



The California Zephyr®

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A QUARTERLY NEWSLETTER

VOLUME 11 - WINTER 2006

IN THIS ISSUE:

- PTSD News & Info
- Legislative News
- Veterans Advocacy Agenda
- Reader's Opinions & Stories
- And more...

CSC MEETING DATES

JANUARY 12-14, 2007, CSC MEETING, FRESNO, CA
MARCH 9-10, 2007, CSC MEETING, SACRAMENTO, CA
JUNE 8-10, 2007, CSC MEETING, FRESNO, CA



FROM THE PRESIDENT:

VETERANS DAY WEEKEND

I had a busy Veterans Day weekend this year. I was invited to attend the unveiling of the mural honoring the Veterans of World War II. The chair of the committee putting this event on was Daniel Kelley, of Visalia. I commend him for his hard work and dedication to this project. The people of Visalia put a lot of pride in their murals; which to them have the same distinction as memorials do to others. I owe a great deal of gratitude to Dan Kelley; without his invitation I would not have had the privilege of meeting him and his honored guests, including the artist of the mural, Glen Hill, who worked for Disney Studios for twenty three years. I would also not have learned about what it means to the veterans and the residents of the area to have their murals, one for the Vietnam veterans, one for the Korean War veterans and now one for the WW II veterans. Other dignitaries at this event included two Medal of Honor recipients, John Finn and Alejandro Ruiz. The nephew of a Medal of Honor recipient Kazuo Otani was there in honor of his uncle. John Finn was the first person to earn a Medal of Honor in WW II for actions in the attack on Pearl Harbor. Alejandro Ruiz is the oldest living recipient at age 97. Two POW's from WW II, Ben Hagans and Gordon Redtfeldt, attended and were honored as special guests. The property for the project was donated by Johnny George, and was a success in part because of donors like him and Quest Asset Management & Financial Services, the largest financial contributor.

Paulette Carlson preformed at the unveiling and at the earlier program at the Fox Theater in downtown. She also wrote a new song in honor of the mural and the veterans. In the middle of this activity I drove up to Fresno to join with Chapter 933 in their Veterans Day Parade. Thanks to Steve Doak for his invitation, and the golf cart so I could get around the parade circuit with out having to walk! I remarked that I had not seen so many people on the street during a parade wear hats, shirts or other identification stating they were veterans. I hope this is a trend that stays with us.

On Sunday I attended the Sacramento Veterans Day Parade. Mary Lou McNeill was the parade coordinator and she did an excellent job. The parade Grand Marshall was Major General William H. Wade II, Adjutant of the California National Guard. Leo Burke read a proclamation from Governor Schwarzenegger and Chapter 500 President Ted Adams presented a Certificate to Jim Hilderbrand, a survivor of the Bataan Death March. Diana Titus sang the National Anthem; she is a former USO performer. This was my first time on the reviewing stand so I had a new look at a parade. The announcer for the program and parade was Michelle Shockley, a DJ on 96.9 FM radio in Sacramento. Michelle is also a veteran of the Gulf War. Honored guests lead the parade riding in Hummers escorted by the local veteran motorcycle organizations, Vietnam Veterans/

Legacy MC, Marine Corps MC, The American Legion Dist. 6 MC, Rebels With A Cause, and the Patriot Guard. I was honored to be riding with Brian O'Neil, M. D. of the U.S. Department of Veterans Affairs. This was a great opportunity for me since anyone who has sat next to me knows I can talk your ear off one on one. I had a nice chat with Dr. O'Neil and I think we can work with him to resolve a lot of our issues in the Northern California health care area. One thing he commented on is that in the coming year we, the veterans, will need to work hard to get funding for the VA. This last year he said was good for the hospital systems since it was an election year. The off years are the hardest ones. My hat goes off the Chapter 500 for this event.

PRESIDENTS REPORT NOVEMBER

Since my last report I have attended a National Board Meeting, Region 9 meeting, and a CSC meeting. At this last National Board meeting I attended the State Presidents meeting, the constitution committee meeting and the women veterans meeting. At the presidents meeting I was appointed to chair the Presidents Political Action Committee. This is a committee that is tasked with presenting questions to the candidates for national office to be published in *The Veteran* and asking questions at the forum at the convention. We held a workshop on running a meeting, part of this I used for our workshop on motions.

Some of the highlights of the board meeting are: a year long celebration of the 25th anniversary of the "Wall" with a march on Veterans Day. South Dakota held a memorial dedication in Pierre 30,000 people attended, the population of Pierre is about 14,000. The National Secretary site on the web will be replacing monthly mailings. This should save a lot of money in mailing fees and get the information to the chapters in a more timely manor. There will be different levels of security with access codes and passwords for this. This is actually something we have been talking about for years and it seems to be finally coming to us.

General William Matz, MG (Ret) spoke on the Veterans Disability Benefits Commission. He reported that Rick Weidman and Bernie Edelman are representing us well. The commission report is due out in October of 2007. Comments and questions regarding gender specific problems as well as reports from the IOM regarding PTSD treatment and diagnoses were brought up. The commission is also looking into character of discharge for receiving benefits.

I was also appointed to be a member of the National Disciplinary Committee. The National board passed a new policy regarding chapters in suspension for not filing finance reports. The end results of some of these actions will be terminating some of the chapters on the books that are no longer functioning as VVA chapters.

There are a lot of things going on at all levels of

VVA. We need to keep our contact with board members and officers, but also the committees and chairs. All members should be able to contact someone on the state committees for answers to questions. The members of state committees should, at the same time, be in contact with the National committees to be able to answer these questions.

One of the fun functions I attended was Chapter 951's Poker Run. It was a great day riding around Clear Lake. They had a great feast complete with a band and a raffle. My hat goes off to the members and the volunteers who helped put it together. This event gave Richard Jones and I a chance to enjoy the day and talk to some of the members of the chapter. These are the types of events that can really benefit our members and all can have fun participating.

We really do have a lot going on in California, ask questions and get involved.

Last meeting I invited Secretary Johnson to speak to us, I did not follow up and confirm that he would be attending and he had another commitment. This coming meeting I told him I would keep in communication with him, and he should be there for the Saturday portion of our meeting.

FROM THE 1ST VICE PRESIDENT

First let me wish each of you and your families a very safe and wonderful Holiday. Most of all be kind to yourself.

I have been very busy attending many meetings representing CSC. First was the California State Commanders Veterans Council Meeting, October 21, in Fresno. The two main subjects covered were (1) a presentation by Secretary Johnson, California Department Veterans Affairs (CDVA), and (2) a legislative report by Bill Manes, Government Affairs Chairman, and Pete Conaty our Veterans Lobbyist.

The next weekend found me back in Fresno for CSC Meeting, October 27th -29th.

Henry Iasiello and I attended a PACNET VISN 21 MAC meeting held at Mare Island in Vallejo. The topics discussed were CDVA Outreach Initiative and an update on CARES Initiative including Livermore Campus status. We participated in a lengthy discussion of great interest on mental health services in Northern California. Henry and I felt our input was very well received. VISN 21 is the largest in the nation, geographically covering the Oregon border to Fresno over to Reno, Nevada and out to Hawaii and Guam, the American Samoa's and the Philippines.

On November 21st I attended the VA/DoD Mental Health Task Force Testimonial Hearing held in Burlingame, CA and slated for the greater San Francisco Bay Area. The panel was formed in late spring at the urging of Senators Joe Lieber-

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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.

You Save - We Benefit!
1. Shop online at hundreds of popular stores at ClubShop.com
2. You earn Reward Points and Cash Back when you shop
3. We receive a donation from your purchases

<http://www.clubshop.com/cgi-bin/rd/4,,refid=3711189>

man, D-Conn., and Barbara Boxer, D-Calif., after the San Diego Union-Tribune published stories detailing serious mental health issues among Marines at Camp Pendleton and service members nationwide.

The panel was advised that scant resources, poor training and staff burnout are frustrating the military's efforts to treat mental illness just

as troops and their families need such services the most. That was just a sliver of the sobering testimony given to the Pentagon's Task Force on Mental Health, which has started to gather information for a report due to Congress next year..

"The task force has a unique opportunity to help the United States become a model for how mental health care should be done," said Boxer,

who attended a meeting in San Diego. "This isn't about whether you are for or against this war. If we do this right, we'll have a much stronger military."

An increasing number of troops on the front lines are using mental health services, with 40 percent seeking such help last year, com-

pared with 29 percent in 2004, according to figures from the Defense Department.

At least 33 percent of service members returning from Iraq and Afghanistan are diagnosed with mental illness, the Pentagon and several independent studies have estimated. That percentage could increase because multiple combat tours have become the norm. Research has shown that repeated deployments raise a person’s risk of suffering mental conditions such as post-traumatic stress disorder. There is an overwhelming demand that meets a lack of access to quality mental health care.

The shortage of mental health caregivers and their relative inexperience are making it impossible to properly treat service members before long lasting mental problems take root. “By the time these people get to the (Department of Veterans Affairs), they have chronic problems. We need to get to them when they are still in the service,” stated Cmdr. Mark Russell a Navy Psychologist.

Other speakers testified that even treatment for post-traumatic stress disorder, the best-known mental condition associated with combat duty, is embarrassingly lacking. Nearly four years into the Iraq war, 90 percent of the 133 mental health providers surveyed informally didn’t know how to treat PTSD because they weren’t trained to do so.

The burnout rate among mental health professionals is soaring. Not having enough personnel means more work for the remaining staff members. The result is what the panel calls “compassion fatigue and burnout.”

Poor staffing for mental health services at military hospitals also wears on service members’ families.

Saturday, December 2nd will find Richard Jones and me at a meeting for Commanders of veterans organization with LTG Green, Inspector General for the US Army and LTC Lautner, Commander of the US Recruiting Battalion, Sacramento.

2ND VICE PRESIDENT REPORT

October 28, 2006
By Dick Southern

Since the last California State Council meeting in August, I have been active in my chapter chairing the committee that had a membership outreach booth at a local Chamber of Commerce event. We got six new members that day. I worked a 60’s reunion that Chapter 391 catered for the reunion committee and also planned one of our dinner/meetings.

I attended the VVA National Board of Directors meeting in Silver Spring, MD, and attended the Membership Affairs, Public Affairs, Veterans Benefits and Veterans Health committees as a sitting member. The new VVA Web site will be up and running soon and there will be new membership policies and procedures in place soon dealing with inactive chapters. The Veterans Committee is firming up our MOU with the National Association of County Service Officers and verifying that VVA Service Reps are still on the job. The Veterans Health committee is monitoring the VA Health Care System and networking with Government Affairs committee to advocate for legislation to improve veteran’s health care.

I completed the planning for the CSC meeting this weekend in a new hotel. I am also just finishing up on the planning for the Region 9 Meeting in Laughlin, NV, on November 3-4, 2006.

In amongst all of this, I managed a long weekend on the Coast, four days in Capitola by the Sea was a good get away. I also got to spend a weekend with Henry Iasiello, Northern District Director, at his home in Willits. I also attended a two day PTSD retreat put on by Fr. Phil, our VVA National Chaplain, in Menlo Park.

I continue to moderate the VVA Talk List, the Membership Chairs Talk List, the State Presidents Talk List and the Government Affairs Talk List, and E-mail information to YOU.

MEETING PLANNER’S REPORT

October 29, 2006
by Dick Southern

In the last issue of the Zephyr, I wrote about our new hotel for our State Council meetings, the Holiday Inn Fresno Airport in Fresno. I wrote about many of their amenities and features and I think they lived up to, and more than met our requirements. The sleeping rooms were great with some neat features. Quick and efficient check in, bottled water in your room, a complimentary drink of your choice at the bar for Priority Club members, free wireless internet connection in all of the rooms and in the conference area. The General meeting room was very spacious and well set up with tables provided for display of the collectibles and distribution of materials. The meeting rooms were spacious and set up, and all three of the rooms we used were “refreshed” during lunch and reset for us each morning we were there. It was good to see that all of the committees were able to have a room to take care of their business without having to share their space with others. It is safe to say that we utilized all the meeting area and did not feel crowded at all.

We will be going back to the Holiday Inn Fresno Airport for the next CSC meeting for the weekend of January 12-14, 2007. You will want to call 559-252-3611 to make reservations with the hotel. You will have to use our registration code of VVA to get the group rate. When you have your reservation done for the hotel, you can go to the CSC web site, www.vvacalsc.com, and register for the meeting by clicking on the registration link on the front page.

Looking ahead, we will be having a CSC and an advocacy workshop combined in Sacramento March 9-13, 2007. The details are still being worked out, but will be available at the January meeting and E-mailed out soon after that.

In June, we will have a combined CSC meeting and the Region 9 pre-convention conference. It is scheduled for June 8-10, 2007 at the Holiday Inn in Fresno. This meeting will be used to get the State and the Region ready for the VVA National Convention in July. More details later on this.

It looks like it will be an exciting year in 2007 and I will keep you informed on dates and places. Remember to join the Priority Club at the Holiday Inn in January, that is if you haven’t done so already

GOVERNMENT

AFFAIRS

LEGISLATIVE

REPORT

November 2006

An update of some California State veteran legislation:

The Governor approved bill AB 2586 sponsored by Ms. Nichole Para, Assembly District 30 in the Bakersfield area. This bill authorizes state judges to place offenders on probation and send them to treatment programs when it is determined that the individual is a veteran suffering from PTSD or a similar problem. The same bill was vetoed last year. However, with a greater combined effort made by various veteran organizations, the Governor signed the bill into law. A similar law already exists, but only identifies Vietnam veterans eligibility. Now it is open to all veterans.

Doug LaMalfa, Assembly District 2, in the Redding area, supports AB 2002 which will encourage the counties to put up signs on highways stating where we honor our veterans, and AB 2740 which will encourage school districts to make school facilities available to veteran organizations for programs on Veterans Day.

Joe Nation, from San Rafael, Assembly District 6, sponsored AB 2844, Mental Health: veterans eligibility for services. Local mental health services provided by counties must provide services for seriously emotionally disturbed children and adolescents, and adults and older adults who have serious mental disorder, including veterans in need of mental health services who are not eligible for federal health care coverage. Existing law requires the county to refer the veteran to the county veterans service officer to de-

TENTATIVE AGENDA: ADVOCACY WORKSHOP		
Day/Date	Topic/Skill Set	Leads
Friday, March 9 7:00 P.M.	CSC Government Affairs Meeting	
Saturday March 10 Time TBD	CA State Council Meeting – Refine and approve VVA State Legislative Agenda	
Saturday, March 10 6:30 P.M.	You're in the Workshop Now' Dinner Meet in lobby - Hosts: Ken Holybee/Carl Jensen	
Sunday, March 11 8:00 A.M. 8:30 – 9:00 A.M.	Coffee etc Welcome & WorkShop Overview ~ The importance of follow-up ~ 'Training the Trainers' ~ The importance of advocacy ~ The importance of relationships	John Miterko, Carl, Jerry Yamamoto, Tom Insley
9:00 – 9:30 A.M.	Federal Agencies That Serve Veterans ~ VA (VHA, VBA), DoL, DoD	Rick
9:30 – 10:15 A.M.	The Basics of Advocacy 'Getting to Know All About You'	Special Guest
10:15 – 10:30 A.M. 10:30 – 11:15 A.M.	Smoke 'em if you got 'em The Federal Legislative Process ~ How Bills Become Law ~ How to Influence the Legislative Debate ~ The Fine Art of Schmoozing	Rick
11:15 – 11:30 11:30 – 12:30 P.M.	Break The State Legislative Processes ~ Role of State Agencies in Assisting Vets ~ The Texas & Maryland Experiences	John Miterko/Tom Insley/Jerry Yamamoto
12:30 – 1:30 P.M.	Lunch on your own	
1:30 – 2:15 P.M.	Advanced Individual Training How to Organize a State Veterans' Caucus	Tom Insley
2:15 – 3:00 p.m.	Legislative Process in California	Bob Mulholland (Pete Conety)
3:00 – 3:20 P.M. 3:20 – 4:15 P.M.	Smoke 'em if you got 'em Role Playing I: Role Playing (Acting Out): What NOT to Do ~ How to Alienate Those You Want to Influence ~ How to Lose the Focus of Your Visit How to Win Friends	
4:15 – 4:30 PM 4:30 – 5:00	Break Role Playing II: What to Do! ~ Focusing on an Issue ~ The Importance of Follow-Up	All
5:00 – 5:15 P.M.	Summing Up	Rick
	Dinner on your own	
7:15 – 8:00 P.M.	Media Relations ~ Role of the Press ~ How to Generate Coverage ~ How to Write a Press Release & Press Advisory ~ How to Hold a Press Conference	TBA
8:00 – 8:15 P.M.	Writing a Press Release & Staging a Press Conference + Critique	TBA
Monday, 12 March 7:30 – 8:00 A.M. 8:00 – 8:35 A.M. 8:35 A.M. 9:00 – 12:00 P.M.	Coffee & . . . Quick Review of VVA ledgagenda & elevator speech Go to CA DVA Bldg Cal State Veterans Commanders' Council	
12:00 Noon – 3:00	Visit Legislators/staff from your District Lunch on your own	
3:00 – 3:40 P.M.	AIT: Current Issues for States Current Issues & Legislation ~ funding, accountability, and outreach ~ Mental Health/PTSD ~ Returning Troops ~ Homeless Veterans ~ Minority veterans ~ Women Veterans ~ Assured Funding for Veterans Health Care ~ Agent Orange ~ Project 112/SHAD/Other Toxins ~ Hepatitis C ~ Veterans Entrepreneurship ~ Veterans Preference & Employment	Carl/Ken assisted by John, Tom Rick, John, Carl
3:40 – 4:00 PM 4:00 – 5:00 PM 5:00 – 5:15 PM	Break Federal Agencies Review & Discussion	
7:30 – 8:30	Dinner on your own Back to the Rear: After-Action Report & Critique (OPTIONAL) ~ Whom Did You See? ~ What Did You Discuss? ~ How Do You Plan to Follow Up? ~ Timetable for Following Up –	
Tuesday, March 13 8:00 – 8:30 A.M.	Coffee. & etc.	
8:30 – 12:00 Noon.	More Follow-up Visits with Legislators and Staffers	
	Lunch on your own (Check out of room!)	
1:00 P.M. – 2:00 PM	After-Action Report ~ Whom Did You See? ~ What Did You Discuss? ~ How Do You Plan to Follow Up? ~ Timetable for Following Up –	
2:00 – 2:15 2:15 – 3:30	Break Shake-Down ~ Review of the WorkShop ~ Review of the Manual ~ How Can We Improve Advocacy Training? ~ How Can We Take This Training on the Road? ~ What Will You Do With What You Have Learned? ~ You MUST Complete the Evaluation Form	Carl/Ken/John/Tom assisted by Rick

termine if the veteran may be eligible for federal benefits. This bill would prohibit denying mental health services while awaiting federal care and merely because the individual is a veteran. This bill was approved by the Governor.

An issue of interest that came before the Government Affairs Committee the last two CSC meetings was the Mt. Solidad Cross in San Diego. The final outcome was that the CSC Full Council chose to take no position, either for or against.

Legislators will be home for the Holidays and this would be a good time to contract those in your district and request their support on issues of veteran interest. There will be more on this in this column.

Federal Legislative List for immediate support – 109th Congress:

HR 76 – Rep. John Duncan (R-2-TN), to improve access to medical services for veterans seeking treatment at Department of Veterans Affairs outpatient clinics with exceptionally long waiting periods.

HR 515 – Rep. Lane Evans (D-17-IL), to provide for an assured adequate level of funding for veterans health care. A companion bill is S 331. – Sen. Tim Johnson (D-SD)

HR 616 – Rep. Joe Baca (D-43-CA), to provide for reduction in the backlog of claims for benefits pending with the Department of Veterans Affairs.

HR 2369 – Rep. Bob Filner (D-51-CA), to provide for the Purple Heart to be awarded to prisoners of war who die in captivity under circumstances not otherwise establishing eligibility for the Purple Heart. A companion bill is S 2157 – Sen. Barbara Boxer (D-CA)

HR 2832 – Rep. Sue W. Kelly (R-19-NY), to establish certain conditions on the Secretary of Veterans Affairs implementing any recommendation of the CARES Commission that would have the effect of eliminating or severely reducing any medical service provided to veterans throughout the United States at Department of Veterans Affairs medical facilities.

HR 4914 – Rep. Lane Evans (D-17-IL), to remove certain limitations on attorney representation of claimants for veterans benefits in administrative proceedings before the Department of Veterans Affairs and for other purposes.

HR 5487 – Rep. Darlene Hooley (D-5-OR), to take certain actions to mitigate the effects of the breach of data security that occurred, or is likely to have occurred, in May 2006, at the Department of Veterans Affairs.

HR 1366 – Rep. Michael Bilirakis (R-9-FL), to expand eligibility for Combat Related Special Compensation paid by the uniformed services in order to permit certain additional retired members who have a service-connected disability to receive both disability compensation from the Department of Veterans Affairs for that disability and Combat Related Special Compensation by reason of that disability.

S 2500 – Sen. Daniel Akaka (D-HI), to enhance the counseling and readjustment services provided by the Department of Veterans Affairs, and for other purposes.

PTSD COMMITTEE REPORT

First of all, I feel very good about recommending our own Dr. Ed Ryan to the VVA National PTSD Committee where he was warmly welcomed and accepted. I think we can all look forward to Ed's contributions to this important committee, and was pleased to see his testimony at the recent hearings held in San Diego by the DoD Task Force on Mental Health. Ed and the VVA Nation-

al PTSD Committee stressed the need for further funding and research on Traumatic Brain Injury (TBI) which is rapidly becoming a hallmark of Operation Iraqi Freedom due to the high incidence of Improvised Explosive Devices (IEDs).

The PTSD Committee was well attended, the main topic of discussion was confronting the stigma associated with PTSD as a mental illness. In recent years, actually since the initiation of hostilities generated by the attacks on the World Trade Center and the Pentagon, we have lost ground in confronting the stigma of mental illness.

As I'm sure many of you are aware, the VA in conjunction with the current administration has made considerable effort to downplay the psychological trauma suffered by both active duty personnel and veterans. Let's be honest here, the DoD really has no incentive to address issues of readjustment, their effort is to provide immediate treatment which will return troops to the battle ASAP. There has been considerable new controversy regarding the nature of PTSD and appropriate treatment. The VA continues to promote medications and groups as appropriate but with staff reductions due to retirements more and more reports are coming in of group sessions being reduced and/or curtailed. It has also been shown that VA Clinicians have developed a rather negative attitude towards veterans who file compensation claims for PTSD. The reasoning seems to be that compensation removes any incentive to get well. This is a trend we must confront and to which we must put a stop.

The problem here seems to be that too many of us have accepted the VA as the last word on whether or not one has PTSD. This is a mistake. The VA is only concerned with whether or not a veteran is eligible under their rating system. Many of us carry mild to moderate symptoms the VA will neither acknowledge or compensate.

The VVA PTSD Committee would therefore like to initiate a "PTSD Education and Outreach" program to provide information and support to our chapters. Ideally we would like to have PTSD Committee members provide presentations around the State to enhance the understanding and awareness of PTSD and how it affects our community.

Look for more to come on this project.

Henry Iasiello
CSC, BOD (Northern Dist)
PTSD Committee, Chair

CENTRAL DISTRICT, POW-MIA, VETERANS INCARCERATED, REPORTS

The Holiday Inn, Fresno Airport is a great improvement over our past State Council meeting facilities, and the inclusion of the District Directors tiers help us to keep in touch with our Chapters. I encourage all Central District Chapters to keep current on State and National issues concerning veterans. Be informed, meet old and new delegates and keep your chapter up to date by attending State Council Meetings.

We all have busy schedules and it is not always practical to travel long distances. Please feel free to contact me whenever you have a question or problem. My contact information is current on the CSC web site, via E-mail: csc_vvaed@sbcglobal.net

State wide our membership is on the increase and I am proud to announce that Santa Maria, new chapter forming, have completed their paper work and with luck may be chartered by National before our next CSC meeting. Thanks

to Henry Alfaro who reached out and organized a fine group of brothers and the help from our Membership Chair, Steve Mackey. I congratulate the new officers and members of the Santa Maria Chapter and Welcome them aboard.

November is always a busy month for all of us. Along with more than 600 other veterans, I had the pleasure of attending and receiving the Warriors Medal of Valor from The Native American Nations of the United States of America, in Fresno on Friday, November 10, 2006. "Honoring the American Veterans" The Warrior's Medal of Valor is the first medal ever minted for the Native American Nations to honor all military personnel, active duty, reservist, National Guard and veterans. This is not a government issued medal, it was passed by the National Congress of American Indians in 2005. Medals may be obtained by special order. Cost is approx. \$20.00 plus \$4.95 postage. All proceeds will go to help pay for medals for our Hospitalized Veterans and those on active duty returning home. For more information, please, contact the Veterans Magazine, Inc., 4877 E. Norwich Ave, Fresno, CA 93726, Phone: 559-291-1239 or E-mail medal@veteransmagazine.com

After the Medal of Valor presentation, I met the Local Ex-POWs Chapter Commander and presented him with the National POW-MIA medalion. He greatly appreciated it, and has invited me to attend their chapter meeting, which I plan to do soon. Hope to have a full report for the next CSC meeting.

Veterans Day started with a traditional 11 AM commemoration ceremony at the Merced County Veterans Memorials, home to one of the earliest Vietnam Veterans memorials, dedicated on Oct. 25, 1976. Followed by the second annual Veterans Day Parade in Merced in over 20 years at 1 PM. Ending the day with a closing ceremony and parade awards at the Merced County Historic Courthouse at 3 PM.

On Wednesday November 29, I visited Frank Sparkes School, in Winton and talked to the fourth grade class about Vietnam and presented them with their Merced Freedom Parade participation plaque.

Several articles have appeared in the local newspaper covering the California Correctional system, one titled "Guards locked in a cell of self-pity," exposed the strengths and weakness of our present situation. Another covered the needed improvements within the Calif. Correctional Health system which was encouraging to see that they are being addressed. Remember, our brothers were Veterans First, and we need to reach out and provide them with the same information and medical care deserving of all veterans. By their track record they have proven their desire and capacity to serve humanity, when given the right support and leadership. A good correlation and comparison is that the news always prints the bad and we never hear about the good things our troops are doing. Thank you for serving our country.

Wishing everyone a Merry Christmas and a Happy New Year and looking forward to hearing from or seeing you in January at the CSC Meeting.

Ed Mentz Sr.
CSC Central District Director

VETERANS STRATEGY COMMITTEE

CDVA Sacramento CA Sept. 20th 2006
After Action report

Discussion was held on being able to ID returning troops, at this time DoD is notifying CDVA of returning troops with info on Home of Record info. This enables CDVA to send out letters welcoming them home and providing them with information on benefits available to them. Discussion was also held on how to best identify and find veterans in the state who are not receiving benefits from the VA or the CDVA due to home-

lessness or lack of information available to them at time of release from active duty. I again reiterated our program in Sonoma County of using volunteers trained by the County Veterans Service office to reach out in their part of the county to veterans they can identify and giving them the information on what, who and where to obtain benefits. And in some cases, if the volunteer has been trained and wishes to help the individual, fill out a claim with their help.

The Department of Corrections was also on hand with information on their program for identifying eligible veterans in the corrections system and helping them with obtaining benefits upon release. This program is slated to be implemented by February 2007.

Discussion was also held on the use of DAV vans throughout the state to assist veterans with benefits. A discussion was held on the possibility of the CDVA of obtaining and operating "Benefit Vans" in the state to help increase the areas served by these mobile units

Discussions were also held on the effectiveness of job fairs being held in our communities and finding ways to interest employers to hire veterans. After all final discussions and ideas were finished and submitted to the committee chair, the meeting closed. A final draft of the ideas and programs will follow at a later date prior to submission to the state legislature.

OUTREACH STRATEGIES WORKING GROUP
(AB 1806)
September 6, 2006 10:00 AM to 3:00 PM
Medal of Honor Hall
California Department of Veteran Affairs

These were some of the ideas discussed at the first meeting with the hope that at the second meeting, on September 20th, some of these suggestions and ideas can be used in the report the State Legislature requested submitted by February 2007,

California Veterans Demographics: Jack Kirwan presented a series of graphs that summarizes the status of veterans in California. The following were of importance to the group:

1. Veterans are concentrated in the southern part of the state in urban areas.
2. 51% of the veterans are over sixty years old.
3. 34% of the veterans are from 40 to 59 years old. This is the Vietnam War generation, which has had a unique set of needs and requirements.
4. Approximately 24% of veterans are peacetime veterans, which as a group will not qualify for pensions. (Median Income)

The working group requested some additional information to assist with their deliberations, including

* A comparison of national versus California statistics on wartime and peacetime veterans.

	National	California
Wartime	74.4%	74.7%
Peacetime	25.6%	25.3%

Nathan Johnson/Richard Jones

- * Strategy Title: Vietnam/Global War On Terror Homeless Transitional Assistance
Description: Provide housing/food for era vets until claim adjudicated.
- * Background: GWOT vets are falling into the homeless rut while waiting for their claims to be adjudicated. Vietnam Era Vets, largest homeless category, faced the same issues.
- * Rationale: Proactive prevention of homeless vets.
- * Expected Outcomes: Reduce homeless population by significant percentages.
- * Pros/Cons: Our obligation to vets, reduces crime, and drug dependence - expensive.

* Implementation Methodologies; Set up temporary housing program.

Richard Jones

- * Strategy Title: Police/Fire/Ambulance
- * Description: Have law enforcement officers and emergency services trained to identify veterans and refer them to USDVA.

- * Background: Vets involved in domestic violence and other crimes may be suffering from PTSD or other mental illnesses.
- * Rationale: Would identify Vets with serious problems that may be service related.
- * Expected Outcomes: Reduction in crime, homelessness, drug use among veterans.
- * Pros/Cons: Potential to find a great many veterans with serious problems - would these agencies be receptive to such a program due to manpower limitations and cost
- * Implementation Methodologies: Service Officer type training for agencies or CVSOs to make contact with these agencies in their county to provide support

Reports Submitted by:
Richard Jones, Chair
VVA CSC Veterans Benefits Committee

MINORITY AFFAIRS COMMITTEE

Holiday Inn, Fresno, California
OCTOBER 28, 2006

Attendees:
Jerry Yamamoto, Chair; Robert Rosenberger (Ch. 547 Marin), Gary Tigh (Ch. 933 Fresno), Hap DeSimone (Ch. 218 Santa Barbara), James Maddox (Ch. 446 Pasadena), Gary Colletti (Southern District Director), Ken Holybee (CSC President)

Discussion of the mission of the Committee. Ken Holybee reported that the VVA National Constitution defines the mission of the Minority Affairs Committee is to find programs to assist the minority veteran.

The role of the committee members is to consider that we are veterans first, who happen to be minorities.

The attendees reviewed and discussed the announcement of the cancellation of the Solicitation of Applications for the Native American Business Enterprise Center (NABEC) and Extension of NABEC Program Period. They also discussed the message from California Congresswoman Hilda Solis decrying the VA's refusal to create a working group to help veterans and their families with limited English proficiency.

After a review of the report of the recent October 7, 2006 National Minority Affairs Committee meeting, those present voted for keeping the name of the National committee as "Minority Affairs Committee" rather than changing it to "Diversity" or other names. This will be reported to the National Minority Affairs Committee.

A report was given of the coming Dec. 3-7, 2006 visit to Puerto Rico by John Rowan, Bernie Edelman and Francisco Muniz to investigate veterans issues brought forth by Puerto Rican veterans. They will work with Jorge Pedroza, Puerto Rico State Council President. This will result in an article on Puerto Rico veterans in a future issue of *The VVA Veteran*.

Hap DeSimone discussed the nonfiction book that he is writing about how Hollywood can and does influence people's thinking with its portrayals in movies.

Jerry Yamamoto, Chair
October 30, 2006

VVA MEMBERSHIP NUMBERS

Membership Totals as of November 30, 2006

VVA

IND - 29,108
LMP - 23,615
LMT - 437
IVI - 1,782
PHV - 225

Total - 55,167

Monthly total for this month last year 53,414
Growth Rate - 3.3%

New Members this month 687 and the 2004-2006 average for this month 513

AVVA

ASC - 4,616
ALP - 1,748
ALT - 49
OLP - 58
OLT - 0
OTH - 67
IVA - 318

Total - 6,856

Monthly total for this month last year 6,829
Growth Rate - 0.4%

New Members this month 92 and the 2004-2006 average for this month 65

On another note, VVA Chapter 172 in Cumberland, Maryland has become the largest chapter in VVA with 814 members and VVA Chapter 451 in Baltimore, Maryland is second with 762 members. That is truly an outstanding achievement by both chapters in recruiting members and the retention of members in VVA. Plus, VVA Chapter 451 has 445 AVVA members affiliated with their chapter also.

Bill Meeks, Jr.
Chair, VVA Membership Affairs

CSC MEMBERSHIP

Hello Again. We have 3,182 VVA members and 507 AVVA members in California. What is sad about the VVA number? We had more soldiers from CA. KIA in Vietnam than we have members in VVA in CA. We have to somehow change that. I don't know what we can do to recruit more members and retain the ones we have. We have to find some way to get these guys and gals to join. Maybe we can share ideas used in recruitment and retention. Send me your ideas and we'll report them out in the Zephyr.

Steve Mackey
VVA CSC Membership Chair

VET GROUPS SEEK MEMBERS

VIETNAM ORGANIZATION CONTINUES GROWTH
By Mary L. Crider
Times Record

FORT SMITH -- Area veterans groups aren't immune to a phenomena affecting such service organizations nationwide -- aging membership. What they're doing about it depends on the organization.

The groups help veterans navigate the bureaucratic maze to access educational, health and other benefits. They also serve a social function -- and as a support group for those who have endured experiences their families and friends can't fully grasp.

"They can finally be with someone who understands without you having to explain it. They can find support that they cannot find anywhere else," Waldo Fisher, Vietnam Veterans of America Fort Smith chapter president, said earlier this week.

VIETNAM VETERANS OF AMERICA, INC., CALIFORNIA STATE COUNCIL - WINTER 2006

Chapter	Address/Phone	E-Mail/ Web Site	Primary Contact	Meeting Information	Activities
47	PO Box 3007 Riverside 92514-4277 951-781-6137	nebhuskfan@aol.com www.vva47.com	Steve Mackey	3rd Saturday, 10 am at Lifespring Social Hall located at the corner of Columbia and Main St. in Riverside. Board meets prior to the meeting (check web site for special meeting locations & times)	Vietnam Wall project at Riverside National Cemetery; veteran assistance; hospitalized veterans; Ronald McDonald House donations; membership recruitment; speakers; Cystic Fibrosis BFB donation; Veterans Day events
53	PO Box 7000-185 Redondo Beach 90277 310-540-8820	n9140y@comcast.net www.vva53.us	Jerry Yamamoto	Billy's Restaurant, 5160 W. 190th St., Torrance, 4th Wednesday, monthly at 7 p.m.	Veterans Day programs; VVA Booth in DC; donation to Joint Efforts; Hermosa Beach Memorial maintenance; Long Beach VAMC Bingo; Gold Star Moms Manor visit
201	PO Box 26203 San Jose 95159-6203 408-246-2288	mayday55@pacbell.net www.nichecom.com/~vfw/vva.html	Robert Beresford	Board meets on 3rd Monday at 8 pm; chapter social on 3rd Monday at 70 pm. Both held at VFW Post 3982, 1313 Franklin St., Santa Clara	vet center assistance; Flag raising ceremony; Veterans Day parade
218	PO Box 2241 Santa Barbara 93120 805-965-2161	vva218@vvachapter218.org www.vvachapter218.org	Dennis Hartman	Meetings on 2nd Tuesday at 6:30 pm	membership recruitment; chapter planning; Dr. Ed Ryan guest speaker
223	1352 Maple Ave. Santa Rosa 95402 707-521-4218	vets@vva223.org www.vva223.org	Richard Jones	2nd Tuesday 7 pm. Board; General Meeting 3rd Tuesday 7 pm. Vets Building, 1315 Maple Ave., Santa Rosa. 3rd Saturday is a chapter breakfast.	homeless outreach; vet claim assistance; membership recruitment; fundraising - Texas Hold 'Em tourney
355	PO Box 2986 Canyon Country 91386-2986 818-508-9626	lostpatrol@msn.com	Frank LaRosa	3rd Sunday of each month, 11 am, at a local restaurant	donations SDIT, POW/MIA; work with Patriot Guard riders; Veterans Day parade
357	PO Box 4021 Redding 96099 530-275-8912 or 530-242-1596	coonradt@snowcrest.net	Rocky Cantrell		highway cleanup; Color Guard activities; sponsor local boxer; fundraising for Salvation Army
368	PO Box 1566 Mariposa 95338 209-966-4039	rainbow@sti.net	Larry Coan	1st Thursday, 7 pm at the VFW Hall in Mariposa	
391	PO Box 5391 Sonora 95370 209-928-3848	chap391@lodelink.com www.vietnamveterans391.org	Dick Southern	1st Tuesday, 7 pm. Board - 2nd Tuesday 7 pm, at Sonora Veterans Hall, 9 N. Washington St, Sonora, CA	golf tourney; donuts for vets getting flu shots; retired citizens assistance; bi-monthly dinner; member recruitment booth; chapter picnic; scholarships
400	200 Grand Ave., # 208 Oakland 94610 510-444-5235	fdrdocent@comcast.net	Bill Hodges	3rd Tuesday, 7 pm, Oakland Vets Bldg, 200 Grand Ave.	Veterans Day ceremony @ Oakland Veteran Memorial; developing POW/MIA Memorial Plaza
441	782 N. Brundage Farmersville 93223 559-594-5710	rod6768@mindWinter.com	Rod Hughes	2nd & 4th Mondays, 7:30 pm	work with local legislator; veterans health care day; Gold Star Mothers ceremony; donations to community groups; Veterans Day events
446	87 N. Raymond Ave., Suite 210 Pasadena 91103 626-795-8141	vva446@earthlink.net	James Maddox	2nd Tuesday, 7:30 pm, Senior Center, 85 E. Holly St., Pasadena	Veterans Day ceremony; Real Men Cook Prostate Exam program
464	PO Box 747 San Carlos 94070-0747 650-513-5586	vva464@yahoo.com theveteran.net/vva464	Ponce Gonzalez	1st Wednesday, 7:30 pm at American Legion Post 666, 757 San Mateo Ave., San Bruno 94066	
472	2115 Park Blvd. San Diego 92101-4792 619-239-5977	vva472@hotmail.com www.vva472.com	John Weaver	Member meeting held quarterly, announced on Web site; Board meets 4th Wednesday 7 pm at Veterans Memorial Center, 2115 Park Blvd., San Diego	Veteran Day parade in conjunction with United Veterans Council; fundraising
500	PO Box 255484 Sacramento 95868 916-481-6020	vva500@sbcglobal.net www.norcaltravel/vva500.html	Ted Adams	3rd Tuesday, 7 pm; Board - 1st Tuesday, 7 pm. Veterans Memorial Hall, 110 Park Drive, Roseville (Royer Park)	Two Veterans Day parades; Vietnam Memorial in Placer City; CA State Fair; Stand Down & Appreciation Dinner; annual Get-A-Way
526	PO Box 2222 Culver City 90232 310-260-6910	wmctaggart@pmcos.com	John Hamilton	1st Tuesday, 7:30 pm	
535	PO Box 37 Grass Valley 95945 530-470-8507	wreddekopp@sbcglobal.net http://www.nccn.net/%7evvanc/	Harold Graves	1st Thursday, 7 pm. Grass Valley Veterans Memorial Bldg., 255 South Auburn, Grass Valley	Fundraising at car show; Military Stand Down; "Christmas Year Round" program; Friends of Nevada County Military program; chapter picnic; Victorian Christmas preparations
536	1120 Golden State Ave. Bakersfield 93301 661-868-7313		Don Waak	2nd Wednesday	
547	PO Box 884 Kentfield 94914 415-454-8823	cjjens@hotmail.com http://www.vietnamveteransmarin.org/	Carl Jensen	3rd Wednesday, 7:30 pm. American Legion, Post 313 12 Ward St., Larkspur	San Anselmo Parade; Vet Fund Golf Tournament; National Cemetery opening services in Dixon
563	PO Box 751284 Petaluma 94975-1284 707-762-9078	johnc85393@aol.com	John Chaney	Veterans Memorial Bldg., Petaluma Blvd., Petaluma, 4th Thursday each month except Nov. & Dec.	November 11 parade
582	1017 5th Ave. Corning 96021-3004 530-824-2100 (10 am to 2 pm only)	kencorning@sbcglobal.net members.fortunecity.com/vva582	Ken Correlle	2nd Saturday each month at Scotty's Landing on River Road (outside of Chico on the Sacramento River), board meets at noon, members' meeting 1 pm	car show; sponsor Iraq veteran; Flag etiquette training; veteran parade
643	PO Box 745 Dinuba 93618 559-591-0566	nafw@softcom.net	Peter McManus	2nd Wednesday, 7 pm at Dinuba Memorial Building, 249 S. Alta Ave., Dinuba	Cinco de Mayo Festival tri-tip sandwich booth; fireworks sale 4th of July & Raisin Festival; scholarships; local family assistance; sponsor Little League team; color guard
691	PO Box 2226 Merced 95344-0226 209-356-1938	csc_vvaed@sbcglobal.net www.mymerced.com/0704k163.html	Ed Mentz	3rd Monday, 7 pm, Citi Bank, 19th & M, Merced - 6:30 pm for potluck dinner. Board - 1st Monday, 7 pm Community Center in Castle Vista	CSC Delegate Jerry Peterson hospitalized; selling veterans collectibles
702	PO Box 525 Yountville 94599 707-252-7537	rossisvva@aol.com	Ross Hall	1st Tuesday, 7 pm at Yountville Veterans Home in the Lee Lounge (second floor of main building). Board meets 3rd Saturday, 8 am in the cafeteria	Yountville Vets Home memorial services; co-sponsoring Moving Wall; membership recruitment at vet home, sponsor ones in need
713	Contact So. District Director Gary Colletti	gmcolletti@aol.com			
756	PO Box 90994 Long Beach 90809 562-596-5170	stumpfires@verizon.net	Dave Stumpf	1st Wednesday, 7 pm at VFW Post 8615, 2805 South St., Long Beach	Long Beach VAMC movie presentation; hospice ward volunteer; Thanksgiving dinner for Gold Star Moms; donation to Marines' ceremony for KIAs; VSO training
781	1100 Main St. PO Box 102 Ferndale 95536	bugland@aol.com	Mike Pratt		Christmas dinner planning; collecting informaton for list of local area services available
785	2345 Barraca Parkway Irvine 92606 714-777-3918	gunnymims@aol.com www.vva785.org	Bill Mimiaga	1st Wednesday, 6 pm (social hour prior), at US Army Reserve Training Center Armory, 2345 Barranca Parkway, Irvine, CA	Wings & Rotors event/booth; Playhouse West memorial for "Bear" donation
880	508 Riddle Court Modesto 95356 209-523-3880	emg@msn.com	Errol Green	3rd Tuesday, 6 pm at American Legion Lodge, 1001 S. Santa Cruz, Modesto	Food drive for needy vets; potluck at chapter meetings; Moving Wall assistance
933	1851 E. Muncie Fresno 93720 559-297-5253	sdoak@sbcglobal.net	Steve Doak	1st Tuesday at American Legion Post 509, 3509 N. 1st Street, Fresno	chapter social dinner at Basque restaurant; Patriots Day event speaker; POW Recognition Day at VAMC; Stand Down; fundraising dinner with MOPH; Fresno County parade; information booth at Lemoore NAS event
951	PO Box 1313 Lakeport 95453 707-262-5651	barnett@tgaxpro.net vva951.org	Dean Gotham	Board - 1st Tuesday at 290 N. Main St.,7 p.m.; General Meeting - 2nd Tuesday at 801 N. Main St. 6 p.m. (St. Mary's Hall), Lakeport	helping vets get to meetings; donations to Lake Co. Vet Council; Poker Run in Sept.; scholarship fund; Lake Co. Fair

As is the national organization, the Fort Smith chapter continues growing, Fisher said. It has about 70 members, up from about 30 about 18 months ago. Nationwide, there are more than 50,000 members and 525 local chapters, according to Vietnam Veterans of America literature.

“I think there are two reasons for that. Vietnam veterans are the largest group of veterans in America, and a lot of the guys are my age. I’m 58. We need medical help, and the VA (Veterans Administration), if you go up there by yourself, you’re not taken as seriously as if you say you’re represented by a veterans service group,” Fisher said.

There is strength in numbers, he said. Still, Vietnam veterans tend not to be joiners, which he thinks is a trust issue, Fisher said, referring to the hostile reception these veterans often met after serving in the unpopular war.

“When most of us came back, we didn’t want people to know we were Vietnam vets, and if you join an organization, you are saying you are one,” Fisher said.

Nationally and locally, the organization takes advantage of opportunities to be public, Fisher said.

Locally, it mans information booths at events like Van Buren’s downtown spring and fall festivals, a July fireworks stand, Bargains Galore in August. Since July, recruitment efforts netted another half-dozen members, Fisher said. There are about 8,500 Vietnam vets in the area, he said.

Recruiting efforts aren’t overt.

“One thing we’ve discovered in recruiting members,” said Fisher, “every time we set up a booth there’ll be a guy, sometimes more than one, who will look but won’t approach. We’ve learned to let him stand there, let him look, and if he’s ready, he’ll come up and ask questions.”

For new members, the first year’s fee is waived. Although money is needed to operate, the chapter is happier to have the new member than it is to have the membership fee, Fisher said.

Several veterans groups are represented in Fort Smith, Fisher said. There are chapters of the Vietnam Veterans of America, the American Legion, Veterans of Foreign Wars, Disabled American Veterans, the Retired Military Association, Purple Heart Association, Prisoner of War Association, he said. Fisher is also an American Legion member.

In the 1960s and ‘70s, many members of the older veterans organizations didn’t consider the Vietnam War to be on a par with World War I, World War II and the Korean War. For many Vietnam veterans, it added to their feeling of being stigmatized, and they founded their own non-profit service organization in 1978. Its founding principle: “Never again shall one generation of veterans abandon another.”

The Vietnam group is unique in that was structured to die out as its membership pool dies out. The American Legion and the Veterans of Foreign Wars can survive indefinitely because Iraqi and Gulf War veterans can join them, Fisher said. Although post-Vietnam veterans could join the Vietnam Veterans of America Associates, membership in the group itself is limited by federal charter to Vietnam-era vets, Fisher said.

The local Vietnam Veterans chapter has offered use of its facilities to other vets, if they want to form their own group, Fisher said.

Bud LaVallee, a Korean War veteran and the Veterans of Foreign Wars chapter quartermaster, said the Fort Smith VFW chapter is holding its own membership-wise. The post has about 270 members, he said.

Worldwide, VFW has 2.4 million members and about 9,000 posts, according to VFW literature. The VFW dates to 1899 when Spanish-American War veterans founded local organizations to secure service benefits. Their efforts helped establish the Veterans Administration and the GI bill.

At one time, Fort Smith had three VFW posts, but the oldest members have died, and the younger eligible members aren’t yet interested in joining, LaVallee said.

“Most of us that belong to the VFW, most of us are World War II, Korean veterans. Some are Vietnam, but the other conflicts such as Afghanistan, Desert Storm, Iraq, have other things going for them,” LaVallee said.

The first thing a young Iraqi War veteran thinks of when he returns is his job and his family security -- and that’s how it should be, LaVallee said. Recruiting efforts revolve around word-of-mouth and booths set up at such times as the annual Veterans Day poppy sales, he said.

“Most of us in these organizations now are older, and we see ourselves as caretakers,” LaVallee said.

It’s a natural cycle, Fisher pointed out.

“The Vietnam veteran today is right in the same place that our fathers were when we went to Vietnam. They had their families, they’re settled down, they’re living comfortably,” Fisher said.

FILNER TO LEAD VETERAN AFFAIRS

By Rachel Van Dongen,
Congressional Quarterly

Rep. Bob Filner, of California won an unusual runoff today for the chairmanship of the House Veterans Affairs Committee, beating Michael H. Michaud of Maine by a vote of 112-69 by the full Democratic caucus. The decision came a day after the Democratic Steering Committee, headed by incoming Speaker Nancy Pelosi, D-Calif., voted 24-20 to award the chairmanship to Filner. Michaud, however, invoked a caucus rule that entitles a candidate to a second ballot before the full caucus if they receive at least 14 votes. While Filner won by a wide margin, his apparent lock on the chairmanship was imperiled by members who worried he is too hot-tempered for the job. “This whole fuss was made about style, that Filner is too emotional, too passionate,” said a member leaving the caucus room. Outgoing ranking member Lane Evans and Rep. Tom Allen late Thursday sent a letter to House Democrats, asking them to support Michaud. Evans cited Michaud’s “political contributions to our party,” in addition to other positive attributes.

VA FAILED TO SPEND ALL MONEY

By Suzanne Gamboa
ASSOCIATED PRESS

WASHINGTON - The Department of Veterans Affairs did not spend all of the extra \$300 million it budgeted to increase mental health services and failed to keep track of how some of the money was used, a government report says.

VA launched a plan in 2004 to improve its mental health services for veterans with post-traumatic stress disorders and substance-abuse problems. To fill gaps in services, the department added \$100 million for mental health initiatives in 2005 and another \$200 million in 2006. That money was to be distributed to its regional networks of hospitals, medical centers and clinics for new services.

But the VA fell short of the spending, by \$12 million in 2005 and about \$42 million in fiscal 2006, said the Government Accountability Office, Congress investigative arm.

It distributed \$35 million in 2005 to its 21 health

care networks but didn’t inform the networks the money was supposed to be used for mental health initiatives. VA medical centers returned \$46 million to headquarters because they couldn’t spend the money in fiscal 2006.

In addition, the VA cannot determine to what extent about \$112 million was spent on mental health services improvements or new services in 2006.

VA reported in September that more than a third of Iraq and Afghanistan veterans who sought medical treatment from the VA in the 18 months prior reported symptoms of stress or other mental disorders.

Longer and multiple deployments, unpredictable daily attacks and roadside bombings and efforts to reduce the stigma of post-traumatic stress disorders have been cited as reasons for the increased reports.

VA said at the time it had increased funding for mental health services, hired 100 more counselors and was not overwhelmed by the rising demand.

VA spokesman Matt Burns said in a written statement the GAO looked at the agency’s Mental Health Strategic Plan as an accounting exercise. In contrast, VA’s emphasis has been on building mental health care capacity and high quality programs to support and treat veterans. VA expends resources for programs that meet these criteria, Burns said.

He said VA has already taken steps to make sure mental health money is used for its intended purpose.

The money is only a portion of what VA spends on mental health. VA planned to spend about \$2 billion on mental health services in FY2006. But the additional spending from existing funds on what VA dubbed its Mental Health Care Strategic Plan was trumpeted by VA as way to eliminate gaps in mental health services now and services that would be needed in the future.

“While we are at war we do have to make sure we spend the resources that are allocated for our veterans,” said Rep. Michael Michaud, ranking Democrat on the House Veterans Affairs health subcommittee.

He said he thinks VA is overwhelmed. Along with the increased mental stress reports from Iraq and Afghanistan veterans, Vietnam vets are also experiencing flashbacks and recurrences of combat stress problems because of the ongoing wars, he said.

“This goes above and beyond just dealing with the veterans, it deals with the family of veterans which could have long-term implications and additional costs at federal level and state and local level,” Michaud said.

Democrats have said they want to increase funding for veterans’ health care, in particular its mental health counseling for returning Iraq and Afghanistan vets when they take over Congress next year. They also have said they want to increase the department’s oversight and get detailed budget accounting from the VA.

Leatherneck Publishing publishes “*A Corpsman’s Legacy*”, in Oceanside, CA. It is available directly from <http://www.leatherneckpublishing.com>, or your local bookstore. Dealer discounts offered through Ingram Books and Baker & Taylor.



Review copies are available to accredited media venues by contacting: review@leatherneckpublishing.com or calling (760) 754-3100. When requesting via e-mail, please provide your name, title, organization, address and phone number.

Opinions, Information and Reminiscences

To the CSC President:

Dear Ken Holybee and Ed Mentz,

I read the President’s Report in the Zephyr to-day, specifically the loss of fee basis funding for vets in the Redding area. Almost two years ago the Merced-Mariposa Co. vets also had their fee basis option removed abruptly. Although the local (Castle Vet clinic) was inadequately staffed to pick up the immediate (and future) load of about terminated 50 Vets (all had PTSD combat disability ratings), the change was made anyway. Congressman Cardoza’s office mediated a confrontation of about 40 Vets and the Chief psychiatrist from the Fresno VA Hospital. All to no avail even though the VA clinic could only provide one therapist, infrequent visits, and Monday thru Friday services while the fee basis contractor, (The Bridge - my office) provided four therapists, weekly visits, training at the Menlo Park VA, and giving 24/7 emergency service. Appeal to the director of the Fresno VA hospital also resulted in no relief.

As a VVA member myself and retired military psychologist, I am appalled at the callous way the VA treats Veterans with PTSD. I would like to ask the California State Council to vigorously address these reductions of services for Viet Nam veterans especially in the light of greatly increased Federal funding for mental health services.

Sincerely,
Dr. Stan Bunce

VETERANS HAVE A RIGHT TO GOOD

HEALTH CARE

by Carl Young, 11/27/2006

(This letter was sent to U.S. Department of Veterans Affairs Secretary R. James Nicholson. It has been reprinted here with the author’s permission.)

When are you going to take the actions necessary to address your legally mandated duties to conduct the “outreach activities” that might cause additional veterans to seek their “earned” VA Health Care Benefits? As you may know, Congress enacted and the president signed Public Law 109-114, the Military Construction, Military Quality of Life and Veterans’ Affairs Appropriations Act, 2006, which stopped your agency’s moratorium of restricting veterans’ knowledge about their benefits. With exception to our “Veterans Readjustment Counseling Centers,” no overall coordinated efforts have been made to make veterans aware of these “lifeline” health care benefits.

Your agency issued a memorandum, dated July 18, 2002, directing all your health care network directors to cease any marketing (outreach) activities to events such as health fairs, veteran open houses, enrollment displays at veterans service organizations and effectively stopping all VA medical personnel from sharing information about earned health care benefits. What little outreach there is limited to Vet Center counselors in conjunction with their other assigned duties.

This action and the denial of health care benefits to a whole category of other veterans has resulted in some veterans and their families not being able to afford health care and shifting the costs for many to state and local health care programs already suffering from under funding. Unreported by the mainline media is the unemployment rate of 15 percent for (veterans age) 20 to 24, the increasing number of at-risk veterans who are currently “missing in America” and the lack of resolve by our government leaders to address

these issues.

There are now more than 45 million people in the United States who have no health care coverage.

How many of these people are uninformed veterans who have earned these health care benefits? I believe this continued lack of “reaching out” to our fellow veterans is at best a “slap in the face” and at the very least a national disgrace. Your unwritten policy of saving money through your agency’s lack of outreach activities and denial of care to a certain category of veterans is disgraceful.

We urge you to take those steps necessary to ensure our fellow veterans receive the information they need to obtain the care they deserve, and that you ask for the budget necessary to truly reflect the health care needs of our veterans.

Is there any doubt in any of your minds that we need a mental health program in place for co-occurring disorders-such as the combination of mental illness and substance abuse. The two stories below, California mental health commission meets in Eureka and Stress Disorders, Drug Abuse, Little Help for Troops pretty well sums up the issues and shortfalls, and this time around we need to address this shortfall and not turn our backs on our wartime veterans. The whole mental health treatment concept of doping up vets with major mental issues forever, is stone-age therapy. We need to start taking an holistic approach to these types of problems. We can shuffle off our veterans to non-existent county resources. Perhaps the VA could work with the various county mental health programs and consider addressing these problems jointly...

CALIFORNIA MENTAL HEALTH COMMISSION MEETS IN

EUREKA

by Heather Muller, 11/18/2006

Current approaches to “co-occurring disorders” — the combination of mental illness and substance abuse — are woefully inadequate, according to a series of work group reports presented to the Mental Health Services Act Oversight and Accountability Commission during meetings held Thursday and Friday in Eureka.

But the Mental Health Services Act, previously called Proposition 63 and passed by California voters in 2004, provides a “source of hope,” said Sen. Wes Chesbro (D-Arcata), who represents the state Senate on the commission.

“Voters expressed that much more needs to be done,” he said. “Proposition 63 provides a significant new funding source for change and innovation, not just more of the same.”

Commissioners and work group members spoke at length about some of the changes needed.

Several referred to the “wrong door” approach to CODs, in which people suffering from mental illness are often turned away from addiction programs because of mental health issues, while people with addictions are turned away from mental health programs because of substance abuse problems.

An integrated approach is needed, speakers said, so that those suffering from CODs can walk through either door and receive the help they need.

The challenges local mental health providers face when dealing with persons with CODs were highlighted when a woman from the audience stood up to speak during the public comment

period Thursday afternoon.

“My name is Ronnean Lund,” she began. “I’m a member of the public who has been impacted by our county mental health department’s inability to properly identify co-occurring disorders during their intake process.”

“Specifically, I had a family member who wanted to be admitted to their in-patient facility because he was suicidal, but was turned away because he’d been drinking. He proceeded to go home and shoot himself in the head.”

Lund’s fiancé, Eureka resident David Smith, 46, died Oct. 14 from his injury.

Commissioner Gary Jaeger, M.D., said the goal of the COD work group is to prevent these kinds of outcomes.

“Early intervention and prevention are key,” Jaeger said. And, when patients reach an acute stage and need immediate care, “There can be no wrong door.”

Humboldt County Department of Health and Human Services Director Phillip Crandall said systems of delivering mental health services are as complex as the people they are designed to serve.

“People aren’t cars. You can’t take them in and put them on a machine to determine what’s wrong.”

And even when a diagnosis is made, he said, there still is no “fix.”

“What we have is a clash of cultures and philosophies,” with each of the various stakeholder groups — patients, family members, doctors and other service providers — having different and sometimes conflicting approaches and goals.

But improvements locally have been made. The first step toward integrated treatment was taken in 2000 when all of Humboldt County’s formerly separate social services functions were combined into a single department.

Communication has improved, Crandall said, and services structures have been simplified to better meet patient needs.

But the challenge of providing appropriate care for all county residents in need remains daunting.

When asked if local resources were adequate to meet the demand for services, Chesbro said simply, “No.”

“We have 3,000 high-end crisis incidents in a given year,” Crandall said. “That’s 150 a month, which is three times the state average.”

He said it was important for the state commission to visit Eureka, but the success or failure of mental health services is ultimately determined locally.

“The burden of trying to serve the local population falls at the local level. There is no safety net.”

STRESS DISORDERS, DRUG ABUSE, LITTLE HELP

FOR TROOPS

By Anne Usher

The Austin American Statesman
Sunday 26 November 2006

As repeat tours of Iraq wear on US forces, government struggles to provide mental health care; many say they take refuge in drugs.

Washington - Military personnel on multiple and extended tours of duty in Iraq and Afghanistan are being diagnosed with post-traumatic stress disorder at rates that probably will match or exceed the rate among Vietnam veterans, government officials and veterans groups say.

The war in Iraq, with often-hidden enemies and explosives, has left many service members particularly vulnerable to combat stress and is driving the abuse of drugs and alcohol both in Iraq and at home, military health experts say.

Yet many veterans and on-duty troops are not getting the treatment they need.

As of August, more than 184,500 returning veterans had sought care of all kinds through the Department of Veterans Affairs, and about one in six of those had been diagnosed with post-traumatic stress disorder, a rate expected to climb since it can take months and sometimes years for the condition to manifest itself.

Symptoms include anxiety, sleeplessness, flashbacks and extreme wariness, a recipe that can strain relationships and make it hard for those suffering to get or keep jobs.

Jesus Bocanegra, a 24-year-old former Army sergeant with an infantry company based at Fort Hood, says he is haunted by countless shots he fired at Iraqis while serving as a scout in Tikrit in 2003-04.

The McAllen native says he lost track of how many civilians died in the crossfire when he squeezed off rounds at Iraqi insurgents.

“How the hell was I capable of that?” he says now.

Back home and plagued with anxiety attacks, he said he tried to close himself off from the world by drinking to the point of passing out. He said he progressed to marijuana use and then cocaine.

“The only way to sustain yourself day to day is to keep yourself drugged up,” he said. But “it made it worse.”

Eventually, he said, he stopped taking drugs and visited a VA clinic. Seven months later, a psychiatrist there diagnosed him with post-traumatic stress disorder and gave him pills, dispensing medications in five-minute meetings every three to four months. A clinic employee verified his diagnosis and said that with 400 to 600 patients a day, “every doctor is overbooked.”

With no VA psychotherapists in his area at the time - one has since been added - Bocanegra sought help from a support group called Vets for Vets.

“It’s good to have someone to talk to,” he said. “It’s the only thing that keeps me going.”

Married for just under a year, he is unemployed but hopes to return to school.

He said he is focused now on his mental health and on touring with other veterans to push for improved services for vets, many of whom he says are also suffering from post-traumatic stress disorder. Disability benefits of \$2,500 a month help keep him afloat.

Up to 29 percent of troops returning from Iraq and Afghanistan will suffer from post-traumatic stress disorder, predicts Col. Charles Engel, a clinician at the Walter Reed Army Medical Center. As of August, the VA had diagnosed 63,767 discharged veterans with a mental disorder and 34,380 with post-traumatic stress disorder.

Experts say the rate of the disorder among Iraq veterans could well eclipse the 30 percent lifetime rate found in a 1990 study of Vietnam veterans because military personnel are being deployed longer and more often to Iraq and because greater awareness of the disorder among

doctors will lead to more diagnoses.

Some statistics show the cases climbing fast. The number of Iraq and Afghanistan veterans who have sought help for readjustment concerns including post-traumatic stress disorder doubled between October 2005 and June 2006, according to a recent survey of 60 VA-run centers by the Democratic staff of the House Committee on Veterans Affairs.

That increase has made it only more difficult to get quality care, the survey found.

Among active-duty military personnel who served in Iraq, 35 percent used military mental health care services in the year after coming home and 12 percent were diagnosed with a mental health problem, a study published in March in the Journal of the American Medical Association found.

Veterans groups fear that the VA won’t be able to handle the high proportion of service members seeking such help once they are discharged. They note studies showing that though post-traumatic stress disorder can resolve itself in some people over time, its symptoms can worsen if not treated quickly.



I was tremendously honored to be with a wonderful man, Frank Kappeler all day 11/10 who is the gentleman I had my arm around in the picture. He was the navigator with Jimmy Doolittle on Plane 11 which flew over Tokyo. You can watch the movie “30 seconds over Tokyo” or read Invitation:Tokyo to see his story!!! The other two gentlemen whose company I was blessed with the night of 11/10 were Sammy Davis (yeah the guy in the white suit) and Robert Pittman. You can google both these men to see how great heroes they were... Talk about being blessed...To sit with these guys is like nothing you can describe on earth. Blessings to all and a quick end to the Civil War.

Dave Sanders (far right), Chapter 201

The Department of Veterans Affairs says it has enough resources to offer treatment for post-traumatic stress disorder and substance abuse to all of the roughly 160,000 service members now in Iraq and Afghanistan once they are home.

Dr. Ira Katz, deputy chief patient care officer for mental health for the VA, noted that there are 200 veteran readjustment centers nationwide and that mental health counseling is available over the Internet.

As part of unprecedented efforts on its part, the military in September 2005 began giving returning troops a questionnaire aimed at catching early signs of the disorder. Questions include whether they have nightmares, are feeling emotionally numb or super alert, or have physical reactions such as breathing trouble when reminded of a stressful experience. In January, the military put in place a secondary screening test to check for similar symptoms.

But nearly four in five returning troops who may have been at risk for post-traumatic stress disorder were not referred for further mental health

evaluation, according to a study released in May by the Government Accountability Office, the investigative arm of Congress. About half of those diagnosed with a mental health problem got care, but fewer than 10 percent were referred through the military’s new screening program, the JAMA study in March showed.

The Pentagon told the GAO that it generally concurred with its recommendations and that a systemic evaluation of referrals is planned. After the study’s publication, however, the Pentagon said it was flawed because it did not include troops referred to chaplains, primary care physicians and group counseling. The GAO says the Defense Department was not able to provide any evidence that those referrals occurred and still has not provided figures on personnel who may have since received treatment.

After his first Iraq tour ended in August 2005, former Pfc. Josh Revak said, a large number of soldiers in his 1st Battalion, 37th Armor Regiment reported symptoms of post-traumatic stress disorder on the test, but the commanders “just took it as a joke, and I think barely anybody received treatment.”

The 25-year-old said he asked for help but didn’t get psychological counseling until after a 120 mm mortar landed near him on his second tour in Iraq in June, sending him back to their base in Germany with shrapnel through his foot.

By that time, Revak said, several men in his unit had been disciplined for Valium use.

Medical experts say mental health problems such as post-traumatic stress disorder and substance abuse are often intertwined.

“When they don’t get the kind of mental health screening - or physical - history tells us they will turn to coping mechanisms,” said Steve Robinson, director of government relations for Veterans for America, a 35,000-member organization.

He says many of the hundreds of troops he has interviewed at post-deployment sites are addicted to medications given to them in the field, such as painkillers and sleeping pills. But they are not getting the therapy that normally goes with such medications, Robinson said.

Adam Reuter, a 23-year-old former Army specialist, said that after he was tossed out of a Humvee in an accident in Iraq, a medic handed him a plastic bag filled with pills and gave him no instructions.

The bag contained four kinds of painkillers, an anti-inflammatory drug and a muscle relaxant, said Reuter, an Atlanta native who served with the 3rd Squadron of the 3rd Armored Company from May 2003 until February 2004. He said he went back for more and developed a dependency that he is still trying to shake.

Military personnel said they used banned substances as a way to mentally escape the violence around them. Drugs ranging from marijuana to prescription anti-depressants are easily accessible in Iraq, according to interviews with more than a dozen soldiers who served there.

John Crawford, a 28-year-old former Florida National Guardsman with the Army’s 101st Airborne Division, said soldiers in his unit drank alcohol, some took steroids, “pretty much everyone took Valium,” and “some did all three.”

Crawford said he bought 200 to 300 Valium pills on the street in Baghdad for \$2 as a way to get some sleep between patrols. After eight months, he built up a tolerance and was taking seven or eight at a time.

The extent of alcohol and drug abuse among combat veterans is difficult to quantify. The Pentagon declined to release the results of announced drug tests specifically for Iraq. The

tests are usually done just once a year. Army Maj. James Weeden directed a team of 200 specialists dealing with combat stress in Iraq until he left the country in September.

He says senior officers recognize the strain their troops are under and in the past year have assigned specialists to address the issue at remote forward operating bases.

But seeking treatment in a combat environment is difficult. All travel is risky, and asking for help is seen as a sign of weakness.

Weeden and other medical specialists say that they can treat only the symptoms of combat stress - with anti-depressant drugs and rest, for example - and that troops are sent out of Iraq only when they have clearly disabling cases of post-traumatic stress disorder.

Commanders want to keep troops in the field, and most service members say that they don't want to abandon their units.

"We strengthen (combat readiness) because we get them back," Weeden said.

That desire to keep medicated troops in combat troubles Joyce Raezer, director of government relations at the National Military Family Association.

She says U. S. troops - some now on their fourth or fifth tour - are bringing "all the baggage from the last deployment into the next."

"The stress is cumulative," she said.

Families are alarmed by military statistics showing that 80 percent of soldiers who have been flagged with mild symptoms of post-traumatic stress disorder have been sent back to Iraq and Afghanistan, many with anti-depressant pills aimed at ensuring they can still fight. Experts say repeated exposure to combat is the greatest predictor of whether a person will get post-traumatic stress disorder and how severe it will be.

When they come home, many seeking treatment say they face steep hurdles getting help from the government. With a wave of post-traumatic stress disorder cases arriving, outreach groups fear the VA will not have adequate resources to treat them and to pay disability benefits.

The VA is proposing a \$339 million increase in mental health care spending next year, Katz said Tuesday. That would bring total annual spending on those programs to about \$3.2 billion.

Implementation is another question. As of late September, about \$42 million of \$200 million directed for initiatives to close gaps in VA mental health care in 2006 had not been spent, the GAO found.

"Requesting more money is a step in the right direction," said Paul Sullivan, director of programs

for Veterans for America, who was a senior analyst at the VA until he left six months ago.

But he added, "The VA's problems are systemic, and the solutions must be more comprehensive than simple increases in funding."

He noted the GAO findings that the VA lacked a comprehensive plan to implement the funding in last year's budget.

About 144,000 of the 589,000 veterans who have served in Iraq and Afghanistan have already been seen at VA-run Vet Centers for "readjustment concerns" ranging from depression and marital problems to full-blown post-traumatic stress disorder.

Forty percent of the 60 centers surveyed in the study by the Democratic House staff have directed veterans for whom individualized therapy would be appropriate to group therapy instead.

Dr. Frances Murphy, undersecretary for Health Policy Coordination at the VA, told a mental health commission in March that the growing numbers of veterans seeking mental health care has revealed areas in which improvement is needed.

Some VA clinics, she said, do not provide mental health or substance abuse care, or if they do, "waiting lists render that care virtually inaccessible."

"The VA needs more capacity so that vets can get treatment and don't have to wait," Sullivan said.

If they are able to see a VA doctor, hundreds of veterans with severe symptoms of post-traumatic stress disorder are being denied disability benefits because their condition is obscured by drug or alcohol abuse, which is labeled "willful misconduct," said Elinor Roberts, legal director for Swords to Plowshares, a San Francisco-based veterans organization.

The military maintains a zero tolerance policy for drug use on all but prescription medications.

Some service members have lost their military benefits, regardless of their combat citations, after they have been found to have used banned substances.

But many commanders offer leeway in such cases, choosing nonjudicial punishments such as demotions to keep soldiers on duty, said Army Col. Bill Buckner, a public affairs officer at Fort Bragg, N.C.

The VA is allowed to give benefits to veterans dealing with alcohol abuse but not illicit drugs, and only if a clinician finds that the veteran also has post-traumatic stress disorder. VA officials say many vets with the condition have trouble making appointments to get that diagnosis in the first place.

Amy Fairweather, who has counseled about 50 Iraq vets for Swords to Plowshares, said the impact of repeated deployments "is enormous."

"It contributes to all the elements for substance abuse, mental illness and family dissolution," she said. "There's only so many times you can be uprooted from family and work. Not to mention that they're over there in hell."

ARMY TO FUND RESEARCH ON "MEMORY DRUG" THAT MAY HELP PTSD VICTIMS

-- Psychiatrist warns this may just be a way for cash-strapped VA to give vets "a drug" instead of the therapy they need. The so-called "memory drug" is Propranolol. It is currently being prescribed "off-label" for some who suffer PTSD. That story here... <http://www.vawatchdog.org/old%20new>



(l to r) Bob Johnston, Greg Boysol, Carl Jensen, Dave Hellen at the 2003 National Convention in St. Louis. Life Member, David Hellen, past president of Chapter 943-St. Petersburg, FL and Chapter 446, Pasadena, CA, passed away November 8, 2006 of a massive heart attack.



Incoming Email from VVA

We need your help!

Now that you have signed up and confirmed your email address with VVA, we are asking that you forward this message to your VVA and AVVA contacts. We have more than 50,000 members but only 15,000 email addresses. We want to reach every member who has an email. Only current members may sign-up.

What is the VVA Opt-In Email campaign? It's a way for VVA to communicate with its members instantly.

What kind of email will VVA send me? We have a lot of things coming your way. We want you to know the new web site is about to be launched, that we are getting ready to start a marketing campaign on the web and already have sent out 90 white papers that have been picked up on 35,000 web sites.

In order to receive email from VVA, you need to sign up. There are three easy steps in the sign-up process:

1. Go to <http://www.vva.org/applications/email-signupform.aspx>
2. Fill out the information
3. You must respond to the confirmation email when it arrives in your inbox .

Remember : Just check the box if you want to receive email from VVA. If you leave the box unchecked, you won't receive any email.

Also, we want to raise money for VVA, and you can help us by also checking the "Your partner organizations may contact me" box. This is an easy way for us to make some money at your inconvenience. What's more, these are like the advertisers in The VVA Veteran, and you just might find something useful or entertaining. It doesn't cost you a cent. Just hit submit.

For answers to some of the questions that have been asked, go to our FAQ page. Thank you.

Keith King
Chair, Public Affairs Committee

[sflashes%20MAR%2006/newsflash03-13-2006-2.htm](http://www.vva.org/newsflash03-13-2006-2.htm)

The big problem I see here is that it is easier for the VA to "medicate 'em and forget 'em" than it is to truly care for and treat those veterans with PTSD.

ARMY TO FUND RESEARCH ON MEMORY PILL THAT

MAY HELP PTSD VICTIMS

By Jeff Schogol, Stars and Stripes

ARLINGTON, Va. — The Army has agreed to fund research to see if a drug used to treat high blood pressure might be able to lessen the emotional impact of memories associated with post-traumatic stress disorder.

CBS' "60 Minutes" first reported Nov. 26 that the Army was looking at whether the drug Propranolol could be used to treat PTSD.

Researchers hope to recruit several dozen veterans who served in Iraq and Afghanistan from the greater Boston area for the study, said psychologist Dr. Scott P. Orr, who will help conduct the research.

The study will look at whether Propranolol can reduce veterans' emotional responses to certain memories by cutting down on the accompanying surge of adrenaline, said Orr, who works at the Department of Veterans Affairs Medical Center

in Manchester, N.H.

In initial tests, people given the drug were observed to have reduced physiological responses, such as heart rates, to certain memories, said Orr, who is also part of the department of psychiatry at Harvard Medical School and Massachusetts General Hospital.

Orr stressed that the drug would not erase veterans’ memories. “It isn’t that the memory’s being changed — the memory is still there,” he said. “It’s that the emotional response that is attached to the memory is being reduced.”

But Dr. Judith Broder, a Los Angeles-based psychiatrist who is the founder of a nonprofit organization that provides free mental health services to veterans, said she has some reservations.

“I worry about several things,” Broder said in a Friday e-mail to Stars and Stripes. “First, I believe our soldiers often feel dehumanized by their time in the service. To then ‘treat’ them with a drug that potentially ‘numbs’ them, may further alienate them.”

She also said she fears that the VA, underfunded and facing an increasing number of veterans returning with PTSD, might resort to “cost-effective” solutions, such as giving veterans with PTSD a pill rather than the therapy they need.

“Another issue of concern is that of ‘informed consent,’” she said. “Soldiers are used to following orders. These soldiers are now suffering from a disorder and of course want relief from their suffering. Is it really possible to give informed consent to an experimental procedure under these conditions?”

Orr said in response that the research is not intended to see if Propranolol can produce “emotional numbing.”

“If anything, what it does is it reduces the intensity of the emotion such that the emotional reaction may become more manageable for the person,” he said.

“It is not a replacement for psychotherapy — rather, it becomes an adjunct; it becomes a useful tool for psychotherapy,” Orr said.

As for the issue of informed consent, Orr said researchers “generally bend over backwards” to give people participating in research all the information they need on the potential risks and benefits they would face.

Orr said the upcoming research will be headed by one of his colleagues, Dr. Roger Pittman at Harvard University.

The Army and Pittman are still negotiating how much his grant will be and how the study will un-

fold, said Chuck Dasey, a spokesman for Army Medical Research and Materiel Command at Fort Detrick, Md. Pittman could be awarded up to \$625,000 a year for four years to conduct the research, Dasey said.

COMBAT STRESS BOOSTS HEART DISEASE RISK

(HealthDay News) - Military veterans exposed to combat have a higher long-term risk of heart attacks and strokes than either non-vets or vets not exposed to combat, researchers report.

“Their risk of heart disease is predicted to be higher,” said study author Anna Johnson, a doctoral candidate at the University of North Carolina, Chapel Hill.

Johnson found that, compared to non-veterans, combat veterans’ 10-year risk of heart disease is more than 3 percentage points higher.

She presented the findings Friday at the American Heart Association (AHA) annual conference on Cardiovascular Disease, Epidemiology and Prevention, in Phoenix.

In the study, Johnson and her colleagues followed nearly 5,000 men, including veterans who saw combat, veterans who didn’t, and non-veterans who served as controls. “They came in for visits every few years,” she said, “with about four visits each since the 1980s.”

Researchers looked at measures such as blood pressure, smoking, cholesterol levels and other factors to predict their heart disease risk over the next decade. The men started the study between 1987 and 1989, and the last follow-up questionnaires were conducted in 2001 and 2002.

Johnson’s team found that the mean predicted 10-year risk of heart disease risk was 10.2 percent for the non-veterans, 11.5 percent for the veterans not exposed to combat and 13.3 percent for those exposed to combat.

While others have studied veterans and their

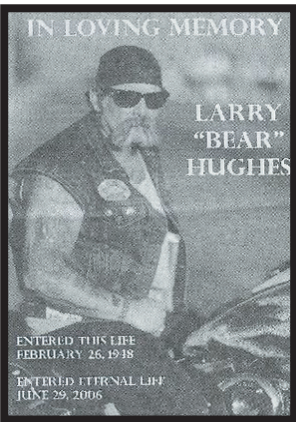
Editor's Note: In the Summer Zephyr a story about the passing of a member of Chapter 785, Orange County, Southern California. The story came from Bill Mimiaga's e-mail newsletter, and following the publication there were some people who questioned the awards accredited to Larry "Bear" Hughes. Bill must have heard the buzz because he wrote me to say that when he wrote the story the chapter's Membership Director was not available, and he relied on sources other than Larry's DD 214 for those awards. Below is the following mail I received following the first exchange

Aloha Tom.....just spoke with Richard Carroll, our new Membership Director. He reviewed “Bears” DD214 and his wife had to help him deciphering the awards as many were Vietnamese. The American awards were the easiest and “Bear” was not the recipient of any Silver Stars. He was though, the recipient of the Bronze Star with Combat “V” and 4 Oak Leaf Clusters and the Purple Heart with 1 Oak Leaf Cluster. The Vietnamese awards were acronyms that Richard could not decipher (Richard’s suffering through a brain aneurysm and his appointment to Membership Director has given him a renewed sense of purpose...we are proud of him. The DD214 did state that “Bear” was a 11F20 LRRP.....that was spelled out and documented.

“Bear” was a hero as far as I am concerned and his advocacy for so many years for Veterans and their families in need is well documented. I hope that this information puts this issue to rest. Please note that Lew Correra was mistaken but not purposely, Lew believed what he told me to be factual. I apologize for writing what was not factual....but at the time I was not able to confirm with the actual DD214.

Please advise me if you need any more info and if in fact that you received this email. Tom, I want to personally apologize to you for having jeopardized your position as the editor of the Zephyr and for any heat that you are taking with this issue.

Semper Fi my friend,
Bill "Monsoon" Mimiaga - Chapter 785



risk of combat, she said “nobody has looked at predicted risk.” And many previous studies did not separate subjects who were in combat from those who were not, she said.

The follow-up time is also longer than in most studies, Johnson noted. “Other studies have looked at shorter-term risk and found limited evidence for a higher risk of cardiovascular events.”

“I was surprised there was such marked effects,” she said.

Deciphering how combat boosts heart risk is beyond the scope of her study, Johnson said. “Is it behavioral? Are they all smoking and not exercising? Is it psychological? I don’t know the underlying mechanisms.”

In a previous study, which Johnson presented last year at another AHA conference, she found that veterans of World War II, Korea and Vietnam who had seen combat were 60 percent more likely to be heavy drinkers than those who had not, and four times as likely to be problem drinkers than those who hadn’t been in the armed forces at all.

She also found that combat vets were 20 percent more likely to be heavy smokers than vets who hadn’t seen combat, and nearly two times as likely to smoke heavily compared with non-vets.

Joseph Boscarino, a Vietnam veteran and senior investigator for the Giesinger Clinic in Danville, Pa., has researched combat exposure and post-traumatic stress disorder (PTSD) for 30 years. He said this new study “adds to the growing literature that combat is related” to heart disease.

But he added an interesting observation, based on his research. “We found combat by itself is not significant when you control for PTSD.”

PTSD is a psychiatric condition triggered by a life-threatening event such as military combat, disaster or serious accident. People with PTSD often suffer from nightmares, flashbacks and other persistent reminders of a past traumatic event.

In other words, Boscarino said, “combat by itself doesn’t make you more at risk for heart disease, it is whether you develop PTSD. It appears that PTSD is a good predictor of heart disease risk.”

More studies are available at the National Center for PTSD <http://www.ncptsd.va.gov/facts/problems/index.html>

MEMBERSHIP APPLICATION

Individual membership is open to Veterans who served on active duty in the US Military (for other than training purposes) from February 28, 1961 to May 7, 1975 or from August 5, 1964 and May7 1975 for Vietnam-era Veterans.

Name _____ Address _____

City _____ State _____ Zip _____ + _____

Phone _____ email _____

Individual membership or Associate membership Dues:
\$20 for Annual___ / \$20 for Renewal___ / \$50 for 3 Year Membership___

Life Memberships:
\$250___ (age 49 and under) \$225___ (50-55) \$200___ (56-60) \$175 (61-65) \$150 (66+)

For individual membership a DD214 is required if not already on file.

Associates of Vietnam Veterans of America is an adjunct organization with VVA, Both Veterans and non-Veterans may join. If joining AVVA you are eligible to be a member of VVA Yes___ No___

Print this page and fill out and mail with DD214 (if needed) to our address above.

If you are a current member, to renew provide your Membership # _____ Chapter _____

HUMOR - IN AND OUT OF UNIFORM

SONGS OF THE 1960s - REDUX

Maybe it was fun being a baby boomer....until now. Some artists of the ‘60s are revising their hits with new lyrics to accommodate baby boomers. They include:

- 01. Herman’s Hermits --- Mrs. Brown, You’ve Got a Lovely Walker.
- 02. The Bee Gees --- How Can You Mend a Broken Hip.
- 03. Bobby Darin --- Splish, Splash, I Was Havin’ a Flash.
- 04. Ringo Starr --- I Get By With a Little Help From Depends.
- 05. Roberta Flack --- The First Time Ever I Forgot Your Face.
- 06. Johnny Nash --- I Can’t See Clearly Now.
- 07. Paul Simon --- Fifty Ways to Lose Your Liver.
- 08. The Commodores --- Once, Twice, Three Times to the Bathroom.
- 09. Marvin Gaye --- Heard It! Through the Grape Nuts.
- 10. Procol Harem --- A Whiter Shade of Hair.
- 11 Leo Sayer --- You Make Me Feel Like Napping.
- 12. The Temptations --- Papa’s Got a Kidney Stone.
- 13. Abba --- Denture Queen.
- 14. Tony Orlando --- Knock 3 Times On The Ceiling If You Hear Me Fall.
- 15. Helen Reddy --- I Am Woman, Hear Me Snore.
- 16. Willie Nelson --- On the Commode Again.
- 17. Leslie Gore --- It’s My Procedure and I’ll Cry If I Want To.



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