Statement of
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For The Record
United States House of Representatives
Committee on Veterans’ Affairs
Subcommittee on Health

With Respect To
“Pending Legislation”

Washington, D.C.

Chairwoman Brownley, Ranking Member Bergman, and members of the subcommittee, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, thank you for the opportunity to provide our remarks on these important pieces of legislation pending before this subcommittee.

**H.R. 234, Korean American VALOR Act**

The VFW does not have a current resolution supporting care and benefits for allied forces.

**H.R. 344, Women Veterans TRUST Act**

The VFW supports this legislation, requiring the Department of Veterans Affairs (VA) to analyze the need for women-specific treatment and rehabilitation programs with drug and alcohol dependency and to carry out a pilot program.

A systematic literature review of articles published between 1980 and 2013 concluded that the women veteran rate of misused substances increased with higher rates of trauma, and
increased suicide and death rates. VA does screen women veterans during their appointments for substance abuse as a way to start the conversation of recovery if warranted. By surrounding themselves with their fellow sisters in arms, women veterans can heal in a comfortable environment with treatments and programs created with their social and biological needs in mind.

Understanding the extent of need and availability for women-specific substance abuse treatment and rehabilitation, and establishing a pilot program is a step in the right direction.

**H.R. 958, Protecting Moms Who Served Act**

The VFW supports this proposal to structure VA’s maternity care coordination programs to provide community maternity care providers with training and support concerning the unique needs of pregnant and postpartum veterans. This legislation would also require a report on maternal mortality and severe maternal morbidity among veterans, infant mortality rate, and additional outcomes focused on racial and ethnic disparities in maternal health.

Women veterans of childbearing age comprise the second largest age group enrolled in VA health care. VA covers 5,000-6,000 delivers per year. A small percentage of women veterans who responded to a VFW survey stated they received prenatal care from VA, and 75% of them continued to receive VA health care after pregnancy. The VFW asks VA and the Center for Women Veterans to continue to use targeted outreach to postpartum women veterans to ensure they continue their care at VA after delivery.

This legislation would provide an understanding of fertility and infertility of women veterans, and shed light where gaps and barriers may exist. VA can use this information to support the vital programs and policies to assist women veterans with healthy pregnancies, deliveries, and postpartum care.

**H.R. 1448, PAWS for Veterans Therapy Act**

With such a high ratio of veterans who have defended our nation being diagnosed with post-traumatic stress disorder (PTSD), VA must provide veterans mental health care options that work best for them. Recent studies show service dogs provide positive health care outcomes in veterans with PTSD. Such studies illustrate a reduction in symptoms from the PTSD checklist, lowered effects of anxiety and depression disorders, as well as a reduced need for psychopharmaceutical medications.

Many studies and anecdotal notes have found veterans with service dogs decrease their use of medications such as opioids for chronic pain linked to PTSD. Veterans who have service dogs also experience increased participation in social settings and overall satisfaction with
life. Also, ensuring the veterans actively participate and receive training will give them accountability and a sense of purpose in their treatment.

The VFW supports this legislation to authorize VA to provide service dogs to veterans with mental illnesses who do not have mobility impairments through grants to eligible organizations. Also, the VFW strongly supports the continuance of care this legislation would require to maintain canine health insurance eligibility. Continuation of care is crucial to overcome any illness successfully, whether it is physical or mental. VA maintaining coverage of a service dog only if the veteran continues to see their physician or mental health care provider every six months, helps to ensure more consistent and open communication between the medical provider and veteran.

**H.R. 1510, Veterans’ Camera Reporting Act**

The VFW supports this proposal to assess VA medical center video camera equipment and the appropriate placement of such equipment.

VA police officers protect veterans, their families, and VA employees by deterring and preventing crime, maintaining order, and investigating crimes. But, VA police officers cannot be everywhere all the time. VA medical center video cameras provide eye in the sky surveillance for public safety.

This legislation would provide a review of VA’s policies and procedures of camera placement, surveillance, equipment maintenance, data storage, and any gaps or barriers VA faces in providing a sense of security and trust to veterans, their families, and VA staff.

**Discussion Draft, DOULA for VA Act**

The number of women veterans using VA for their maternity care is increasing. Service-connected injuries, toxic exposures, depression, anxiety, PTSD, and other mental illnesses increase a woman veteran’s chances of a high-risk pregnancy. Doulas are trained and certified to provide continuous support to the mother during pregnancy, delivery, and postpartum to achieve a healthy newborn. Women veterans should not be denied doulas’ support and services just because they receive health care services through VA.

Doula care improves birth outcomes and reduces health disparities, which increases cost savings. Doulas help prepare the new mother for labor and delivery. According to the Journal of Perinatal Education, doula care during delivery decreases the need for medical procedures like caesarean sections by as much as 28%, and increases Apgar scores. Postpartum doula care includes support for the mother with breastfeeding and addressing any postpartum depression concerns.

The VFW supports this legislation to establish a pilot program to expand VA’s Whole Health
model to include doula services to continue innovating health care and supporting women veterans during this special time of their lives.

**H.R. 2441, Sgt. Ketchum Rural Veterans Mental Health Act of 2021**

The VFW supports the Sgt. Ketchum Rural Veterans Mental Health Act of 2021, which would expand VA’s Rural Access Network for Growth Enhancement (RANGE) program to three new centers, and assess the mental health care needs of rural veterans.

According to a recent VA Health Services Research & Development (HSR&D) cyberseminar on rural suicide prevention, more than half of rural veterans are enrolled in VA and earn less than $35,000 per year. The majority of rural veterans are 65 years of age or older. Even after controlling for access to care, demographics, and diagnoses, rural veterans are 20% more at risk of death by suicide. In the VFW’s COVID-19 survey last year, 64% of veterans from the top 10 rural states indicated they had fewer than five days of poor mental health in the last 30 days, while 8% had 26 days or more.

This legislation would lend to the understanding of rural veterans, gaps, and barriers in rural mental health care, and provide an account of VA’s outpatient mental health care, residential programs, and RANGE program cost savings in rural and highly rural areas.

**Discussion Draft, To clarify the role of doctors of podiatric medicine in the Department of Veterans Affairs**

The VFW supports this legislation to bring clarity to the role of podiatrists within VA.

Podiatry is a vital specialty at VA. These health care professionals often see patients because of issues related to the foot and ankle from chronic conditions, such as diabetes, poor circulation from chronic heart failure, and arthritis. Podiatrists assist veterans in understanding the effects of their underlying health conditions, and in improving and maintaining their quality of life.

**Discussion Draft, Providing Benefits Information in Spanish and Tagalog for Veterans and Families Act**

The VFW supports the proposal that requires all VA fact sheets to be available in English, Spanish, Tagalog, and other commonly spoken languages.

The VFW represents veterans who live throughout the world and use VA health care and benefits. The VFW has posts in Cambodia, Saipan, France, Germany, Guam, Italy, Japan, Korea, Panama, Philippines, Puerto Rico, Taiwan, Thailand, and Australia. The primary language used by VFW members who reside in those U.S. territories or countries may not be English. The VFW also has many members who reside in the United States, but prefer to use
their native language, such as veterans who were born in foreign countries, Native Americans, or Pacific Islanders.

The VFW agrees that VA must address all barriers to access, including language barriers for both the veterans, and their families.

**Information Required by Rule XI2(g)(4) of the House of Representatives**

Pursuant to Rule XI2(g)(4) of the House of Representatives, the VFW has not received any federal grants in Fiscal Year 2021, nor has it received any federal grants in the two previous Fiscal Years.

The VFW has not received payments or contracts from any foreign governments in the current year or preceding two calendar years.