVA supports the *draft legislation* to extend certain employment and reemployment rights to members of the National Guard who perform State active duty.



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Additionally, IAVA supports the draft legislation to clarify the scope of procedural rights of servicemembers with respect to their employment and reemployment rights. Servicemembers should not be forced to waive their rights to use the court system and should be protected from forced arbitration.

IAVA thanks the Committee for their dedication to our nation's veterans and for the opportunity to share our views on these important issues today. We look forward to answering any questions and working with the Committee in the future.



Ryan Britch Biography:

Ryan Britch serves as IAVA's Associate of Government Affairs and specializes in veterans' housing and health policy issues. Ryan spent eight years as an infantryman in the Vermont Army National Guard and deployed to Paktia, Afghanistan from 2009-2010. After leaving the military, he joined the Peace Corps and spent over two years in the Kingdom of Swaziland working on agricultural, youth, and HIV-AIDS prevention programs. Ryan is a graduate of the University of Vermont with a B.A. in Sociology and is currently a Master of Public Administration candidate at American University.