



The California Zephyr

Official Publication of the VVA California State Council
An Organization Chartered By The U.S. Congress



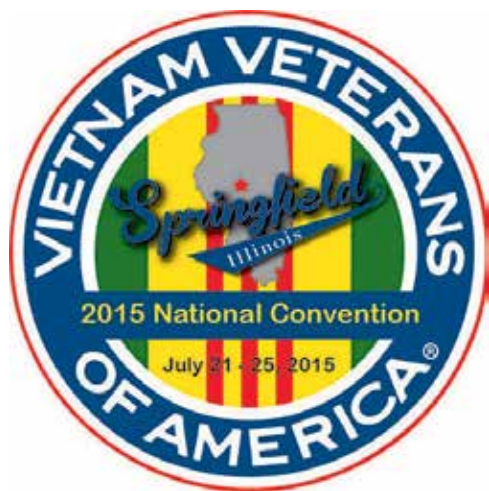
A QUARTERLY NEWSLETTER

VOLUME 17-8

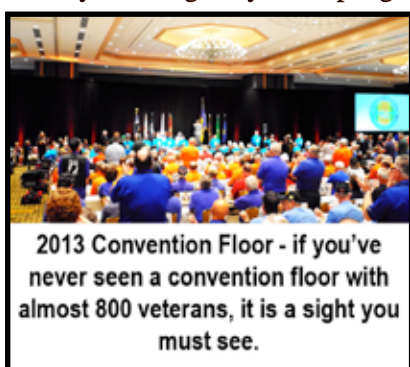
SPRING 2015

National Convention - Springfield, Illinois - July 21-25

PRESIDENT'S MESSAGE

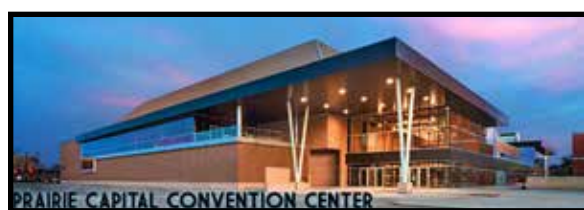


Okay it is that time of year again. Vietnam Veterans of America will be holding our 17th National Convention from July 21 through July 25 in Springfield



Illinois. The last time we went to Springfield for a convention the town bent over backwards for us. They loved having us there. I am looking forward to going back.

The delegate count for chapters and the CSC came out at the end of February. Soon you should be getting your conformation letter from National letting you know how many delegates your chapter is allowed to send to the convention.



The California chapters along with the CSC have a total of 96 delegates eligible to attend the National Convention. I would love to see California send all 96 delegates to the upcoming convention. What a statement that would make for us to have all

96 of us sitting there in one large group, representing California.

There is more to the convention that just voting for your favorite candidate. There will be amendments to the constitution to look at, discuss and then vote on. This is extremely important as we have to abide by the constitution so we need to have a voice in any changes that might take place. Also there will be resolutions to be discussed and voted on.

Chapter Presidents, let's try your best to send all your eligible delegates. You still have time to do some fundraising to help pay for your delegates to attend the convention. Let's get busy and make this one of the best attended convention in the history of VVA.

Steve Mackey, President
VVA CA State Council



VVA JOINS LAWSUIT

VIETNAM VETERANS OF AMERICA JOINS IN LAWSUIT AGAINST VA SECRETARY FOR NEW CLAIMS POLICY THAT VIOLATES RIGHTS OF DISABLED VETS

(Washington, D.C.)-- "Vietnam Veterans of America has joined four other veterans service organizations as a co-plaintiff to The American Legion et. al. v. McDonald in an effort to stop the implementation of a new rule eliminating most informal VA claims and limiting the types of claims the VA will adjudicate," announced John Rowan, VVA National President. "Informal claims account for approximately half of all claims the VA receives," said Rowan. "The new rule, which went into effect March 25, eradicates the decades-old right of a veteran to write a letter to the VA, seeking a specific VA benefit and having the VA consider that letter as an informal claim. The new rule also prevents the VA from considering claims that are supported by the evidence in the VA record but have not been specifically claimed by the veteran."

The new rule changes, which require claims to be submitted on the VA's standardized forms, will impose barriers for all those without access to those forms, as well as those without the medical and legal knowledge needed to fill them out correctly. "While the

VA has promoted this rule change as being more efficient and therefore favorable to the veteran, in fact, this rule change over-formalizes the veterans claims process, making it more adversarial than ever before. We will not stand by silently as our government places further obstacles in front of our injured and disabled veterans and their families, undermining our nation's pledge to care for those who have borne the battle and their families," said Rowan.

Prior to March 25, under the informal VA claims system, any benefits awarded would be paid back to the date that the VA had received a notice from the veteran, signaling his or her intent to file. Under the new rule changes, however, the clock for an effective date for benefits starts only when a veteran files the standardized VA paperwork. The suit, which seeks to have the Department of Veterans Affairs' new rule declared unlawful by the courts, was filed in the U.S. Court of Appeals on March 20 and was entered into the court's docket on March 26. The other co-plaintiffs in the lawsuit are the American Legion, AMVETS, The Military Order of the Purple Heart, and the National Veterans Legal Services Program.

Editor's Note - This is the reason for the above:

VA MAKES GAINS IN FASTER DISABILITY CLAIMS PROCESSING

BACKLOG REDUCED 67 PERCENT UNDER NEW AUTOMATION AND PROCESS IMPROVEMENTS

Washington – The federal initiative to provide timely decisions on disability payments to Veterans has crossed a major milestone in its final sprint to eliminate the backlog of Veterans' benefits claims.

The major transformation effort to apply new technology and process solutions has paid off at the Department of Veterans Affairs (VA). It reduced its inventory of backlogged claims from a high of 611,000 claims in March of 2013 to fewer than 200,000 this week, while at the same time improving decision quality.

"Make no mistake, we're not slowing down short of the finish line," said Under Secretary for Benefits Allison Hickey. "Our goal is to eliminate the claims backlog by the end of 2015 – meaning all Veterans will receive timely and accurate decisions on their disability claims."

Hickey credited a combination of factors for the 67-percent drop in backlog: first, the extra hours of work put in by dedicated benefits claims processors across the nation, who have worked evenings, Saturdays and Sundays to drive the backlog down; as well as procedural efficiencies backed by powerful automation tools and paperless claims processing. In addition, she cited the transformation of Veterans Benefits Administration's training and quality assurance programs resulting in steady increases in the accuracy of decisions.

Just a few years ago, claims processors handled 5,000 tons of paper annually, an amount equivalent to 200 Empire State Buildings. In less than two years, VA converted claims processing to a 21st Century digital environment where claims for VA benefits and services can be submitted and processed, and benefits delivered, online.

Veterans increasingly are filing claims electronically from the start at <https://www.ebenefits.va.gov>. Veterans can submit their applications online, upload their supporting documentation, and check the status of their claim through a multi-channel Web portal boasting nearly 60 self-service features.

WEST LA VA LAWSUIT - PARTIAL VICTORY

Steve Mackey, VVA CSC President

WEST LA VA LAWSUIT AGREEMENT

All, last week I received a call from the lead attorney from the ACLU reference VVA's lawsuit against the West LA VA. The attorney told me they had been in private discussions with the new Secretary of Veterans Affairs, Robert McDonald, trying to settle the suit out of court. The attorney told me they had reached an agreement with Mr. McDonald and the VA. He then summarized what had been reached and asked if I, representing VVA, agreed to what had been proposed. I told him that I thought we had a good deal.

On Wednesday Jan. 28, 2015 I, along with National President John Rowan, VVA at-large Director Jerry Yamamoto and AVVA Region 9 director Elayne Mackey, attended a press conference that took place at the West LA VA. The press conference was held to announce the agreement between the two sides that would settle our lawsuit with the VA.

Secretary of Veterans Affairs Robert McDonald opened the press conference standing next to Ron Olson, one of the ACLU lawyers, and next to Bobby Schriver. The secretary explained what was contained in the agreement.

What I found unfortunate was that the lawyers on our side failed to get a copy of the agreement to us prior to the news conference. They were very apologetic about not having a copy there for us. I did receive a copy of the agreement later that night. Everything Secretary McDonald talked about during the news conference was in the agreement.

Once the agreement is signed they will deliver it to the court no later than 1-30-2015 and have the lawsuit dismissed without prejudice. In other words if the VA violates any of the agreement we can re-file the lawsuit.

According to the agreement there will be a written veteran homelessness strategy and action plan developed no later than 2/13/2015. The plan will be developed by the

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The opinions expressed in this newsletter do not necessarily represent the views of VVA, the State Council or its members.

Who Are The Vietnam Veterans Of America?
Founded in 1978, Vietnam Veterans of America, Inc. is the only national Vietnam veterans organization congressionally chartered and exclusively dedicated to Vietnam-era veterans and their families. VVA is organized as a not-for-profit corporation and is tax-exempt under Section 501(c)(19) of the Internal Revenue Service Code.

VVA'S FOUNDING PRINCIPLE
"Never again shall one generation of veterans abandon another."

PURPOSE
The purpose of Vietnam Veterans of America's national organization, the state councils, and chapters is:

To help foster, encourage, and promote the improvement of the condition of the Vietnam veteran.

To promote physical and cultural improvement, growth and development, self-respect, self-confidence, and usefulness of Vietnam-era veterans and others.

To eliminate discrimination suffered by Vietnam veterans and to develop channels of communications which will assist Vietnam veterans to maximize self-realization and enrichment of their lives and enhance life-fulfillment.

To study, on a non-partisan basis, proposed legislation, rules, or regulations introduced in any federal, state, or local legislative or administrative body which may affect the social, economic, educational, or physical welfare of the Vietnam-era veteran or others; and to develop public-policy proposals designed to improve the quality of life of the Vietnam-era veteran and others especially in the areas of employment, education, training, and health.

To conduct and publish research, on a non-partisan basis, pertaining to the relationship between Vietnam-era veterans and the American society, the Vietnam War experience, the role of the United States in securing peaceful co-existence for the world community, and other matters which affect the social, economic, educational, or physical welfare of the Vietnam-era veteran or others.

To assist disabled and needy war veterans including, but not limited to, Vietnam veterans and their dependents, and the widows and orphans of deceased veterans.

FUNDING
Vietnam Veterans of America relies totally on private contributions for its revenue. VVA does not receive any funding from federal, state, or local governments.



appropriate homelessness and mental health experts.

After soliciting input from pertinent stakeholders, including legislators, Veteran Service Organizations, state and local authorities and the local community, a New Master Plan will have to be completed by 10-16-2015. The Master Plan will be used to set out the most effective use of the West LA VA grounds, particularly for the homeless veterans, including undeserved population such as female veterans, aging veterans and those who are severely physically or mentally disabled. We hope to be part of this group that puts together this New Master Plan. We will see.

To develop an exit plan for those non-VA entities now located at the West LA VA whose use of the property

does not comply with applicable laws and that fit within the New Master Plan. This plan must be lawful, present a minimum level of litigation risk and expense to the Government. This one is for the 9 land leases that are in place right now. I don't like the way this one is worded. Might make it impossible to get rid of any of the leases. This is why we need to be involved in the New Master Plan so as to make sure there is an exit plan for the leases.

In this agreement the plaintiffs' will form a 501 (c) 3 non profit corporation whose mission will be to work with the VA, federal, State and local political leaders and philanthropic entities and others who wish to contribute or provide resources to this effort.

Why do we need people to donate? Is the VA not going to fund this? I found this a little strange.

After the press conference we were able to talk to several of the lawyers, two of which have been with the suit from the beginning. Both said this agreement was a great deal for us. One of the lawyers told us that out of the original lawsuit filed, all the suits were dismissed except one. The suit against the leases was the only one the judge ruled in our favor. Several

of the defendants in the lease suit then filed an appeal, which means the case would stay in the court system for years to come.

So now we have to make sure we have someone involved with the committee that is putting together the New Master Plan to make sure it is a "New" plan and the VA doesn't just redo the old plan.

One thing that was not mentioned in the agreement was the building of new units on the VA campus for homeless veterans or the refurbishing of the current buildings already on the campus. It will all depend on the New Master Plan. Again we need input on the New plan.

Once the signed agreement is filed with the court we will get a copy for all to look at.

It is still going to be a long road but we are making progress.

Rest assured, that John Rowan and I will follow up on every aspect to make sure everything is done in the best interest of our homeless veterans.

The judge finally ruled on the last part of the lawsuit. The 9 businesses have 180 days to vacate the land at West LA VA or file an appeal to the decision. Now we just have to convince the VA to built something for the homeless veterans.

From the ACLU:
JUDGMENT

The Court, having considered Plaintiffs' and Defendants' respective Motions for Summary Judgment, the Administrative Record filed in connection therewith, any responses and replies thereto, and any oral argument thereon, and good cause appearing therefore,

IT IS HEREBY ORDERED, ADJUDGED, AND DECREED that the following agreements entered into by the Department of Veterans Affairs ("DVA") concerning parcels of land and facilities located on the DVA's West Los Angeles Campus are unauthorized by law and therefore void:

- The March 1, 2010 agreement with Brentwood Schools, and any amendments thereto;
- The March 17, 2000 agreement for laundry services, which was assigned to Sodexo Marriot Laundry Services on May 10, 2001, and any amendments thereto;
- The May 1, 2001 agreement with UC Regents, and any amendments thereto;
- The August 10, 2006 agreement with Twentieth Century Fox Television, and any amendments thereto;
- The August 24, 2007 agreement with Veterans Park Conservancy, and any amendments thereto;
- The August 6, 2010 agreement with Westside Breakers Soccer Club, and any amendments thereto;
- The July 15, 2002 agreement with Westside Services, LLC, and any amendments thereto;
- The July 6, 2006 agreement with TCM, LLC, and any amendments thereto;
- The filming agreements which the DVA has entered into with various third parties at various times;

The Court STAYS the enforcement of this Judgment with respect to these existing agreements pending the resolution of any appeal from this Judgment, or, if no party appeals this Judgment, for 180 days from the issuance of this Judgment.

IT IS SO ORDERED, ADJUDGED, AND DECREED.

Dated: August 29, 2013. By:

THE HONORABLE S. JAMES OTERO

VVA CHAPTER 1031

Spaghetti Dinner

On January 31, 2015, Vietnam Veterans of America Chapter 1031 and the Veterans Association of North County (VANC) hosted a Spaghetti Dinner celebrating the completion of the newest piece of the VANC Resource Center – a state-of-the-art kitchen. The event was an overwhelming success with approximately 163 people attending. The criteria for the dinner was "veterans eat free & everyone else pays \$5." Through dinner sales and donations, more than \$650 was realized from the event.

Chuck Atkinson, CEO/Founder of the VANC Resource Center, and Scott Wolf, President of VVA Chapter 1031, jointly collaborated on the event.

Assisting with the preparation, serving, and cleanup included members of VVA Chapter 1031, VANC volunteers, American Legion Auxiliary, and John "the chef" without whose help we would have never discovered "the secret sauce recipe" that helped us feed 163 hungry visitors.

Since the new kitchen had no utensils/pots/pans/etc., VVA Chapter 1031 took the initiative and purchased approximately \$700 worth of kitchen equipment to accomplish the cooking & serving of the spaghetti dinner.

Afterwards, VVA Chapter 1031 formally donated all purchased kitchen equipment to Chuck Atkinson and the VANC Resource Center.

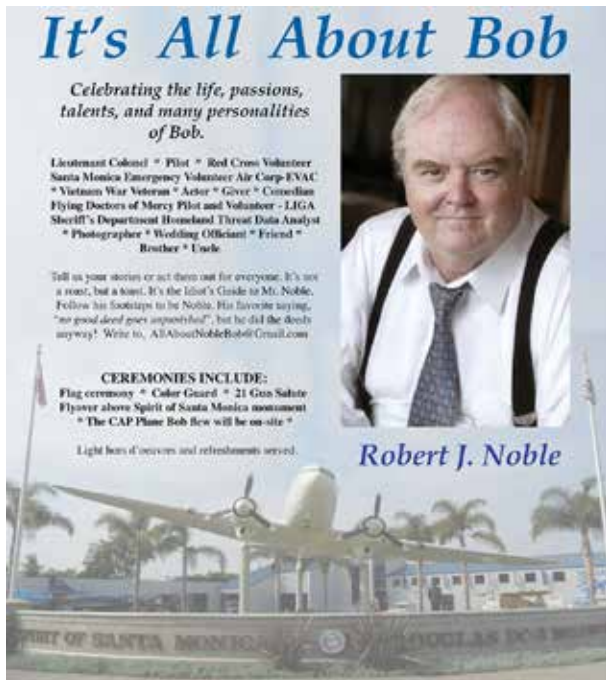
The VANC Resource Center is located at 1617 Mission Ave, Oceanside, CA, 92058, and can be reached at 760-722-1277.

VVA Chapter 1031 can be reached at P.O. Box 2742, Escondido, CA 92033-2742.

VVA 526

I'm sadden to report that this afternoon I received notice regarding Bob Noble, a long standing members of VVA Chapter 526, who died on Friday - 13 February 2015.

Bob will be missed by his friends, his family and the members of Vietnam Veterans Of America.



Joseph Montoya
Associate Member Liaison
(310) 425-5295
c/o
John Hamilton
President
(310) 429-4512

VETERANS INCARCERATED

Bob Chaney, Chair

It is with great sadness that I write this today. A few weeks ago I received word that Craig Lea has passed away. Craig was the RE-Entry Specialist for VA's Desert Pacific Network (VISN 22). He visited all the prisons state from Soledad and Avenal South along with federal prisons and many county jails in search of Veterans who were incarcerated and wanted his help finding housing and programs upon release. He will be greatly missed for I am honored to have called him a friend. Below is a copy of his obituary published in the Washington Post.

CRAIG STEPHEN LEA

Passed away on Thursday morning, January 8, 2015 after a short but courageous battle with cancer, two weeks before his 57th birthday. Craig was born in Camp Pendleton, CA on January 22, 1958 to James and Jean Lea. He attended school in Rockville, MD, earned a Master's Degree from the University of Maryland, Baltimore, and later attained certification as a Licensed Clinical Social Worker (LCSW-C). Craig devoted his life to helping others and spent years as a first responder with the suicide prevention hotline. He was a founding member of the Howard County Mobile Crisis Team, assisting police to more effectively respond to psychiatric emergencies. During his past 10 years with the VA in Long Beach, CA, he was an architect of the Veterans Court, helping veterans serving jail time for nonviolent crimes by removing them from the prison system and getting them needed help to return to a productive and fulfilling life. Craig was proud to make a genuine difference for these veterans. He had a deep fondness for wildlife and the beach and enjoyed photography, travel, camping, music, cooking, and spending time with friends. Craig is survived by his mother; his sister, Janet (Lea) Crocker; his brother, Scott; his niece, Jennifer; and his nephews, Jim, Steve, and Chris; as well as aunts, uncles, cousins, and many friends. Craig will be sorely missed by those who

knew him and knew that his devotion to his mother and his passion for life were unparalleled. Craig will be cremated and a service to honor his life is planned.

Published in The Washington Post from Jan. 17 to Jan. 18, 2015

VETERAN RESOURCE CENTER

CALVET, CALIFORNIA STATE LIBRARY ANNOUNCE
TULARE PUBLIC LIBRARY VETERAN RESOURCE
CENTER OPENING

Sacramento – The California Department of Veterans Affairs (CalVet) and the California State Library announce the grand opening of a Veterans Resource Center in the Tulare Public Library. The library is located at 475 North M Street, Tulare, CA 93274, and the public is invited to attend the event.

"The expansion of the Veteran Resource Centers throughout California's libraries creates additional locations where our Veterans and their families learn about the state and Federal benefits earned through their military service," said Keith Boylan, CalVet Deputy Secretary for Veterans Services. "Making benefits information and assistance available in local libraries is a great way to reach our Veterans close to where they live and work."

"This is just another of the innovative partnerships that libraries like Tulare are creating all over California," said California State Librarian Greg Lucas. "We at the State Library are proud to be a partner with Tulare and CalVet in this investment, which is going to pay incredible dividends for everyone involved."

The grand opening in Tulare brings to 20 the number of grant-funded "Veterans Connect @ the Library" locations in the Golden State. Future resource centers are planned for Lancaster, Oakland, and Sacramento-Central libraries.

Veteran Resource Centers offer basic information and in depth support related to Federal and state Veterans benefits and local services available. The goal of the CalVet – State Library partnership is to increase the number of Veterans and family members aware of and obtaining services.

The program is funded by the U. S. Institute of Museum and Library Services through the California State Library with direction and volunteer staff training provided by CalVet and program administration provided by Pacific Library Partnership, an organization that works to consolidate library systems throughout the state to achieve efficiencies and economies of scale. For more information and a full list of partner library locations, go to <http://www.calibrariesforveterans.org/index.html>.

VA ESTABLISHES MyVA

ADVISORY COMMITTEE

HIGHLY RESPECTED GROUP OF OUTSIDE LEADERS
TO ADVISE VA SECRETARY

The Department of Veterans Affairs (VA) today announced the establishment of the MyVA Advisory Committee (MVAC). The Committee brings together skilled experts from the private, non-profit and government sectors to assist in reorienting the Department to better meet the needs of Veterans. This Committee is charged with advising the Secretary of Veterans Affairs with a focus on improving customer service, Veteran outcomes and setting the course for long-term reform and excellence.

The Advisory Committee will meet multiple times per year and will engage in periodic reviews to ensure the Department achieves the goals of MyVA. The Committee will provide advice on competing short-term and long-range plans, priorities and strategies to improve the operational functions, services, processes and outputs of the Department, and will also advise on appropriate levels of support and funding necessary to achieve objectives. Further, the Committee will review implementation of recommended improvements and suggest any necessary course corrections.

Members of the Committee have extensive experience in customer service, large- scale organizational change and advocacy for Veterans.

"The success of MyVA will be Veterans who are better served by VA, so the work of this committee is incredibly important," said VA Secretary Robert A. McDonald. "The collective wisdom of our committee members is invaluable and each of them understands that VA must improve customer service and focus the Department on the needs of our Veterans. They are dedicated to that mission and I am grateful for their principled service to our Veterans."



CALIFORNIA ASSOCIATION OF COUNTY VETERANS SERVICE OFFICERS

SERVING THOSE WHO SERVED

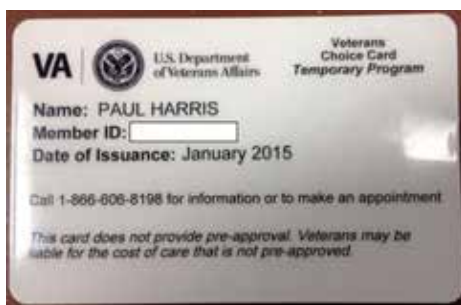
February 17, 2015

For more information, contact your local
County Veterans Service Officer:

<http://www.cacvso.org/county-contacts/>

IMPORTANT INFORMATION REGARDING THE CHOICE CARD (VACAA CARD)

Many veterans have recently received a white card in the mail from the U. S. Department of Veterans Affairs (USDVA). This card is called the Choice Card or VACAA Card. VACAA stands for the Veterans Access, Choice, and Accountability Act of 2014, a law enacted by Congress and signed by President Obama in August to improve health care for Veterans.



These cards do not give a veteran permission to go wherever they want, whenever they want for health care. This is not a fee basis card for emergency treatment!

You must call the USDVA at 866-606-8198 to get permission before using this card. The veteran who mistakenly uses this card without VA pre-approval will most likely be held responsible for the medical charges.

Distribution of the Choice Card began on November 4, 2014 and ended in January 2015. All cards should be received by mid-February 2015.

The cards were born out of the desire of the USDVA to make sure veterans did not have to wait for medical care in light of the problems experienced last year in dealing with waiting times for veterans to see a primary care physician. **The Choice Card is designed to supplement the care you receive at your VA medical facility, not replace or limit that care.**

The Choice Card provides a safety net for Veterans who are on a USDVA waiting list because a health care appointment could not be provided to them within 30 days of their preferred date or the date that is medically determined by their physician or who live more than 40 miles from the closest VA medical facility.

If you believe those circumstances apply to you, contact the USDVA at 866-606-8198 to verify that you are eligible to use the card. Once they determine eligibility, they will help you through the process of obtaining an appointment for care.

If you would like to obtain a regular Veteran Health Identification Card (VHIC), you can apply at your local County Veteran Service Office in your county of residence: <http://www.cacvso.org/county-contacts/>

The VHIC is issued only to Veterans who are enrolled in the VA health care system.

The biographies of Committee members are below. The group will hold their first meeting in April.

MG Josue "Joe" Robles Jr., US Army (Ret.) Mr. Robles retired from the U.S. Army as a Major General after 28 years in service and joined the United States Automobile Association (USAA), where he assumed the position of President and CEO in December 2007. In 2009, The Christian Science Monitor named Mr. Robles the "No. 1 Veteran in Business," and American Banker named him "Innovator of the Year." Mr. Robles retired from USAA in February 2015. He will serve as Chairman of the MyVA Advisory Committee.

Michael Haynie, PhD, Vice Chancellor, Syracuse University Dr. Haynie provides strategic leadership within the University's campus-wide portfolio of Veteran and military-connected programs, partnerships and research -- and works to develop new initiatives across the institution. He is an Air Force Veteran and serves as the Chairman of the Secretary of Labor's Advisory Committee on Veteran Employment, Training, and Employer Outreach. Dr. Haynie serves as Executive Director of the University's Institute for Veterans & Military Families, and he is the founder of Entrepreneurship Bootcamp for Veterans with Disabilities program. He will service as Vice Chairman of the MyVA Advisory Committee

Herman Bulls, International Director, and Chairman Public Institutions, Jones Lang LaSalle Bulls has vast experience in executive oversight of teams in real estate development, investment management, asset management, facilities operations and business development/retention. He serves on corporate boards including USAA, Tyco International, Comfort Systems and Exelis. Additionally

he serves as a director of the West Point Association of Graduates and the Military Bowl, an NCAA sanctioned post season football game. An Army Veteran, Bulls is a graduate of the United States Military Academy at West Point and Harvard Business School.

Teresa Carlson, Vice President, Worldwide Public Sector Amazon Web Services Ms. Carlson brings more than 20 years of experience as a business executive driving innovation and change, and producing successful business results. She is a leader in the information technology field. Prior to joining Amazon, Ms. Carlson served as Vice President of federal government business at Microsoft. She has 15 years of experience in the health care field and was recently named to Washingtonian Magazine's "100 Most Powerful Women," among other awards.

Richard H. Carmona, M.D., M.P.H., FACS, 17th Surgeon General of the United States Dr. Carmona is a combat decorated and disabled U.S. Army Special Forces Vietnam Veteran. He is currently a Distinguished Professor at the University of Arizona, holds numerous public and private leadership positions and has extensive experience in public health, clinical sciences, health care management, national preparedness and a commitment to prevention as an effective means to improve public health and reduce health care costs while improving the quality and quantity of life.

Delos "Toby" M. Cosgrove, M.D., CEO and President, Cleveland Clinic Dr. Cosgrove has emphasized patient care and patient experience in his leadership of the Cleveland Clinic, including the reorganization of clinical services. Dr. Cosgrove has launched major wellness initiatives for patients, employees and communities.

He was ranked in Modern Healthcare's "100 most powerful people in healthcare" and "most powerful physician executives." He is a Veteran of the U.S. Air Force.

Laura Herrera, MD, Deputy Secretary for Public Health, Maryland Department of Health & Mental Hygiene Dr. Herrera has served as Chief Medical Officer for Maryland and assisted the Secretary of Health on implementation of innovative health delivery reform structures in the state system. She served as a Medical Officer in the U.S. Army Reserve, National Director of Women's Health delivery reform structures in the state system. She served as a Medical Officer in the U.S. Army Reserve, National Director of Women's Health and the Acting Deputy Chief Officer of Patient Care Services in the VA's Veterans Health Administration.

Chris Howard, DPhil, President, Hampden-Sydney College Mr. Howard currently serves as president of Hampden-Sydney College. In addition, he was nominated and confirmed as a member of the National Security Education Program Board. Mr. Howard is a member of the Board of Directors of the American Council on Education and has served as Vice President for Leadership & Strategic Initiatives at the University of Oklahoma. He is a retired Air Force Lieutenant Colonel.

Nancy Killefer Ms. Killefer served as a Senior Director in the DC office of McKinsey & Company. During her career, Ms. Killefer has focused on strategy, marketing and organizational effectiveness and efficiency issues with an emphasis on consumer-based and retail industries. Ms. Killefer also founded and led McKinsey's global public sector practice. She is a former

Chief Financial Officer, Chief Operating Officer and Assistant Secretary for Management at the United States Department of the Treasury, and has previously chaired the IRS Oversight Board. Ms. Killefer now serves on a number of corporate Boards and is the Vice Chair of the Defense Business Board.

Fred Lee Mr. Lee is a nationally recognized expert and consultant in the patient and family experience. He is the author of the best-selling health care leadership book, "If Disney Ran Your Hospital, 9 ½ Things You Would Do Differently." His career in hospital management and expertise in quality improvement has changed the language of patient satisfaction in hospitals, and introduced experience based improvement to change management and staff engagement.

Eleanor "Connie" Mariano, M.D., Founder, Center for Executive Medicine Dr. Mariano was the first female director of the White House Medical Unit and the first military woman to become a White House Physician to the President. Dr. Mariano joined Mayo Clinic's Executive Health Program upon departure from the White House, and has since founded the Center for Executive Medicine. Dr. Mariano is a retired Navy Rear Admiral.

Jean Reaves Ms. Reaves is a Vietnam Era Veteran who has been a Veteran Advocate for the last 20 years. She is a member of AMVETS and several other Veteran Service Organizations. She is currently President of North Carolina AMVETS Service Foundation. Ms. Reaves also served as Veteran Liaison for United States Senator Kay Hagan. She also is the wife and mother of Veterans.

Maria "Lourdes" Tigla, Director of Outreach and

Resource Development, The District Communications Group Ms. Tigalo is a Veteran of the U.S. Air Force and was a co-founder of the first USAF Critical Care Medical Attendant Team in the Pacific. Ms. Tigalo currently serves as Regional Communications Manager for Team Rubicon, a Veteran disaster response service organization.

Robert E. Wallace, Assistant Adjutant General and Executive Director, Veterans of Foreign Wars Mr. Wallace is a Vietnam Veteran and is responsible for the day-to-day operations of VFW activities in Washington, DC. Mr. Wallace's VFW service follows a successful career in banking, and positions in New Jersey state government in Veterans Affairs and Employment and Training commission.

More information about the MyVA Advisory Committee may be found at: <http://www.blogs.va.gov/Vantage/17837/presidential-visit-highlights-vas-progress-in-phoenix> Contact: Keith Ashdown - Staff Director at 202-224-2627; Jon Towers - Staff Director at 202-225-3527

SENATE VOTES TO EXPAND VET ACCESS TO PRIVATE CARE

by Bryant Jordan

The Senate on unanimously passed legislation instructing the Veterans Affairs Department to allow veterans living within 40 miles of a VA facility to get non-VA care if the department hospital or clinic cannot provide the service.

Sen. Jerry Moran, R-Kansas, filed the bill as an amendment to the Senate Budget Resolution, Moran spokeswoman Garrette Tuner said. The vote was 100-0.

"We [expected] it to pass with broad support from both sides of the aisle," she said.

Moran and other lawmakers backed the legislation even though many maintain the VA already has the authority to allow veterans within 40 miles of a VA clinic to use non-VA care when needed.

The VA has claimed otherwise, however, arguing that Congress' intent -- as spelled out last year in the conference report on the Veterans Choice Act -- allows exemptions to veterans only when there are geographic problems accessing a VA facility.

VA Deputy Secretary Sloan Gibson cited that restriction on Wednesday after Moran pressed him on language in the same report stating that lawmakers "do not intend the 40-mile eligibility criteria ... to preclude veterans who reside closer than 40 miles from a VA facility from accessing care through non-VA providers, particularly if the VA facility the veteran resides near provides limited services."

Turner said that Moran's amendment will ensure VA administers the Choice Act "as Congress intended." It calls on the VA to provide veterans access to non-VA health care when the nearest VA medical facility within 40 miles drive time is incapable of offering the care the veteran seeks, she said.

Lawmakers have been fighting with VA leadership over this issue at least since last September, when then SVAC chairman Sen. Richard Burr, R-North Carolina, along with Rep. Jeff Miller, R-Florida, chairman of the House Veterans Affairs Committee, and then committee ranking member Rep. Michael Michaud, D-Maine, challenged VA on its narrow interpretation of the restriction.

VA has always had the authority to permit care at non-VA facilities, they wrote on Sept. 25, 2014, and nothing in the Veterans Choice Act negates that.

Lawmakers "did not intend for a veteran to travel hundreds of miles or be required to experience an unreasonable number of driving hours to receive a service or treatment immediately available within the community," they wrote.

On Wednesday, in advance of the Senate hearing, the VA did reinterpret one part of the 40-mile restriction, changing it to mean "driving time" instead of straight line, "as the crow flies" distance.

Gibson told lawmakers that the VA had the flexibility to make that change, but not to with regard to allowing non-VA care within the 40-mile range only because a local VA facility could not provide the care or service.

Lawmakers deliberately inserted language into the law granting the VA just that kind of flexibility, and Miller began pushing the department to exercise its authority for veterans within the 40-mile limit since last year.

-- Bryant Jordan can be reached at bryant.jordan@military.com

VA WORKS TO EXPAND CHOICE

Vietnam Helicopter Pilot Wisdom

If You Have Not Been There And Done That, You Probably Will Not Understand A Lot Of These

1. Once you are in the fight, it is way too late to wonder if this is a good idea..
 2. It is a fact that helicopter tail rotors are instinctively drawn toward trees, stumps, rocks, etc. While it may be possible to ward off this natural event some of the time, it cannot, despite the best efforts of the crew, always be prevented. It's just what they do..
 3. NEVER get into a fight without more ammunition than the other guy.
 4. The engine RPM and the rotor RPM must BOTH be kept in the GREEN. Failure to heed this commandment can affect the morale of the crew.
 5. Cover your Buddy, so he can be around to cover for you.
 6. Decisions made by someone above you in the chain-of-command will seldom be in your best interest..
 7. The terms Protective Armor and Helicopter are mutually exclusive.
 8. Sometimes, being good and lucky is still not enough.
 9. "Chicken Plates" are not something you order in a restaurant. (Armored vests worn by flight crews).
 10. If everything is as clear as a bell and everything is going exactly as planned, you're about to be surprised.
 11. Loud, sudden noises in a helicopter WILL get your undivided attention.
 12. The BSR (Bang Stare Red) Theory states that the louder the sudden bang in the helicopter, the quicker your eyes will be drawn to the gauges. The longer you stare at the gauges the less time it takes them to move from green to red.
 13. No matter what you do, 'the bullet with your name on it' will get you. So, too, can the ones addressed "To Whom It May Concern".
 14. If the rear echelon troops are really happy, the front line troops probably do not have what they need.
 15. If you are wearing body armor, the bullets will probably miss that part.
 16. Happiness is a belt-fed weapon.
 17. Having all your body parts intact and functioning at the end of the day is a + and beats the alternative.
 18. If you are allergic to lead, it is best to avoid a war zone.
 19. It is a bad thing to run out of airspeed, altitude and ideas all at the same time.
 20. Hot garrison chow is better than hot C-rations which, in turn, is better than cold C-rations which, in turn, is better than no food at all. All of these however, are preferable to cold rice balls, even if they do have the little pieces of fish in them.
 21. Everybody's a hero...On the ground...In the club...After the fourth drink.
 22. A free fire zone has nothing to do with economics.
 23. The further you fly toward the mountains and increase altitude, the louder the strange engine noises become.
 24. Medals are OK but having your body and all your friends in one piece at the end of the day is better.
 25. Being shot hurts and it can ruin your whole day.
 26. "Pucker Factor" is the formal name of the equation that states the more hairy the situation is, the more of the seat cushion will be sucked up your ass. It can be expressed in its mathematical formula of S (suction) + H (height above ground) + I (interest in staying alive) + T (# of tracers coming your way)
 27. Thus the term 'SHIT' can also be used to denote a situation where high Pucker Factor is being encountered.
 28. Thousands of Vietnam Veterans earned medals for bravery every day. A few were even awarded.
 29. Running out of pedal, fore or aft cyclic, or collective are all bad ideas. Any combination of these can be deadly.
 30. There is only one rule in war: When you win, you get to make up the rules.
 31. C-4 can make a dull day fun.
 32. There is no such thing as a fair fight - only ones where you win or lose.
 33. If you win the battle you are entitled to the spoils. If you lose you don't care.
 34. Nobody cares what you did yesterday or what you are going to do tomorrow. What is important is what you are doing - NOW - to solve our problem.
 35. Always make sure someone has a P-38. Uh, that's a can opener for those of you who aren't military.
 36. Prayer may not help...but it can't hurt.
 37. Flying is better than walking. Walking is better than running. Running is better than crawling. All of these however, are better than extraction by Medivac, even if it is technically, a form of flying.
 38. Do not fear the enemy, for your enemy can only take your life. It is far better that you fear the media, for they will steal your HONOUR.
 39. A grunt is the true reason for the existence of the helicopter. Every helicopter flying in Vietnam had one real purpose: To help the grunt. It is unfortunate that many helicopters never had the opportunity to fulfill their one true mission in life, simply because someone forgot this fact.
 40. IF EVERYONE DOES NOT COME HOME, NONE OF THE REST OF US CAN EVERFULLY COME HOME EITHER!!!
- IF YOU HAVE NOT BEEN THERE AND DONE THAT, YOU PROBABLY WILL NOT UNDERSTAND A LOT OF THESE...

PROGRAM ELIGIBILITY

Eligibility criteria for 40 miles calculation would change to driving distance

Washington -- In order to expand eligibility for the Veterans Choice Program, the Department of Veterans Affairs (VA) today announced that it will change the calculation used to determine the distance between a Veteran's residence and the nearest VA medical facility from a straight line distance to driving distance. The policy change will be made through regulatory action in the coming weeks. The Veterans Choice Program was authorized by the Veterans Access, Choice, and Accountability Act of 2014 (VACAA).

"VA has worked very quickly to implement the Veterans Choice Program and we appreciate the constructive feedback shared by Veterans and our partners to help us improve service to Veterans," said Secretary Robert McDonald. "We've determined that changing the distance calculation will help ensure more Veterans have access to care when and where they want it. VA looks forward to the ongoing support of our partners as we continue to make improvements to this new program."

The method of determining driving distance will be through distance as calculated by using a commercial product. The change is expected to roughly double the

number of eligible Veterans.

The Veterans Choice Program is a new, temporary benefit that allows eligible Veterans to receive health care in their communities rather than waiting for a VA appointment or traveling to a VA facility. Veterans seeking to use the Veterans Choice Program should call 1-866-606-8198 to confirm their eligibility and to schedule an appointment. Since the Choice Program went into effect on November 5, 2014, more than 45,000 medical appointments have been scheduled.

Using expanded authorities from VACAA, VA continues to expand access to care through increased staffing and enhanced collaboration with both the Indian Health Service and Native Hawaiian Health Care Systems. See the VACAA progress fact sheet here:

VA is enhancing its health care system and improving service delivery to better serve Veterans and set the course for long-term excellence and reform. VA has made significant progress in various areas of the legislation, such as extending the Assisted Living/Traumatic Brain Injury Pilot program and Project Arch, to expand timely access to high-quality health care for Veterans.

For more details about the department's progress and related information, see www.va.gov/opa/choiceact/factsheets_and_details.asp and www.va.gov/opa/choiceact/documents/FactSheets/Progress-Report-March-

2015-Fact-Sheet.pdf .

A fact sheet on the 40-mile-rule change can be found at www.va.gov/opa/choiceact/documents/FactSheets/March-2015-40-mile-rule-change-factsheet.pdf

VET CHOICE CHANGES URGED

BIPARTISAN GROUP OF SENATORS URGE IMPROVEMENTS TO VETERANS CHOICE PROGRAM

Vietnam Veterans of America

The Veterans Choice Card program was established by Congress last year in response to the nationwide crisis of veterans' access to care, but has yet to be implemented as Congress envisioned. The program allows veterans who live more than 40 miles from the closest VA facility, or who face a significant delay in scheduling an appointment, to access non-VA care.

"The VA is construing the eligibility criteria as it relates to the 40-mile rule so narrowly that it is excluding too many who are far away from the care that they need," wrote the senators. In addition, the Veterans Administration has said that it plans to propose reallocating funds for the Veterans Choice Program to other VA accounts.

Senators Ben Cardin (D-MD), Barbara Mikulski (D-MD), Susan Collins (R-Maine), Jerry Moran (R-Kans.), John McCain (R-Ariz.), Angus King (I-Maine), Chuck Grassley (R-Iowa), Ed Markey (D-Mass.), Joni Ernst (R-Iowa), David Vitter (R-La.), Joe Manchin (D-WV), Deb Fischer (R-Neb.), Amy Klobuchar (D-Minn.), Jeff Flake (R-Ariz.), Mark Warner (D-Va.), Mike Crapo (R-Idaho), Ron Wyden (D-Ore.), Orrin Hatch (R-Utah), Barbara Boxer (D-Calif.), Pat Roberts (R-Kan.), Tim Kaine (D-Va.), John Barrasso (R-Wy.), Sherrod Brown (D-Ohio), Mike Enzi (R-Wyo.), Heidi Heitkamp (D-ND), Marco Rubio (R-Fla.), Thom Tillis (R-NC), Pat Toomey (R-Pa.), Martin Heinrich (D-NM), Shelley Moore Capito (R-WV), Steve Daines (R-Mont.), Jim Inhofe (R-Okla.), Richard Burr (R-NC), Lamar Alexander (R-TN), John Thune (R-SD), Tom Cotton (R-Ark.), John Hoeven (R-ND), Ted Cruz (R-Texas), Jeff Merkley (D-Ore.), Ron Kirk (R-Ill.), Claire McCaskill (D-Mo.), Tim Scott (R-SC), and Brian Schatz (D-Hawaii) signed on to the letter below this week urging VA Secretary McDonald to make certain that funding provided by Congress is being used to implement the Veterans Choice Program to the fullest extent possible.

Dear Secretary McDonald:

Since November 1, 2014, the Choice Card, as provided under the recently enacted Veterans Choice, Access, and Accountability Act of 2014, has been distributed to approximately 8.5 million Veterans nationwide, yet less than one percent of recipients -- 0.37 percent -- have been authorized to access non-VA care through this program. With this in mind, we write to convey serious concerns regarding your implementation of the Choice Card Program with respect to funding for the program in connection with the Fiscal Year 2016 Presidential Budget Request and your interpretation of the 40-mile rule as provided under the Act. We ask you to address both of these concerns immediately.

First, we were dismayed to learn from the President's Fiscal Year 2016 Budget Request that the Department of Veterans Affairs intends to submit a legislative proposal that would reallocate part of the funding for the Veterans Choice Program to other programs within the VA. It is deeply disturbing that the Administration would try to reduce funding for this program before this program has even been allowed to work -- being in existence for only a few short months -- and as barriers to care continue to exist. Instead, the Department should make certain that funding provided by Congress is being used to implement the Veterans Choice Program to the fullest extent possible.

Second, the VA is construing the eligibility criteria as it relates to the 40-mile rule so narrowly that it is excluding too many who are far away from the care that they need. As you know, the Choice Program provides Veterans with the option to receive non-VA health care rather than waiting for a VA appointment if there is a significant delay in scheduling an appointment or a Veteran has to travel more than 40 miles to receive VA care. While many Veterans are satisfied with care provided through the VA Health Care System, trips to VA medical centers can be difficult for rural Veterans, especially those who are elderly or ill. Because long drive times are a hardship for these individuals and can present a significant barrier to accessing care, many Veterans anticipated using their Choice Cards when Congress established the Choice Program last year.

The VA's definition of the eligibility criteria is too narrow in two important respects. First, the VA does not

consider the type of care available within 40 miles of where a Veteran lives. In many areas across the nation, the effect is that those who need services only available at a VA medical center, but who live near a Community-Based Outpatient Clinic, are prevented from using the Choice Card to access specialty care in their local community. While the Clinic may be within 40 miles, the VA hospital offering the required care is often more than 40 miles and hours of travel time away.

Second, the VA measures the 40 miles "as the crow flies" and not the actual distance that the Veteran would have to travel. Congress' intent was to establish a pilot program that would allow Veterans to access non-VA care when they face an obstacle to care, whether it be an unacceptable distance to care or wait time for care. Given the clear intent of Congress to reduce barriers to care, it is perplexing that the VA is not using its authority to allow non-VA care for those who face a geographic challenge in accessing care, including long drive times or health conditions that make travel difficult. The impact of such an interpretation is to exclude from the program many of the Veterans for whom Congress aimed to make health care more accessible. For Veterans in remote and rural areas with limited transportation access, this could mean the difference between 30 minutes and half a day of travel.

As Secretary, you already have the authority to modify the way that the distance criteria is calculated so that the Choice Program is implemented as Congress intended, and we urge you to rectify the overly narrow definition without delay. Additionally, we urge you to stop any attempt to propose a reallocation of funds designed to kill the Choice Card program in its infancy.

C-123 AO EXPOSURE

VA CONTINUES TO DENY JUSTICE TO C-123 CREWS EXPOSED TO DIOXIN

"It is an outrage that the VA, in effect, is continuing to deny these veterans justice," said John Rowan, National President of Vietnam Veterans of America. These VA bureaucrats attempting to delay justice ought to be relieved of their duties so that they can no longer abuse veterans with their tactic of delay, deny, until they die. There is no excuse for why these worthy veterans are still not being treated with the appreciation and the respect their service warrants. Rowan praised Wes Carter, the leader of the C-123 Veterans Association, for his spunk and spirit: "You've got to keep on keeping on," Rowan urged, "and VVA will be at your side to convince the VA hierarchy that to continue to delay justice is to deny justice."

For over five years, retired Air Force Reserve Major Wes Carter has led the fight of his life: to get the Department of Veterans Affairs to acknowledge that the C-123 Provider military cargo planes which transported Agent Orange to and from Vietnam had, in fact, been contaminated with dioxin. A number of reputable scientists and epidemiologists at federal agencies have gone on record, endorsing Carter's stance that these craft remained hazardous to the health of the 2,100 crew members, flight nurses, and maintenance workers who serviced them between 1972 and 1982. "Yet the VA, in all its wisdom, maintained that these men and women who had been exposed to Agent Orange ought not be eligible to receive the same healthcare and disability compensation benefits that boots-on-the-ground veterans of Vietnam receive," Rowan noted.

"VVA has long supported Major Carter in his quest for justice," Rowan said. When the Institute of Medicine (IOM) concluded, in a study funded by the VA, that the planes were actively contaminated when Air Force Reservists flew them, we were as pleased as Wes Carter, who exulted, "We won!" The IOM report was released in January 2015, yet Major Carter and those who have been sickened with maladies the VA concedes are associated with exposure to Agent Orange have still not received the justice they deserve. Why? Because a few bad actors in the office of Public Health & Environmental Hazards at the VA continue their attempts to delay justice despite the conclusive report by the IOM.

MONSANTO

UNETHICAL AND FALLACIOUS

By James Turnage Op-Ed

People all over the world know the company name 'Monsanto;' and it's not for good reasons. It would be great if Monsanto made products improved the quality of life. They could be involved in Alzheimer's research to find a cure for a horrible disease. It could be a lot of things; it could enrich the lives of humans. Unfortunately it is none

of those. Monsanto is a chemical company and it produces products which are harmful and even deadly. Claims by Monsanto that their chemicals are safe and improve lives are fallacious, and their business practices are unethical.

Monsanto and Dow Chemical developed an herbicide called 'Agent Orange' during the Vietnam War. Its purpose was to defoliate areas of the jungle, and expose North Vietnam positions. It was used during 'Operation Ranch Hand' from 1962 to 1971. Monsanto claimed the chemical components were safe and would not cause harm to human beings.

After soldiers began returning from the war, health problems such as several types of cancer, Parkinson's disease, and birth defects were attributed to the Dioxin in Agent Orange.

The C-123 aircraft which were used to deliver Agent Orange were decommissioned in 1972. They were used in the United States for medical evacuations and cargo missions. About 1500 Air Force reservists flew the aircraft between 1972 and 1982. The planes had never been decontaminated or examined for residual Agent Orange and dioxin. Many of those pilots began experiencing symptoms similar to those of returning combat forces.

In 1991 the Agent Orange Act was passed by Congress. This act paved the way for those who served in Vietnam to seek medical attention directly related to Agent Orange. The Air Force reservists who flew those aircraft inside the United States from 1972 to 1982 are not eligible under the act. It only applies to those who served in Vietnam from January 9, 1962, to May 7, 1975.

Subsequent tests on the aircraft showed traces of the dioxin, but because the strength of the chemical erodes over time, the residue is not potent enough to be harmful. All but one of the planes was infected. It is questionable that the Air Force reservists will be compensated.

Monsanto's latest questionable product is Genetically Modified Organisms. GMO's and food developed using GMO material have been banned in the European Union, Australia, and Japan.

GMO's were developed to endure the pesticide Roundup, also produced by Monsanto. Crops grown with the use of GMO's are labeled 'Roundup Ready.' These seeds comprise 70 to 90 percent of all corn and soy bean crops.

Because Roundup is easy and inexpensive to use, farmers saturated their fields with the pesticide to kill weeds which inhibited the growth of their crops. The weeds became immune to the product and grew stronger and more resistant. What developed was bad news for consumers. Vastly larger amounts of herbicide are needed to kill the weeds; large amounts of residue remain on the crops sent to market.

GMO's have been linked to illness, both life-threatening and chronic; they are harmful to animals; they are environmentally dangerous, especially to sources of drinking water. They are easily spread by wind and rain. They cannot be washed off of food located in the market place.

As with all food substances, the FDA required testing of GMO products. The testing was done by the Agro-giant itself. It was determined that the process was safe.

Twenty nine states are considering labels informing consumers that what they are eating was made from GMO produced crops. Corporate farms denounce the possibility of such a law, claiming that the FDA deemed GMO produced products were safe. Advocates for the labels state that it is not a safety issue; consumers simply have the right to know what is contained in the food they eat.

10 THINGS ABOUT AO EVERY VET SHOULD KNOW

LEARN THE BASICS OF VA'S AGENT ORANGE BENEFITS AND CARE

1. Agent Orange was a herbicide and defoliant used in Vietnam

Agent Orange was a blend of tactical herbicides the U. S. military sprayed from 1962 to 1971 during the Vietnam War to remove the leaves of trees and other dense tropical foliage that provided enemy cover. The U. S. Department of Defense developed tactical herbicides specifically to be used in "combat operations." They were not commercial grade herbicides purchased from chemical companies and sent to Vietnam.

More than 19 million gallons of various "rainbow" herbicide combinations were sprayed, but Agent Orange was the combination the U. S. military used most often. The name "Agent Orange" came from the orange identifying stripe used on the 55-gallon drums in which it was stored. Heavily sprayed areas included forests near the demarca-

tion zone, forests at the junction of the borders of Cambodia, Laos, and South Vietnam, and mangroves on the southernmost peninsula of Vietnam and along shipping channels southeast of Saigon.

2. Any Veteran who served anywhere in Vietnam during the war is presumed to have been exposed to Agent Orange.

For the purposes of VA compensation benefits, Veterans who served anywhere in Vietnam between January 9, 1962 and May 7, 1975 are presumed to have been exposed to herbicides, as specified in the Agent Orange Act of 1991. These Veterans do not need to show that they were exposed to Agent Orange or other herbicides in order to get disability compensation for diseases related to Agent Orange exposure.

Service in Vietnam means service on land in Vietnam or on the inland waterways ("brown water" Veterans) of Vietnam.

3. VA has linked several diseases and health conditions to Agent Orange exposure.

VA has recognized certain cancers and other health problems as presumptive diseases associated with exposure to Agent Orange or other herbicides during military service. Veterans and their survivors may be eligible for compensation benefits.

- AL Amyloidosis
- A rare disease caused when an abnormal protein, amyloid, enters and collects tissues or organs
- Chronic B-cell Leukemias
- A type of cancer which affects a specific type of white blood cell
- Chloracne (or similar acneform disease)
- A skin condition that occurs soon after exposure to chemicals and looks like common forms of acne seen in teenagers. Under VA's rating regulations, it must be at least 10 percent disabling within one year of exposure to herbicides.
- Diabetes Mellitus Type 2
- A disease characterized by high blood sugar levels resulting from the body's inability to produce or respond properly to the hormone insulin
- Hodgkin's Disease
- A malignant lymphoma (cancer) characterized by progressive enlargement of the lymph nodes, liver, and spleen, and by progressive anemia
- Ischemic Heart Disease
- A disease characterized by a reduced supply of blood to the heart, that can lead to chest pain (angina)
- Multiple Myeloma
- A cancer of plasma cells, a type of white blood cell in bone marrow
- Non-Hodgkin's Lymphoma
- A group of cancers that affect the lymph glands and other lymphatic tissue
- Parkinson's Disease
- A progressive disorder of the nervous system that affects muscle movement
- Peripheral Neuropathy, Early-Onset
- A nervous system condition that causes numbness, tingling, and muscle weakness. Under VA's rating regulations, it must be at least 10 percent disabling within one year of herbicide exposure.
- Porphyria Cutanea Tarda
- A disorder characterized by liver dysfunction and by thinning and blistering of the skin in sun-exposed areas. Under VA's rating regulations, it must be at least 10 percent disabling within one year of exposure to herbicides.
- Prostate Cancer



Recognize What's In This Photo?

- Cancer of the prostate; one of the most common cancers among older men
 - Respiratory Cancers (includes lung cancer)
 - Cancers of the lung, larynx, trachea, and bronchus
 - Soft Tissue Sarcomas (other than osteosarcoma, chondrosarcoma, Kaposi's sarcoma, or mesothelioma)
 - A specific group of malignant of cancers in body tissues such as muscle, fat, blood and lymph vessels, and connective tissues
4. Veterans who want to be considered for disability compensation must file a claim. Veterans who want to be considered for disability compensation for health problems related to Agent Orange exposure must file a claim.

During the claims process, VA will check military records to confirm exposure to Agent Orange or qualifying military service. If necessary, VA will set up a separate exam for compensation.

5. VA offers health care benefits for Veterans who may have been exposed to Agent Orange and other herbicides during military service. Veterans who served in Vietnam between January 9, 1962, and May 7, 1975, are eligible to enroll in VA health care. Visit VA's health benefits explorer <<http://hbexplorer.vacloud.us>> to check your eligibility and learn how to apply.

6. Participating in an Agent Orange Registry health exam helps you, other Vet-

erans and VA.

VA's Agent Orange Registry health exam alerts Veterans to possible long-term health problems that may be related to Agent Orange exposure during their military service. The registry data helps VA understand and respond to these health problems more effectively.

The exam is free to eligible Veterans and enrollment in VA health care is not necessary. Although the findings of your exam may be used to inform your subsequent care, they may not be used when applying for compensation as a separate exam is required. Contact your local VA Environmental Health Coordinator about getting an Agent Orange Registry health exam.

7. VA recognizes and offers support for the children of Veterans affected by Agent Orange who have birth defects.

VA has recognized that certain birth defects among Veterans' children are associated with Veterans' qualifying service in Vietnam or Korea.

- Spina bifida (except spina bifida occulta), a defect in the developing fetus that results in incomplete closing of the spine, is associated with Veterans' exposure to Agent Orange or other herbicides during qualifying service in Vietnam or Korea.

- Birth defects in children of women Veterans are associated with their military service in Vietnam but are not related to herbicide exposure. The affected child must have been conceived after the Veteran entered Vietnam or the Korean demilitarized zone during the qualifying service period.

Learn more about benefits for Veterans' children with birth defects. <http://www.publichealth.va.gov/exposures/agentorange/benefits/children-birth-defects.asp>

8. Vietnam Veterans are not the only Veterans who may have been exposed to Agent Orange.

Agent Orange and other herbicides used in Vietnam were used, tested or stored elsewhere, including some military bases in the United States. Other locations/scenarios in which Veterans were exposed to Agent Orange may in-

clude:

- Korean Demilitarized Zone
- Exposure along the demilitarized zone in Korea between April 1, 1968 and August 31, 1971
- Thailand Military Bases
- Possible exposure on or near the perimeters of military bases between February 28, 1961 and May 7, 1975
- Herbicide Tests and Storage Outside Vietnam
- Possible exposure due to herbicide tests and storage at military bases in the United States and locations in other countries
- Agent Orange Residue on Airplanes Used in Vietnam War

Possible exposure of crew members to herbicide residue in C-123 planes flown after the Vietnam War

9. VA continues to conduct research on the long-term health effects of Agent Orange in order to better care for all Veterans.

VA and other Federal government Departments and agencies have conducted, and continue to conduct, extensive research evaluating the health effects of Agent Orange exposure on U. S. Veterans.

An example is the Army Chemical Corps Vietnam-Era Veterans Health Study designed to examine if high blood pressure (hypertension) and chronic obstructive pulmonary disease (COPD) are related to herbicide exposure during the Vietnam War. Researchers have completed data collection and aim to publish initial findings in a scientific journal in 2015.

Learn more about Agent Orange related studies and their outcomes here: <http://www.publichealth.va.gov/exposures/agentorange/research-studies.asp>

10. VA contracts with an independent, non-governmental organization to review the scientific and medical information on the health effects of Agent Orange.

VA contracts with the Institute of Medicine (IOM) of the National Academy of Sciences every two years to scientifically review evidence on the long-term health effects of Agent Orange and other herbicides on Vietnam Veterans. The IOM uses a team of nationally renowned subject matter experts from around the country to gather all the scientific literature on a topic, identify peer-reviewed reports, and then examine the studies to determine the most rigorous and applicable studies. The IOM looks for the highest quality studies. The IOM then issues its reports, including its conclusions and recommendations to VA, Congress, and the public.

About the author:

Dr. Ralph Erickson is an Army Veteran of the Gulf War (1990-91) and Operation Iraqi Freedom (2003). He retired with 32 + years active-duty service, during which he held a number of leadership positions to include: Commander of The Walter Reed Army Institute of Research; Command Surgeon, US Central Command; and Director, DoD Global Emerging Infections and Response System (DOD-GEIS). He is a board certified physician in Preventive Medicine and Public Health. He received his medical degree from the Uniformed Services University of the Health Sciences (USUHS), Masters of Public Health from Harvard University, and Doctorate of Public Health from Johns Hopkins University.

RETIREMENT MIGHT UNLEASH PTSD SYMPTOMS IN VIETNAM VETERANS

By Leo Shane III

WASHINGTON — It took Sam Luna more than 35 years to get treatment for his post-traumatic stress disorder.

“I didn’t realize anything was wrong,” the combat-wounded Vietnam veteran said. “I thought I had adjusted well after I came back. I had a job, I had a family, everything looked great from the outside.”

But shortly after he retired in 2004, his anxiety attacks and stress levels increased. A trip to his local Veterans Affairs hospital triggered war memories. The former soldier started to notice the hair-trigger temper his wife had complained about for years.

He found himself thinking more often about the war — and the friends he lost.

“It was like I had a black box on the mantel for years, but I could ignore it when I left for work every day,” he said. “When I retired, it was still sitting there, waiting for me.”

Mental health experts say that kind of delayed trauma isn’t unusual. Major life events such as retirement often trigger personal reassessment and forgotten memories.

But for Vietnam veterans who returned decades ago to a harsh reception and limited mental health options, that

could mean a new wave of stress and serious psychological issues as their generation enters retirement age.

The average age of a Vietnam vet is 65 years old. More than 5 million of the nation’s more than 7 million Vietnam-era veterans are between 60 and 70 years old, according to data from the National Center for Veterans Analysis and Statistics.

An additional 1 million are expected to turn 60 within the next five years.

“A lot of people coped with the traumatic experiences in war by throwing themselves into work when they got home,” said Tom Berger, director of the health council at Vietnam Veterans of America. “Now, after being a workaholic for 40 years, they suddenly don’t have that structure in their life anymore. I expect there will be more and more folks seeking out help for those issues.”

But Berger and other veterans advocates worry that if there is a flood of new cases, the already struggling VA mental health system won’t be able to handle it.

In retrospect, Luna said, his PTSD should have been obvious.

His wife, Gloria, said after he returned from Vietnam, the 22-year-old soldier never spoke about the war or his injury. He punched walls when he got angry. He stewed in silence over things that caused him stress, and he lashed out at her and their children when it became too much.

“I knew he was different, but I figured that just happens when men come back from war,” she said.

For his part, Luna said he just “forgot” everything he saw overseas. He blocked out the stress of patrols in hostile areas, the men who got hit by sniper fire and the snare trap that shot a wooden spike through his right leg.

Once he was well enough to do so, he found work with the Texas criminal justice system as a probation officer and threw himself into his career.

“I just didn’t want to deal with that stuff,” he said. “I didn’t think there was anything I needed to deal with.”

John Edwards, a rifleman who was entering Vietnam the same year Luna was leaving, said he saw the same pattern in his war experience. After two years of violent scenes and close calls, he just wanted to return home to a “normal” life. He found success in a series of technology firms. He was diagnosed only recently — more than 40 years after his return — with PTSD.

“I didn’t feel right, and someone told me I should go in [to the VA] and talk with someone,” he said. “It wasn’t about getting benefits for me. It was about getting help.”

He’s getting that help now. Berger said it’s a common story heard by those at Vietnam Veterans of America, one that shows the need for mental health services for all ages.

But he worries an influx of cases like his could overburden the VA medical system.

“They just don’t have the resources to handle that,” he said.

Last year, more than 476,000 veterans received treatment for PTSD from VA hospitals and clinics, up dramatically from about 272,000 in fiscal 2006.

Iraq and Afghanistan veterans make up a large portion of that increase but still account for only about one-fifth of all PTSD patients. More than half of the new cases come from earlier wars.

In response to the demand, VA officials have added almost 7,000 new mental health specialists in the last six years. But in April, the VA inspector general sharply criticized department officials for overly optimistic estimates on wait times for mental health appointments.

Fewer than half of patients requesting an initial evaluation were seen within two weeks, and many facilities took months to schedule even basic visits.

VA officials have promised changes, vowing to hire 1,600 new mental health professionals nationwide and to fill 1,500 existing open positions across the country.

Dr. Matthew Friedman, executive director of the VA’s National Center for PTSD, said officials haven’t begun preparing for a wave of retiring Vietnam veterans seeking mental health care.

In the past, they have issued alerts around anniversaries or other large public events that might trigger war flashbacks — when the movie “Saving Private Ryan” was released, for example — about the possibility of new patients, but studies haven’t shown a significant jump in therapy visits following those markers.

“But anecdotally, I can tell you I’ve seen a lot of veterans [following notable dates or events] who just want to talk informally with someone,” he said. “We know anniversaries are important, and they evoke a lot of memories.”

The Defense Department last month launched its 50th anniversary commemoration of the Vietnam War, pushing those veterans’ experiences and memories to the forefront again.

Barbara Van Dahlen, founder of the nonprofit counseling organization Give an Hour, said the combination of that and the veterans’ ages create a “perfectly normal”

situation for mental health issues to resurface.

“I don’t want to suggest that all of these veterans will need professional help,” she said. “But it’s a situation where the memories and the emotions are bubbling up. For some, it’ll be a conversation with their children or their wife, sharing things they wanted to before didn’t feel like they could. Some will need more help. The important thing to know is that it’s normal and important to address those issues, and not just to shove it away again.”

Veterans of Foreign Wars deputy director Gerald Manar, a Vietnam veteran, noted that he saw more visitors to the Vietnam Wall on Memorial Day last month. It wasn’t just veterans either, he said. Many families were there, asking questions and listening to stories.

“Vietnam veterans were slapped with a lot of unfair labels when they came home,” Manar said. “Millions went off to war, served with distinction and honor, and then came back to be major contributors to the middle class. But that doesn’t mean they dealt with everything.”

Friedman said from a treatment perspective, the age or combat era of a mental health patient doesn’t really matter.

“PTSD is PTSD,” he said, noting that recent advances in treating younger vets can be easily translated to older generations.

Luna, who is in counseling with the VA to deal with his PTSD, works with Vets’ Journey Home Texas, running weekend therapy retreats for veterans of all eras. They mainly work with younger veterans, in the hopes they can deal with their war traumas more quickly and more definitively than the older generations. But he said he’s also started hearing from a large number of Vietnam veterans who have just retired.

Said Luna: “America has no idea what the Vietnam vets are still going through.”

shanel@stripes.osd.mil

DREAMS FOR VETERANS

www.dreamfoundation.org/veterans

888-4DREAMS



The guest speaker at January’s VVA California state council meeting was Kristie Rain, part of the Dream Foundation. This foundation has just celebrated its 20th anniversary. Kristie talked about the dreams for veterans program. This program enables veterans to fulfill their final dreams. These may be basic need items (a working appliance or mobility scooter) to bedside reunions, final vacations with family, meetings with personal heroes or reconnecting with aspects of former military service. Dream recipients are U.S. military veterans 18 years of age or older with a life expectancy of 12 months or less. This is the only national adult wish granting organization for individuals and their families battling life-threatening illness. This foundation works with hundreds of volunteers and more than 600 hospices and healthcare organizations nationwide. They have fulfilled over 20,000 final dreams and have never turned down a qualified dream request.

Kristie told the story of “Joe”, a 90 year old Navy veteran suffering from end stage pancreatic cancer. He dreamed of seeing Ferdinand and other Beluga Whales at the SeaWorld San Diego. He had first seen the whales in the wild while serving as a Navy pilot in WWII. He was struck by their beauty and grace in the water. It had helped ground him emotionally to nature during the time of war. Joe was able to go to SeaWorld and meet a beluga named Ferdinand, touch and feed him. This had been a lifelong dream that came true.

CONNECT YOUR DOCS THROUGH VLER HEALTH



Dear eBenefits User:

Do you see a Non-VA health care provider? ”Connect Your Docs” through VLER Health (Virtual Lifetime Electronic Record) can help your VA and non-VA health care providers have the best possible picture of your current state of health. (VLER) Health is a program that shares

important parts of your Veteran health record between the Department of Veterans Affairs (VA) and participating private health care providers. This sharing of information enables your health care providers to access important information about your health history so they can provide you the best possible care.

This exchange occurs over a secure and confidential network known as the eHealth Exchange. This program is free and voluntary for Veterans, but requires your consent to participate. An easy way to do this from your home is through the VA eBenefits website. If you have not already, go to the eBenefits website and register. (It's free!)

- Participating in VLER Health may:
- Reduce the need for you to carry paper records between appointments
 - Give your provider immediate access to more health care information during a trip to the Emergency Room
 - Reduce your chances of having duplicate tests done
 - Increase your safety by providing a more complete health record, such as your medications and allergies
- As a Level 2-authenticated eBenefits user, signing up is fast and easy, just follow the steps below:
- <https://www.ebenefits.va.gov/ebenefits-portal/ebenefits.portal>
 - If you are already registered, click on the Log-In button in the upper right hand corner
 - Click on “Access my Documents”
 - Scroll down to “Health” and look for Manage My Authorizations and Preferences (VLER)
 - Click on “Manage My Authorizations and Preferences (VLER)”
 - Click: “Share your Electronic Health Information with Non-VA Health Care Providers”

If you want to use the mail:
You can send in your health care sharing preferences by either completing VA Form 10-0485 and Faxing, mailing or hand carrying it to your nearest VA Medical Center Release of Information Office (ROI).
If you would like more information about this program, watch for our “Connect Your Docs” sign and check out the VLER Health website www.va.gov/VLER

BLUE MOUNTAIN TRIBE



Blue Mountain Tribe plays original blues rock music about Indigenous Americans, War Veterans, People with Disabilities, Riding Harleys, songs about Inspiration, Love, Desire, Rage, Pain, the Blues.

Blue Mountain Tribe Mission: to "DO for the greater good" through musical performances and charitable works; with special emphasis on Indigenous American Talent, Indigenous Youth with disabilities; and Veterans & all "Wounded Warriors".

"All Our Relations" is here!
It's official, "All Our Relations" has been released and is available for preview, purchase, and download here on our website. It will also be available on iTunes, Amazon, and CDBaby in the coming days. Please support us by purchasing a copy of the album and signing up to our e-mail list. We hope you have a splendid day, and no matter what tribulations life slings at you, just keep on shining!
Their debut album, "All Our Relations" is available on iTunes and other music sources. Special Love & Respect to Mr. Rashid Lanie of South Africa for his gift of Hammond Organ on one of our songs & the beautiful Kirsten Leigh who added beautiful back up vocals on three tracks. Both these incredible artists were in the Studio at the time & their generosity & kindness is without rival... WE LOVE YOU BOTH!

One track may be of interest to you all:

Vietnam Veteran Blues

I'm gonna tell you all a story
About the men from Vietnam

VIETNAM HELICOPTER PILOT WISDOM

- If You Have Not Been There And Done That, You Probably Will Not Understand A Lot Of These
1. Once you are in the fight, it is way too late to wonder if this is a good idea..
 2. It is a fact that helicopter tail rotors are instinctively drawn toward trees, stumps, rocks, etc. While it may be possible to ward off this natural event some of the time, it cannot, despite the best efforts of the crew, always be prevented. It's just what they do..
 3. NEVER get into a fight without more ammunition than the other guy.
 4. The engine RPM and the rotor RPM must BOTH be kept in the GREEN. Failure to heed this commandment can affect the morale of the crew.
 5. Cover your Buddy, so he can be around to cover for you.
 6. Decisions made by someone above you in the chain-of-command will seldom be in your best interest..
 7. The terms Protective Armor and Helicopter are mutually exclusive.
 8. Sometimes, being good and lucky is still not enough.
 9. "Chicken Plates" are not something you order in a restaurant. (Armored vests worn by flight crews).
 10. If everything is as clear as a bell and everything is going exactly as planned, you're about to be surprised.
 11. Loud, sudden noises in a helicopter WILL get your undivided attention.
 12. The BSR (Bang Stare Red) Theory states that the louder the sudden bang in the helicopter, the quicker your eyes will be drawn to the gauges. The longer you stare at the gauges the less time it takes them to move from green to red.
 13. No matter what you do, 'the bullet with your name on it' will get you. So, too, can the ones addressed "To Whom It May Concern".
 14. If the rear echelon troops are really happy, the front line troops probably do not have what they need.
 15. If you are wearing body armor, the bullets will probably miss that part.
 16. Happiness is a belt-fed weapon.
 17. Having all your body parts intact and functioning at the end of the day is a + and beats the alternative.
 18. If you are allergic to lead, it is best to avoid a war zone.
 19. It is a bad thing to run out of airspeed, altitude and ideas all at the same time.
 20. Hot garrison chow is better than hot C-rations which, in turn, is better than cold C-rations which, in turn, is better than no food at all. All of these however, are preferable to cold rice balls, even if they do have the little pieces of fish in them.
 21. Everybody's a hero...On the ground...In the club...After the fourth drink.
 22. A free fire zone has nothing to do with economics.
 23. The further you fly toward the mountains and increase altitude, the louder the strange engine noises become.
 24. Medals are OK but having your body and all your friends in one piece at the end of the day is better.
 25. Being shot hurts and it can ruin your whole day.
 26. "Pucker Factor" is the formal name of the equation that states the more hairy the situation is, the more of the seat cushion will be sucked up your ass. It can be expressed in its mathematical formula of S (suction) + H (height above ground) + I (interest in staying alive) + T (# of tracers coming your way)
 27. Thus the term 'SHIT!' can also be used to denote a situation where high Pucker Factor is being encountered.
 28. Thousands of Vietnam Veterans earned medals for bravery every day. A few were even awarded.
 29. Running out of pedal, fore or aft cyclic, or collective are all bad ideas. Any combination of these can be deadly.
 30. There is only one rule in war: When you win, you get to make up the rules.
 31. C-4 can make a dull day fun.
 32. There is no such thing as a fair fight - only ones where you win or lose.
 33. If you win the battle you are entitled to the spoils. If you lose you don't care.
 34. Nobody cares what you did yesterday or what you are going to do tomorrow. What is important is what you are doing - NOW - to solve our problem.
 35. Always make sure someone has a P-38. Uh, that's a can opener for those of you who aren't military.
 36. Prayer may not help...but it can't hurt.
 37. Flying is better than walking. Walking is better than running. Running is better than crawling. All of these however, are better than extraction by Medivac, even if it is technically, a form of flying.
 38. Do not fear the enemy, for your enemy can only take your life. It is far better that you fear the media, for they will steal your HONOUR.
 39. A grunt is the true reason for the existence of the helicopter. Every helicopter flying in Vietnam had one real purpose: To help the grunt. It is unfortunate that many helicopters never had the opportunity to fulfill their one true mission in life, simply because someone forgot this fact.
 40. IF EVERYONE DOES NOT COME HOME, NONE OF THE REST OF US CAN EVERFULLY COME HOME EITHER!!!
- IF YOU HAVE NOT BEEN THERE AND DONE THAT, YOU PROBABLY WILL NOT UNDERSTAND A LOT OF THESE...

Yeah, yeah, yeah
I'm said I gonna tell you all a story
About the men from Vietnam
Yeah, yeah, yeah
Yeah, they came home to this country
Lord, lord, some people didn't even give a damn
Yeah, yeah, yeah
Yeah, well now welcome home my brothers
We love you, yes we do
We know your heart is hurting
We know what they put you through
So welcome home my brothers
Welcome home
Welcome home from Vietnam
Yeah, yeah, yeah
Yeah, we salute you my brother, yeah yeah
All across this U. S. land
Yeah yeah yeah

Well they walk with pride and honor
They stand out in a crowd
They said "I served in Vietnam"
And, brother, you know I'm proud!
So welcome home my brothers
Welcome home
Welcome home from Vietnam

Yeah, yeah, yeah
Yeah, we salute you yes my brothers
All across this U. S. land
Yeah, yeah, yeah, yeah, yeah
Oh yeah

DISCHARGE UPGRADES

If you know any VVA members who have ever filed an application with the Army Board of Corrections for Military Records (ABCMR) and were denied, please send me their names ASAP.

Jim Vale, Director
Veterans Benefits Program
Vietnam Veterans of America
Phone: (240) 485-1602 - Email: jvale@vva.org

PETITION MOH FOR DORIE MILLER - PEARL HARBOR SURVIVOR

Well we are going to try again! We are going to send a petition to President Obama and ask that Dorie Miller be

awarded his Medal of Honor for actions at Pearl Harbor December 7, 1942 is up. The link below will get you to the We The people Website at White House.gov. Look for award Dorie Miller his Medal of Honor.

We attempted to get 100,000 signatures last fall, with no luck. Please share this email with everyone that you now and ask that thy share with everyone tey know.

This is a miscarriage of history that must be corrected.

Until we get 150 signatures the petition will not be on the public list. The link to sign the petition is: <http://wh.gov/iT5T1>

Please share this with all of the people with whom you have shared the information.

Thank you

James Maddox
VVA National Service Officer
Chapter 446
Pasadena, CA 91109

GENERATIONS OF VETERANS

As a student of American history I have been wanting to write this for quite some time. America has had, and still has, many great generations who have made this country what it is. Starting with the first colonists. They started with nothing and persevered. Without the men and women who fought during the Revolutionary War for independence this country would not be here. Then there's the Civil War, and the Industrial Revolution. The veterans who answered the calls during WWI and the Korean War also helped to shape our country's heritage. I know of many South Koreans who are especially grateful. Vietnam and OIF/OEF veterans continue to add to the legacy of the shaping of our country's history.

I also want to mention three other groups of people who have helped to make America great, in spite of how our government treated them: the Native Americans, the African Americans, and the Japanese Americans. Even though they had their land and freedoms taken from them, many chose, and still choose, to raise their right hands to swear to support and defend the Constitution of the United States. And this in the uniform of the United States Military. Many went above and beyond the call of duty.

Thank you WWII veterans for what you did, and continue to do to make America great. Just remember that there were many generations who came before us to start this greatness. And I am confident that many more will come.

Chuck Berberian
Chapter 933

WE CANNOT FORGET HISTORY

SISTER CITY RELATIONSHIP WITH VIETNAMESE CITY IS VIEWED BY MANY THROUGH A LENS OF WAR, HUMAN RIGHTS ISSUES.

By David Downey Staff Writer

Establishing a sister city relationship with a community in Vietnam is more than extending a hand of friendship to a foreign city's residents, to some Vietnamese Americans. For them, it is an endorsement of a government with a weak record on human rights – and the ruthless former regime they fled.

Those emotional sentiments are expected to be on full display today as hundreds of Vietnamese Americans from Orange County and Inland Southern California gather at Riverside City Hall.

Although they are a little late to the game – the Riverside City Council voted in March to make the Vietnamese city of Can Tho its ninth sister city – they say they intend to demonstrate their disfavor with a municipal decision that deeply hurts.

“People are saying, ‘Forty years have passed. Let’s forget about it,’ ” said Phat Bui, 56, a Garden Grove councilman and one of the protest organizers.

But it’s not that simple, Bui said in a telephone interview Wednesday.

“We object to the sister city relationship between Riverside – or any U. S. city – to any city in Vietnam for the following reasons: The current Vietnam government is a very brutal communist regime that has no respect for human rights and that severely restricts freedom of expression and freedom of the press,” he said.

Bui also noted many people were killed attempting to flee Vietnam during and after the fall of Saigon in April 1975.

“We cannot forget the history,” said Van Hoang, a 51-year-old Moreno Valley man who escaped Vietnam on

a boat in 1975. “We also cannot tolerate the present.”

GOOD INTENTIONS

They have heard the arguments in favor of engaging a city in Vietnam through a sister city relationship. They know Riverside officials have stated their intention is to reach out to its residents and befriend them.

“I believe that their intention is good,” Hoang said.

But Bui said he believes a sister city relationship is more than that.

“It’s a relationship between the two city governments, not between the residents,” Bui said, adding that it appears to endorse the Vietnamese communist government.

Bui also suggested it is a mistake to establish a relationship with the municipal government of a city where, he said, there is much human trafficking.

“It allows large-scale human trafficking for sex and for labor exploitation,” he said. “They turn their back away. They do not prosecute those people.”

Bui and Hoang both view the sister city decision through the lenses of their families’ escapes.

‘ALL OF US HAVE OUR STORY’

“I remember it vividly,” Hoang said. “I remember the chaos. I remember the journey that we had to get up in the middle of the night for, to leave our country. I remember the life-threatening, dangerous trip we had to take.”

His family purchased a small boat and about 100 relatives crowded onto it, pushing away from shore as Saigon fell, Hoang said.

Then a U. S. cargo ship scooped them up and other refugees, transporting them to Guam. From there, they were flown to Camp Pendleton. He was 11 years old.

“All of us have our own story from 1975,” Hoang said.

And Bui’s story is similar. His family pushed off too, in a hastilybought fishing boat – feeling abandoned by the United States – before fortunately stumbling upon a U. S. ship.

“I realized that the American government abandoned the war, but did not abandon the people,” Bui said. “They tried to rescue as many as they could. And that touched me a great deal.”

ANALOGOUS TO CUBA

But not all Vietnamese Americans view relationships

with Vietnamese cities through the lenses of the fall of Saigon.

“The Vietnamese American community is multigeneration now,” said David Biggs, a professor of history and public policy at UC Riverside. “And it differs from one city to another.”

Many younger Vietnamese Americans view engagement with Vietnam more favorably than do their parents, Biggs said.

While reaction has been negative in Orange County, he said, relationships between San Francisco Bay Area communities and Vietnamese cities are generally looked upon in a more favorable light.

Biggs cited as an example the sister city relationship between Oakland and the Vietnamese city of Da Nang, both of which have major ports.

Biggs said the negative reaction from older Vietnamese Americans is not unlike that of older Cuban Americans’ reaction to another recent development.

“It’s analogous to normalization with Cuba,” he said.

Contact The Writer:

951-368-9699 or ddowney@pe.com

RIVERSIDE’S VIETNAM TIE RILES O. C. CITIES WESTMINSTER LETTER URGES SEVERING SISTER CITY BOND. GARDEN GROVE LIKELY TO JOIN PRO-TEST.

By Chris Haire, Staff Writer

Westminster and Garden Grove, the two cities that make up the largest portion of Little Saigon, have a stern message for Riverside: Your new sister city relationship with Can Tho, Vietnam, is inappropriate and should be dissolved.

The Westminster City Council unanimously directed staff Wednesday to write a letter to Riverside, urging it to rescind its relationship with Can Tho, which the two cities formalized in a ceremony last week. The Garden Grove City Council, meanwhile, decided to discuss writing a similar letter at its next meeting, which is scheduled for Feb. 10.

Orange County residents also plan to protest at Riverside City Hall today, according to an event organizer.



Vietnam Veterans of America, Inc.

Region 8/9 Pre-Convention Conference

June 27, 2015

The Silver Legacy Resort Casino ~ Reno, NV.

Announcement

- **VVA Registration Fee** _____ **\$45.00**
- **AVVA and/or spouses Fee** _____ **\$40.00**
- **Children 16 & under** _____ **Free (no meal)**
- **Luncheon Only** _____ **\$30.00**

Add \$5.00 fee for registration on the same day as the conference begins.

**REGISTRATION FEE INCLUDES:
CONFERENCE HANDBOOK & A BUFFET
LUNCH**

For hotel reservations:



Registrations received after May 26, 2015 will be accepted on a space and rate availability basis.

Reservation cut-off date: May 26, 2015

This is a firm cut-off date. Get your room early!

"The communist government in Vietnam still violates human rights," said Mayor Tri Ta, who will sign the Westminster letter with his four council colleagues. "There is no freedom in Vietnam, so that relationship is not appropriate at this time."

The Riverside City Council agreed in March 2014, on a 4-3 vote, to enter into a sister city relationship with Can Tho to cultivate cultural, economic and educational exchanges between them.

Vietnam, though, has a horrendous human-rights record – with Human Rights Watch saying the that communist government "suppresses virtually all forms of political dissent, using a broad array of repressive measures."

Many in the Little Saigon area of Westminster and Garden Grove, the largest concentration of Vietnamese outside of Southeast Asia, steadfastly refuse to acknowledge the legitimacy of Vietnam's government and protest against anyone or any organization that tries to foster a relationship with Vietnam.

"When a city does something with Vietnam, they should ask the opinion of the Vietnamese community," said Neil Nguyen, president of the Vietnamese American Federation of Southern California. "We need the regime in Vietnam to know they must listen to the people. Until they establish freedoms, (Riverside) should not do business with Can Tho."

But the Westminster letter to Riverside, as well as the potential letter from Garden Grove, may be more symbolic than effectual because the Riverside council is unlikely to let other cities dictate its policy decisions.

"I understand that (Westminster) has a different constituency from us," said Riverside Mayor William "Rusty" Bailey. "But we made this decision 10 months ago. Our international goals are to develop people-to-people and city-to-city relationships."

Riverside Councilman Mike Gardner said Wednesday that he's gotten a few emails from Orange County residents explaining their objections, but he still believes the friendship with Can Tho is a positive step.

"I truly do understand why they might think this is not something appropriate," Gardner said, but, "I, at least, am not inclined to support Riverside withdrawing the gesture we have made."

He and Riverside resident K. R. Zack Earp, a former Marine who served in Vietnam and supports the Can Tho relationship, both said those with concerns are welcome to exercise their free speech rights. But, Earp added, "Coming and protesting in our city, who they don't govern, I don't quite understand that."

Riverside officials and residents started discussing the sister city proposal in 2012, Earp said.

"Now I think they need to respect our decisions," he said. "I wonder how they would like for us to go down to them and say, 'You need to change this ordinance or that position.'"

VIETNAM: TIMELINE OF KEY

HISTORICAL EVENTS

1858: French colonial rule of region. 1945: Colonial French forces battle 1964-65: U. S. says North 1975:

North Vietnam's army invades the Viet Minh. Viet Minh seizes power. Vietnam fires on two U. S. Navy South. Ho Chi Minh declares Vietnam's ships. More than 200,000 U. S. independence. troops are sent in response.

1954: France agrees to peace Vietnam 1966-67: hit U. S 500. troops, 000 in. South talks in Geneva, where Vietnam is divided into North and South. 1968: Tet Offensive

deals severe 1957: Communist insurgency blows to U. S. military. More than grips South. 500 civilians die in the U. S. massacre at My Lai.

1959-1962: North Vietnamese 1970-73: Paris Peace Talks result sends forces small cross group into South of military. U.S. U in. S a. cease pullout -fire. — and eventual 1976: Socialist Republic of Vietnam declared. advisers.

Number grows over Saigon becomes Ho Chi Minh City. Hundreds 1930: Ho Chi Minh creates next few years. of thousands of people flee the country. Indochinese Communist Party.

1800's 1900's 2000's

1992-2000: New constitution 2001: U. S., Vietnam sign trade pact. 2008-10: Government bans blogging about allows limited economic controversial topics. High-profile dissentfreedom, but Communist Party 2006: Top leaders replaced by younger ers are jailed. Journalists are dismissed or continues to control nation. officials after embezzlement scandal. prosecuted over coverage of corruption. Government intermittently cracks down on freedom of 2012: Vietnam passes Brazil as world's speech. Scandals grip largest exporter of coffee. government-run businesses.

1994: U. S. ends trade embargo. 2013: Law bans online discussion of government issues.

1995: Vietnam, U.S. revive diplomatic relations. 2000: President Bill Clinton visits, 2014: U. S. discusses timetable for ending promising to clear land mines 2007: President Nguyen Minh Triet embargo on arms sales to Vietnam. remaining from war. visits U. S.



Region 8/9 Pre-Convention Conference

June 26-28, 2015

Silver Legacy Resort & Casino

Reno, NV.

SAVE THE DATE ~ June 26 - 28, 2015

SAVE THE PLACE ~



SAVE THE TIME

June 25-30, 2015 ~ ROOM RATES

Room Type:

- Single/Double Midweek Rate (Sun-Thurs) \$65.00
- Single/Double Weekend Rate (Fri-Sat) \$95.00

- VVA Registration Fee - \$45.00
- AVVA and/or spouses Fee - \$40.00
- Children 16 & under - Free (no meal)
- Luncheon Only - \$35.00

Add \$5 for registration the day of the conference

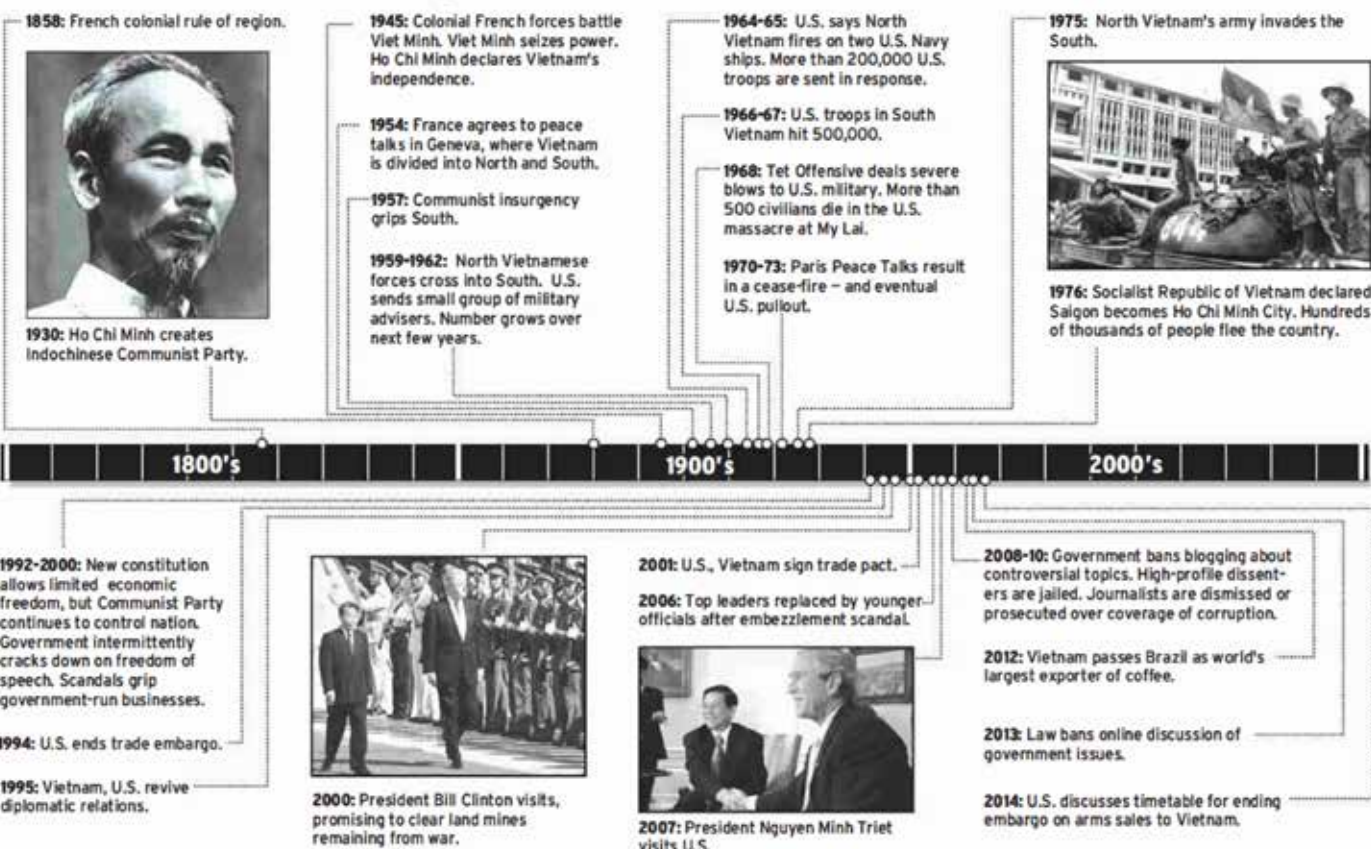
REGISTRATION FEE INCLUDES A
BUFFET LUNCH & CONFERENCE
HANDBOOK

The Reno/Tahoe International Airport (RNO) is only 4 miles from the resort and takes only 12-15 minutes to arrive at the hotel.

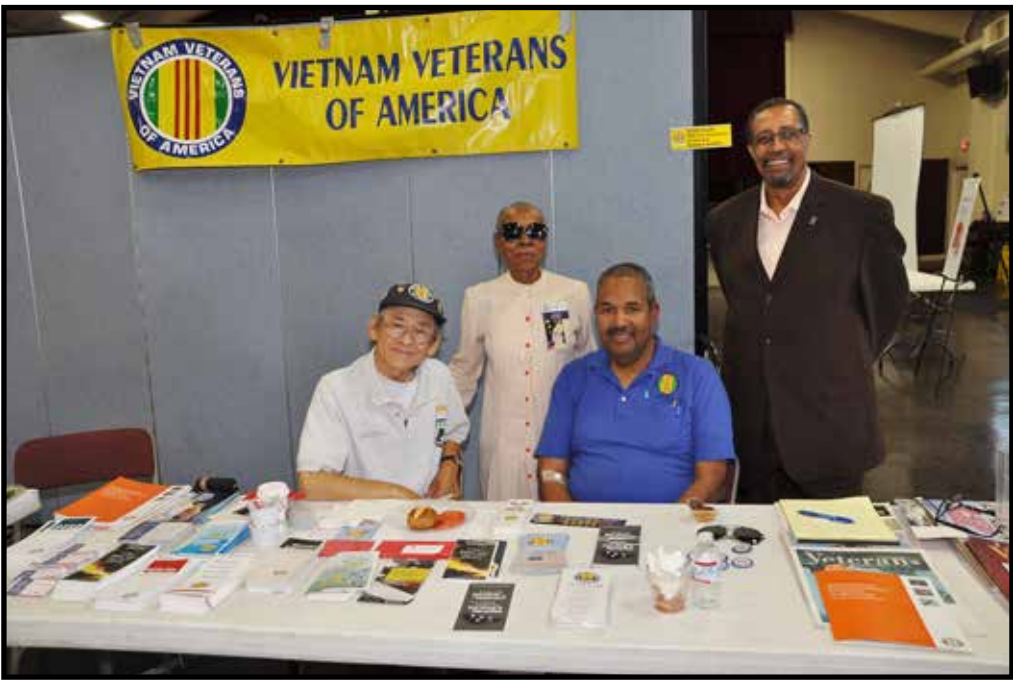
Hotel Airport shuttle for arrival and departure

More information will be sent at a later date!

Vietnam: Timeline of key historical events



STAFF GRAPHIC



PROSTATE CANCER AND AGENT ORANGE

(Photos: Left: VVA leaders, Jerry Yamamoto (top left front) and James Maddox (top photo, left right) at this year's screening in L.A.)

Veterans who develop prostate cancer and were exposed to Agent Orange or other herbicides during military service do not have to prove a connection between their prostate cancer and service to be eligible to receive VA health care and disability compensation.

ABOUT PROSTATE CANCER

Prostate cancer is cancer of the prostate, a small gland in the male reproductive system.

Some men may have urinary problems, but some men don't have symptoms early on. If you have any health concerns, talk with your health care provider.

The greatest risk factor for prostate cancer is increasing age. Other risk factors include having a father or brother with the disease and being African American.

Prostate cancer is often first detected with a PSA (prostate-specific antigen) blood test or digital rectal exam. Talk with your health care provider about your risk and the pros and cons of screening.

Visit Medline Plus to learn about treatment for prostate cancer, the latest medical research, and more from the National Institutes of Health.

REDUCE YOUR RISK FOR CANCERS AND OTHER DISEASES

Here's how: Follow a healthy diet. Don't have more than 2 alcoholic drinks a day. Get help to quit smoking. Learn more about healthy living.

VA BENEFITS FOR PROSTATE CANCER

Veterans with prostate cancer who were exposed to herbicides during service may be eligible for disability compensation and health care.

Veterans who served in Vietnam, the Korean demilitarized zone or another area where Agent Orange was sprayed may be eligible for a free Agent Orange registry health exam.

Surviving spouses, dependent children and dependent parents of Veterans who were exposed to herbicides during military service and died as the result of prostate cancer may be eligible for survivors' benefits.

- See more at:

http://www.publichealth.va.gov/exposures/agentorange/conditions/prostate_cancer.asp#sthash.ZRTPtoD3.dpuf



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VVA CA State Council contact info inside - page 2

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To:

In this issue:

- Activities-Events/Photos
 - Legislative News
 - Useful Veteran Information
 - Region 8/9 Pre Convention Info
- And more...

VVA & CSC Meeting Dates & Events

CSC Full Council - April 24-26, 2015, Fresno, CA
Region 8-9 Conference, June 2015, see page 11
National Convention, July 21-25, 2015, Springfield, IL
CSC Full Council - August 7-9, 2015, Fresno, CA
CSC Full Council - October 23-25, 2015, Fresno, CA