



Veterans Affairs Media Summary and News Clips

28 September 2015

[1. Access to Benefits/Care](#)

1.1 - The Record & Herald News: [Panel aims to get word out to vets on Agent Orange](#) (27 September, Andrew Wyrich, 4.2M online visitors/mo; Woodlawn Park, NJ)
Angelo DeCiuceis served his country in Vietnam from 1966 to 1967. When he left the jungles and swamps, he thought he had left the war behind him – little did he know, his experiences would continue to haunt him nearly six decades later. Since coming home, DeCiuceis has suffered from tremors, breathing difficulties, an embolism on his heart, a spot on his lung, diabetes and other ailments.

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1.2 - Omaha World-Herald: [Work finally starts on Omaha National Cemetery](#) (28 September, Steve Liewer, 2M online visitors/mo; Omaha, NE)
Dirt finally is being dug at the future Omaha National Cemetery. Earth-moving machines have begun clawing out space for roads, buildings, drainage and, eventually, graves in the center of the site at 144th Street and Schram Road, south of Interstate 80 in western Sarpy County. The long-awaited cemetery also has its first employee: Director Cindy Van Bibber, a Grand Island native, who set up shop Sept. 8 in a temporary trailer on the south side of the property.

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1.3 - KTBC-TV (FOX-7, Video): [Hundreds march to raise awareness about veteran suicide](#) (27 September, Bridget Spencer, 476k online visitors/mo; Austin, TX)
Every day, 22 veterans take their own lives. That number is according to a report from the Department of Veteran Affairs. This may seem like a high number, but the number could be higher than reported. Saturday, hundreds of veterans came together at Lady Bird Lake, wearing little more than underwear to bring a touch of humor to a serious problem. Donny O'Malley is a former marine who lost a friend to suicide.

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1.4 - The Florida Times-Union: [VA-operated clinic opening in new St. Augustine location](#) (27 September, Sheldon Gardner, 380k online visitors/mo; Jacksonville, FL)
The St. Augustine Community Based Outpatient Clinic, run by the U.S. Department of Veterans Affairs, will open a new location Monday. The clinic's temporary location at 195 Southpark Blvd. in St. Johns County is now open, according to Cindy Snook, a VA spokeswoman. The clinic, which is a modular facility, will host a dedication and ribbon cutting at 11 a.m. on Oct. 30.

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1.5 - The Monitor: [Local Vietnam veteran chronicles battle with PTSD](#) (27 September, Emma Perez-Trevino, 351k online visitors/mo; McAllen, TX)
It would take Rendon some 25 years for the VA to recognize some of his service-connected ailments. He filed his first claim with the VA in November 1980 and it has been a lifelong struggle with the VA. "Even when they know exactly what it is, when you tell them, when you can show them everything, they will still deny you and continue to deny. It's a game the VA plays. It's a game they play today. It's a game they play every day," he said.

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1.6 - Arizona Daily Star: [Dementia care of future may be at home](#) (27 September, Stephanie Innes, 315k online visitors/mo; Tucson, AZ)

Aging, even with dementia, does not have to mean frequent doctor visits, frightening hospital stays and inevitable placement in a nursing home. Under a reconfigured health system that has growing support, doctors would visit older, chronically ill patients in their homes. So would social workers, nurse's aides, pharmacists and other health professionals. Patients who needed hospital-level care might be admitted to their own beds at home with oversight from home health providers.

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1.7 - The Journal Times: [Journal Times editorial: More must be done to cut veterans' suicide rate](#) (27 September, 219k online visitors/mo; Racine, WI)

A recent report by the Chicago Tribune, featured in the Sept. 20 Journal Times, shined a light on an issue that deserves more of our attention: The suicide rate among military veterans. Veterans kill themselves at a rate nearly four times higher than the rate for nonveterans: 48.1 veterans per 100,000 people versus 12.3 nonveterans per 100,000. The U.S. Department of Veterans Affairs estimates that an average of 22 veterans commit suicide every day.

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1.8 - The St. Augustine Record: [Temporary VA clinic opens in St. Johns County](#) (27 September, Sheldon Gardner, 211k online visitors/mo; Saint Augustine, FL)

The St. Augustine Community Based Outpatient Clinic, run by the U.S. Department of Veterans Affairs, will open a new location today. The clinic's temporary location at 195 Southpark Blvd. in St. Johns County is now open, according to Cindy Snook, a VA spokeswoman. The clinic, which is a modular facility, will host a dedication and ribbon cutting at 11 a.m. on Oct. 30.

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1.9 - Morning Sun: [Gratiot County VA gets new location](#) (27 September, 167k online visitors/mo; Mount Pleasant, MI)

Effective Oct. 1, the Gratiot County Department of Veterans Affairs will be located in the Gratiot County Courthouse at 214 E. Center St. in Ithaca and will be open five days per week. The office secretary, Mary Bates, will now be working full time. New procedures will be in effect in order to increase efficiencies in service to veterans.

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1.10 - The Yuma Sun: [Veteran gets bike with help from VA Center, others](#) (27 September, Rachel TwoGuns, 119k online visitors/mo; Yuma, AZ)

Veteran Will Bailey had been in need of help for decades, but it was not until six months ago that he took the first step in becoming self-sufficient when he decided to introduce himself at the Yuma Veteran Affairs (VA) Center. At the VA Center, they offered him many services such as readjustment counseling and even got him enrolled at AWC to pursue a welding certificate, a trade he had 30 years of experience in but holds no official credentials.

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1.11 - Jefferson Public Radio Network (Audio): [Veterans Administration Tackles Vets' 80 Percent Obesity Rate](#) (26 September, Conrad Wilson, 71k online visitors/mo; Ashland, OR)

A long list of circumstances related to age and their military service contribute to the fact that nearly 80 percent of veterans in the US weigh too much. Also, more than 25 percent are diabetic, nearly three times the national average. Now, the Veterans' Administration is working to combat those statistics with nutritional education and cooking classes to teach vets better eating habits.

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1.12 - The Leavenworth Times: [IN-DEPTH: PTSD still may carry stigma](#) (27 September, John Richmeier, 53k online visitors/mo; Leavenworth, KS)

About 60 percent of men and 50 percent of women in the United States will experience at least one traumatic event in their lives. Of those, about 8 percent of the men and 20 percent of the women will develop post-traumatic stress disorder. About 60 percent of men and 50 percent of women in the United States will experience at least one traumatic event in their lives.

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[2. Ending Veterans' Homelessness](#)

2.1 - KQRE-TV (CBS-13): [Albuquerque "Stand Down" offers free items for homeless/near-homeless military veterans](#) (27 September, 1.1M online visitors/mo; Albuquerque, NM)

Homeless and near-homeless veterans can receive free clothing, food and services at the 2015 Project Stand Down & Hands Up—the annual “stand down” for homeless and near-homeless veterans on Thursday, October 15 and continuing Friday October 16 in downtown Albuquerque. This year's stand down is at Noon Day Ministries, located at 2400 2nd Street NE. October 15 is set aside for veterans only from 9am-3pm; October 16 is open to veterans and non-veterans from 9am-2pm.

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2.2 - The Record: [Troy meets the challenge to end veterans' homelessness](#) (27

September, Jennie Grey, 188k online visitors/mo; Troy, NY)

When First Lady Michelle Obama initially announced the Mayors' Challenge to End Veteran Homelessness by 2016, she noted that returning veterans often kiss the ground when they first touch American soil in coming home. She said it would be a shame if those veterans then had to sleep on the ground because they had no home – and now that won't happen in Troy.

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2.3 - The Post-Journal: [Local Agencies Collaborate To Aid Homeless Veterans](#) (28 September, A.J. Rao, 144k online visitors/mo; Jamestown, NY)

Although homelessness among veterans is not believed to be as widespread in Chautauqua County as other parts of New York state, local leaders and organizations still argue that one homeless veteran is one too many. According to Gary Chilcott, director of the county's veteran services branch in Jamestown, it remains unclear how many of the approximately 11,000 veterans in Chautauqua County are homeless.

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2.4 - The Beaufort Gazette: [Vosicky: The lessons of a single homeless night](#) (27

September, Brian Vosicky, 30k online visitors/mo; Beaufort, SC)

Most of us live similar lives, at least in terms of the basics. We go to school or work a job and, at the end of the day, come home to a place that is warm and comfortable. There is food and a bed to lie down in and hot and cold running water. There are lights to drive away the darkness and, if we are so inclined, entertainment in a variety of electronic forms.

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[3. Ending the Claims Backlog – No Coverage](#)

[4. Veteran Opportunities for Education/GI Bill](#)

4.1 - RCR Wireless News (Video, Audio): [Veteran Affairs GI Bill Funds Wireless Workforce Apprenticeships – Inside Telecom Careers Eps 14](#) (27 September, Jeff Mucci, 73k online visitors/mo; Austin, TX)

Rosye Cloud, Senior Advisor for Veteran Employment for the Department of Veterans Affairs, describes how veterans and employers can leverage Veteran Affairs GI Bill for The Telecommunications Industry Registered Apprenticeship Program (“TIRAP”). Over 250,000 veterans exit the military each year. According to Cloud, these veterans “are ready to work” and offer employers candidates with proven leadership skills and a “grit factor” not often found with other potential employee segments of the market.

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[5. Women Veterans](#)

5.1 - WABC (ABC-7, Video): [Here and Now](#) (27 September, 845k online visitors/mo; New York, NY)

This three minute clip covers the service Military Women in power offers to women veterans in dealing with VA and getting VA services and benefits. It also references the difficulty women who have experienced sexual assault experience in returning to civilian life.

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[6. Other](#)

6.1 - The Chicago Tribune: [Column: A solution to the government's VA problem](#) (27 September, Jonah Goldberg, 14.2M online visitors/mo; Chicago, IL)

There is only one guaranteed way to get fired from the Department of Veterans Affairs. Falsifying records won't do it. Prescribing obsolete drugs won't do it. Cutting all manner of corners on health and safety is, at worst, going to get you a reprimand. No, the only sure-fire way to get canned at the VA is to report any of these matters to authorities who might do something about it.

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6.2 - The Times: [The gourd that made Streator famous](#) (27 September, 283k online visitors/mo; Ottawa, IL)

How else, at this point, can one describe the Department of Veterans Affairs? Last week VA whistleblowers from across the country told a Senate committee the department has failed to hold supervisors accountable more than a year after a scandal that broke over chronic delays for veterans seeking medical care and falsified records covering up the waits, according to the Associated Press.

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6.3 - Midland Reporter-Telegram: [Carson's ideas to reform VA concern local veterans](#) (27 September, Erin Stone, 70k online visitors/mo; Midland, TX)

The Department of Veterans Affairs has encountered much criticism given the sometimes fatal consequences of its long waiting lists. However, Republican presidential candidate Dr. Ben Carson's recent comments about moving veterans' health care partially into the privatized realm has veterans -- including those who are well aware of the flaws of the current VA -- up in arms.

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6.4 - Iowa State Daily: [Iowa State hosts sixth annual Veterans Conference](#) (27 September, Alex Connor, No user info; Ames, IA)

Iowa State makes many attempts to give back to the military community and it will do so again this Monday. Iowa State will host the sixth annual Iowa Statewide Veterans Conference. Registration begins at 8:30 a.m., and the cost of the conference is \$40. Student veterans and military personnel along with their family members can attend the event for free.

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1. Access to Benefits/Care

1.1 - The Record & Herald News: [Panel aims to get word out to vets on Agent Orange](#) (27 September, Andrew Wyrich, 4.2M online visitors/mo; Woodlawn Park, NJ)

Angelo DeCiuceis served his country in Vietnam from 1966 to 1967. When he left the jungles and swamps, he thought he had left the war behind him – little did he know, his experiences would continue to haunt him nearly six decades later.

Since coming home, DeCiuceis has suffered from tremors, breathing difficulties, an embolism on his heart, a spot on his lung, diabetes and other ailments. Strangely, his children also began to contract ailments that never existed in his family.

So on Sunday afternoon DeCiuceis and his wife, Doris, decided to drive from their home in Elmwood Park to the VFW Hall in Little Ferry to hear a panel of experts describe the hardships – and deadly diseases – they believe veterans of the Vietnam War have endured after being continuously exposed to Agent Orange.

“This meeting really opened my eyes,” Doris DeCiuceis said. “We didn’t really know the extent of Agent Orange and how lasting it really is.”

The New Jersey State Council of the Vietnam Veterans of America hosted its fourth town hall meeting of the year in Little Ferry on Sunday, with the goal of educating veterans of not only the Vietnam War, but other wars as well, of the devastating effects that exposure to toxic chemicals, like Agent Orange, can have on their health and the health of their families.

The event drew dozens of veterans from the Vietnam War and the wars in Afghanistan and Iraq.

The seven-person panel of experts was mostly made up of Vietnam veterans who have studied the effects of Agent Orange from the moment they returned home after the war. Each one of them told emotional stories of how they believe their time fighting on the Asian peninsula has directly caused countless heartaches that have befallen their families.

Bob Hopkins, who served near the Cu Chi district of Vietnam in the war, said 12,078 “wet hits,” or air runs meant to defoliate the area with the use of Agent Orange and other herbicides, took place in his area over the course of the war.

“The stuff was in the water, in the soil, it was everywhere,” said Hopkins, of Allenhurst. “I never had a plane spray me directly, that I know of, but the whole area was contaminated.”

When Hopkins returned home, both his son and daughter started to develop diseases that no one in his family had a history of having. Reflex sympathetic dystrophy, an incurable, chronic disease, was diagnosed in his daughter.

“I can’t tell you 100 percent that Agent Orange was what did this,” Hopkins said. “But no one in my family has ever had a history of that disease.”

The discovery of such diseases in children of Vietnam veterans is what troubled the panel, they said, and was why they wanted to spread awareness – with the hopes of future generations

taking on the fight. The panelists said it is possible that the effects of Agent Orange exposure can be passed down through seven generations of a family.

Paul Sutton, who served in Vietnam from 1964 to 1965 and again from 1967 to 1968, described how many of his children were born with various medical ailments. Their conditions caused him to begin speaking out.

“I got into this game because I need to do something with all of my anger,” said Sutton, of Ocean View. “Obviously, my Vietnam experience had something to do with my children and their problems.”

The panel members urged those in attendance to contact their representatives in Congress and ask them to vote for veteran assistance bills.

After the panelists spoke, many members of the audience asked them about how to receive help from the Veterans Administration and shared all-too-familiar tales of their children having conditions they believe stemmed from Agent Orange exposure.

“My husband is a retired veteran, and he served in Vietnam for two tours,” said Joann Townsend, of Wallington. “I’ve had issues with my children. I wanted to see what is out there in terms of benefits and support for all of this. These veterans didn’t get recognized for everything they did, and I wanted to show my respect for their service.”

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1.2 - Omaha World-Herald: [Work finally starts on Omaha National Cemetery](#) (28 September, Steve Liewer, 2M online visitors/mo; Omaha, NE)

Dirt finally is being dug at the future Omaha National Cemetery.

Earth-moving machines have begun clawing out space for roads, buildings, drainage and, eventually, graves in the center of the site at 144th Street and Schram Road, south of Interstate 80 in western Sarpy County.

The long-awaited cemetery also has its first employee: Director Cindy Van Bibber, a Grand Island native, who set up shop Sept. 8 in a temporary trailer on the south side of the property.

“It’s nice to know it’s actually happening,” Van Bibber said. “We’ve been talking about it for so long.”

The cemetery has been discussed for more than a decade, but it wasn’t possible because of a Department of Veterans Affairs rule dictating that at least 170,000 veterans live within a 75-mile radius of any proposed cemetery. The nearest national cemetery is 175 miles south in Leavenworth, Kansas, and the only other one in Nebraska is in Maxwell, 270 miles west of Omaha.

Eastern Nebraska and western Iowa fell well short of that threshold. But at the urging of Nebraska’s congressional delegation, the Obama administration relaxed those rules in 2009 and began budgeting for the cemetery the next year.

Choosing a site proved controversial. Some community leaders in Springfield, just south of the cemetery, worried that it wouldn't fit in near future industrial development planned in the Highway 50 corridor. And some Bellevue-area veterans preferred a site in that city, nearer to Offutt Air Force Base.

In 2012, a VA committee selected the 144th Street site and the agency purchased it for \$6.2 million. The cemetery is set in rolling hills that had been used for farming. The eastern part of the property will continue as cropland until it is needed.

"This is going to be one magnificent site," Van Bibber said. "I don't think they could have found a prettier piece of property than this one."

Sticking with its previous schedule, the VA plans to open a small portion of the cemetery for in-ground burials about a year from now, Van Bibber said. A temporary administrative and maintenance center will be built near the entrance, along Schram just east of 144th.

Schram currently is a gravel road, but Van Bibber said the VA will pave it from 144th to the cemetery gate.

Builders will continue with construction on the first phase of the cemetery into 2018. That will include a circle and memorial walkway, 5,500 in-ground and above-ground plots for casketed and cremated remains, permanent administrative and maintenance buildings, an honor-guard building, a flagpole assembly area and a public information center with an electronic gravesite locator. It will cost \$28.9 million and cover 60 acres.

There will be space for expansion, Van Bibber said. Ultimately there will be space for thousands more burial sites.

Any veteran who left the service with anything other than a dishonorable discharge is eligible for a burial plot, opening and closing of the grave, a marker and permanent, professional care, Van Bibber said. Spouses are eligible for free burial, too, as are minor and adult children who become permanently disabled before age 23.

Spaces cannot be reserved in a national cemetery. Van Bibber said plots are provided as they are available, though spouses will be buried together.

Burials may be scheduled through the VA's national call center in St. Louis (800-535-1117). A DD214 military discharge certificate is required, but Van Bibber said the VA will help to obtain one for veterans or their family members who don't have one.

For Van Bibber, the return to Nebraska is a dream come true. She left Grand Island in the early 1980s, at age 19, to join the Army, seeking wider horizons and a way to pay for college.

She stayed for 10½ years, a spell that included assignments in South Korea, Kansas and Belgium. She worked at a state veterans cemetery near Richmond, Virginia, from 1997 to 2006 before joining the VA.

Van Bibber has served at four VA cemeteries in the Western U.S., most recently as assistant director of Riverside National Cemetery in California.

Ever since she heard that a cemetery would be built near Omaha, Van Bibber hoped she would be back in Nebraska.

"I jokingly told my colleagues 'I'm going to open that cemetery,'" she said.

"Now here I am, right here in my home state. One day I plan to be buried here as well."

For the moment, her makeshift office is a lonely place. But she is eager to talk to civic groups and tell them about the benefits of VA cemeteries. Van Bibber also hopes to work with school groups and to recruit volunteers to support the cemetery.

"There'll be plenty of things for people to do," she said.

Local veterans couldn't be happier to see construction begin. Allen Holley, a Korean War-era vet from Bellevue, was so excited to learn that Van Bibber had arrived, he visited her office last week and arranged an invitation for her to speak in October at Richmond Village, his retirement community.

"People here will be thrilled this is finally coming to pass," he said.

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1.3 - KTBC-TV (FOX-7, Video): [Hundreds march to raise awareness about veteran suicide](#)
(27 September, Bridget Spencer, 476k online visitors/mo; Austin, TX)

Every day, 22 veterans take their own lives. That number is according to a report from the Department of Veteran Affairs. This may seem like a high number, but the number could be higher than reported.

Saturday, hundreds of veterans came together at Lady Bird Lake, wearing little more than underwear to bring a touch of humor to a serious problem.

Donny O'Malley is a former marine who lost a friend to suicide.

"When I was done crying, I decided there was something I needed to do to give meaning to his death," O'Malley said.

He formed the organization, Irreverent Warriors. Irreverent means lacking seriousness for something that otherwise is considered serious. O'Malley says it's a way to cope in the armed forces.

"If somebody dies, or blows their legs off, it sucks for a while but the jokes start up very soon after, because the other option is to cry all the time," O'Malley said.

Saturday, he gathered hundreds of combat and non-combat veterans to march in little more than their silkies. It's a gesture in honor of the 22 who kill themselves daily, "Everybody keeps it politically correct and very soft and gentle and they post all these sad pictures of people killing themselves. I look at this stuff and I'm like that doesn't make me any less likely to kill myself it makes me more sad than I was before," O'Malley said.

They marched down Riverside Drive, staying behind for their fellow marines and soldiers. They displayed the meaning of "Semper Fidelis."

"It's just a saying that came around and it's just "always faithful, we're always going to be there for each other," Mathew Frederick, a marine, said.

O'Malley believes if his friend Artem Lazukin were alive, he would approve of the fun these vets are having.

"He loved my humor. When I was in combat, we used humor to get through everything," O'Malley said.

Sometimes all it takes is an unconventional method, to bring a serious problem to the forefront.

Organizers say hikes are spreading around the country and are going on in more than 50 cities. If you or someone you know is considering suicide, call the Veterans Crisis Line at 1-800-273-8255.

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1.4 - The Florida Times-Union: [VA-operated clinic opening in new St. Augustine location](#) (27 September, Sheldon Gardner, 380k online visitors/mo; Jacksonville, FL)

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The clinic's temporary location at 195 Southpark Blvd. in St. Johns County is now open, according to Cindy Snook, a VA spokeswoman. The clinic, which is a modular facility, will host a dedication and ribbon cutting at 11 a.m. on Oct. 30.

St. Johns County has been working with the VA for years to help the clinic get a new location. However, various issues slowed the process down, and the VA stayed at the 1955 U.S. 1 S. location past the deadline at the end of March. Because of that, the VA has been paying fines and other funds to stay and to have St. Johns County take care of the facility.

The property at 1955 U.S. 1 was sold to Lowe's for about \$8 million, according to a previous Record report.

The VA is still working on getting a permanent facility for a clinic in St. Johns County, and details such as a location have not been announced.

"Veterans are all relieved to see the move being made," said Bill Dudley, chairman of the Veterans Council of St. Johns County.

Dudley said the move removes some of the frustration and angst veterans have had about where they would receive health care. It also is good from the taxpayer's standpoint because the VA is not paying extra for staying past the deadline. The next hurdle is a permanent site, Dudley said.

But, he said, "We're happy now."

The St. Augustine clinic was closed Thursday and Friday for the move to the interim clinic. Hours of operation at the interim clinic will be 8 a.m. to 4:30 p.m.

The number of the new clinic was not clear, but the number of the clinic at 1955 U.S. 1 S. was 829-0814. People with emergencies should call 911.

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1.5 - The Monitor: [Local Vietnam veteran chronicles battle with PTSD](#) (27 September, Emma Perez-Trevino, 351k online visitors/mo; McAllen, TX)

Sleep for Vietnam veteran Fred Rendon Jr. was not an option.

"It's a good time to die," he explained.

"It's a good time to get killed," Rendon said.

Author of the just released "My Battle With PTSD," Rendon chronicles his battle with Post Traumatic Stress Disorder, which shadowed his life for years.

For the now 67-year-old Rendon, who has lived in California, Dallas, Brownsville, McAllen and now Harlingen, it all started when he was 18 years old.

"I felt there was something wrong with me when I returned," Rendon said of when he came home in 1967 after his tour in Vietnam in 1966. He didn't know what was wrong with him. Nobody did.

"I knew that I couldn't be around people any more," he recalled.

"I felt very uncomfortable. I hated to look people in the eye."

Writing the book, he hopes, leads to a better understanding of the disorder, and helps families of veterans understand, but also know it is manageable.

His feelings of desperation upon his return from Vietnam were in sharp contrast to his life prior to joining the Marine Corps in 1966.

"Before Vietnam, I was out singing in little clubs, night clubs. That is when the Beatles first came out," he reminisced.

A musician, Rendon had been a backup vocalist in a group with Dusty Hill and Rocky Hill, who would subsequently be in a group that became the American rock band ZZ Top. "But when I returned I couldn't be around people. That was part of the question of, what's going on with me?"

"Everything changed. I didn't know why," he recounted.

At the time, little did he know he would embark on a life filled with inner turmoil, drugs, alcohol, marital problems, and, although able to find jobs, he wasn't able to keep them.

"As time passed, I continued feeling more and more worthless. I would wake up hung over or simply so depressed that I couldn't go to work," Rendon recalled.

"I couldn't understand myself. Sometimes I felt like fighting and then sometimes I felt overwhelmingly scared."

When in Vietnam one day, three guards had been on perimeter duty about 100 yards from his post. "All three of them fell asleep at the same time, and the next morning they were found. All three of them had their throats slit," he said.

"For me that was a certain wakeup call — I'm not sleeping anymore until I get home."

But when home, he couldn't sleep either.

His mother later told him that, "I couldn't sleep at night. I would scream and yell, had nightmares. I couldn't sleep at night."

"Those are some of the things I brought back with me, but it never dawned on me to put that and this together. I was 18 years old. I had no idea. I kept getting into trouble because I would drink to calm myself down. Then drinking became a problem. I began drinking too much, but that is the only thing I could do to let me rest for a little while," he recounted.

He sought help the year after his return. He felt nervous all the time, sure someone would attack him from behind. He felt very paranoid.

A psychiatrist dismissed Vietnam right away.

"They said probably when I got home my parents had separated right before I got back and something about an Oedipus complex — you want to marry your mother, and hate your father. Oh my God!" he said. "But that's what they said," Rendon recalled. "But all my brothers were there, my mother was there, everybody was the same, except me. I had changed dramatically."

"I had participated in shooting and probably killed some people and watched people get killed. That was part of being there, seeing death and dealing with death. But I didn't think it affected me," he said.

Soon after he arrived in California from Vietnam, he was hitchhiking in uniform and a motorist tried to strike him. "Too many people were upset with us. That added to the confusion," he said.

Rendon also chronicles his experiences with the U.S. Department of Veterans Affairs. "I found out real quick they didn't like veterans," he said, recalling he was asked at a VA hospital how much money he planned on getting out of the VA.

"I had no idea there was compensation. I just wanted to know what was wrong with me," he said.

"The VA is a mess and it has always been a mess. It was all about them. Their goal became how do we turn veterans down?" Rendon said.

Veterans die waiting for assistance. “A dead veteran is a dead claim,” he observed.

It would take Rendon some 25 years for the VA to recognize some of his service-connected ailments.

He filed his first claim with the VA in November 1980 and it has been a lifelong struggle with the VA.

“Even when they know exactly what it is, when you tell them, when you can show them everything, they will still deny you and continue to deny. It’s a game the VA plays. It’s a game they play today. It’s a game they play every day,” he said.

His life changed in 2006 when he discovered a counseling organization in Dallas called Pathways. The nonprofit organization notes it has several missions, including reaching out to veterans and their families in helping them find the piece of themselves left behind on the battlefield.

“It helped immensely and turned my life around,” he said, adding this is one of the reasons he wrote the book, to tell veterans and their families there is help.

“If you don’t do something, it will stay with you all your life. It stays with you,” he said.

Rendon tries to stay focused and optimistic.

“You don’t see when you’re walking how far you have walked. I don’t turn and look back. I just keep walking. I just keep walking and that’s what I do,” he said

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1.6 - Arizona Daily Star: [Dementia care of future may be at home](#) (27 September, Stephanie Innes, 315k online visitors/mo; Tucson, AZ)

Aging, even with dementia, does not have to mean frequent doctor visits, frightening hospital stays and inevitable placement in a nursing home.

Under a reconfigured health system that has growing support, doctors would visit older, chronically ill patients in their homes. So would social workers, nurse’s aides, pharmacists and other health professionals. Patients who needed hospital-level care might be admitted to their own beds at home with oversight from home health providers.

A leading voice pushing for such change is Dr. Mindy Fain, chief of Geriatrics, General Internal Medicine & Palliative Medicine at the University of Arizona College of Medicine in Tucson. On Oct. 1, Fain will begin her term as president of the American Academy of Home Care Medicine.

She and other experts on aging say change is sorely needed in the next decade as the population ages. The first step, they say, is educating health providers in how to care for older people, including in a home setting.

The number of Arizonans with Alzheimer's disease is expected to grow by 66.7 percent by 2025, a greater rate than any other state in the nation except Alaska, U.S. census figures show.

That growth is directly related to age. The older one gets, the higher the risk of Alzheimer's, which is one of the most devastating diseases of aging and one that often pushes patients into assisted living or skilled nursing facilities. In Arizona, 22 percent of residents are projected to be over age 65 by 2030, census figures show.

"Even someone falling at home should not be the reason to be in a skilled nursing facility," says Fain, who is also co-director of the UA Center on Aging. "We should, as a community, be able to provide the support to lift them up and put them back in their chair or bed as it is better for most people and less expensive than institutional care."

In the future, Fain and others say primary care providers — physicians, behavioral health professionals and even dentists and podiatrists — would visit chronically ill seniors, not the other way around. Instead of building more memory care facilities, new systems and additional programs like adult day care would help people with Alzheimer's disease and other forms of dementia remain at home throughout their entire lives.

DEMENTIA PREVALENCE

An oft-cited study in the journal *Neurology*, based on 2010 U.S. census numbers and published in 2013, said the likelihood of someone over age 85 having Alzheimer's disease is 1 in 3.

While there's some evidence that rates have declined somewhat because of improvements in cardiovascular health, growth in the aging population means the disease still poses a major societal challenge.

An estimated 32,000 Pima County residents will develop Alzheimer's disease within the next 10 years, the Alzheimer's Association — Desert Southwest Chapter estimates. Thousands more will develop other forms of dementia.

People with dementia often would benefit the most from at-home services, says Dr. Bruce Leff, a professor of geriatric medicine at the Johns Hopkins School of Medicine in Baltimore. Leff helped develop a program known as "Hospital at Home," which is gaining traction across the country.

There will always be a need for hospitals for the sickest patients — Hospital at Home does not attempt surgery at home, for example. But patients with conditions such as community-acquired pneumonia, congestive heart failure and cellulitis are admitted as inpatients to their own beds at home and visited by a "home hospitalist."

"People with dementia and cognitive impairment are at a very high risk when they go to the hospital," Leff says. "Those are the people who wander out of their hospital bed at 3 in the morning and fall and crack their head or break their hip.

"Doing what you can to keep them out of the hospital is the best kind of care."

"HOSPITAL-CENTRIC"

The U.S., including Arizona, is facing hefty bills for taking care of its elderly population, particularly those with dementia, who incur higher costs and largely rely on the government to finance their care.

Medicaid, for low-income patients, pays for nursing home and other long-term care services. The high use of these services by people with dementia translates into high costs for the Medicaid program.

Arizona's Medicaid program for the elderly and physically disabled, called the Arizona Long Term Care System, is expected to cost \$1.4 billion this fiscal year. The state's share of that cost is estimated at \$441 million, says an analysis by Arizona's Joint Legislative Budget Committee.

Nationwide, the Rand Corp. estimates the annual costs of dementia care in the U.S. at \$159 billion to \$215 billion per year — costs the nonprofit think tank says are similar to or greater than the costs attributable to heart disease or cancer. Those costs could more than double by 2040, the group says.

The American Academy of Home Care Medicine is lobbying for insurance coverage of support services like coordination of care.

"We are very hospital-centric," says Fain, of the UA. "Hospitals are great and lifesaving, they are tremendous places. But our health system was set up to take care of the 50-year-old with the heart attack, the 30-year-old with appendicitis. We're not set up to take care of an aging society with accumulating chronic conditions, many of whom are going to develop dementia."

INDEPENDENCE AT HOME

Recent studies based on the Independence at Home pilot program created through the Affordable Care Act show that caring for chronically ill elderly patients at home, rather than in doctors offices and hospitals, is preferred by patients, results in fewer medical complications and saves 15 to 20 percent of the costs per patient.

Independence at Home, which began in 2012, was created based on the success of the "home-based primary care program" operated by the Department of Veterans Affairs for more than 30 years in all 50 states and the District of Columbia.

The program provides chronically ill Medicare beneficiaries with primary care services at home. In its first year, 17 practices — none of them in Arizona — served more than 8,400 patients. In July, President Obama extended the program from three years to five.

A federal analysis found that Independence at Home participants saved more than \$25 million in a year — an average of \$3,070 per beneficiary.

WORKFORCE SHORTAGE

A major obstacle to moving more primary care into a home setting, the UA's Fain says, is that not enough healthcare providers are trained for it — or even trained to care for elderly people.

"We train doctors to be in hospitals," she says. "There aren't enough doctors or nurses who really understand what home care is."

“If there is any crisis we have, it’s geriatric workforce development. You could go through nursing school, or social work school, and not be exposed to geriatrics.”

Indeed, Leff of Johns Hopkins says it’s a challenge to find providers trained to work for Hospital at Home programs. He compares the home-based medical provider to the hospitalist — a position that was unheard of 20 years ago and yet is now commonplace. Hospitalists are physicians whose primary professional focus is the care of hospitalized patients.

“That field did not exist. It was based on an economic model that paid them a good wage to do work that they didn’t mind doing,” Leff says.

Arizona may be heading in that direction. The state’s Alzheimer’s Task Force released a state plan last week that includes expanding our “dementia-capable” workforce.

Also, last summer the University of Arizona Center on Aging was awarded a \$2.5 million, three-year federal geriatric workforce enhancement grant to prepare the health-care workforce to respond to needs associated with advancing age. The money will go toward comprehensive geriatric education and training for health providers and students, including nurses, physicians, nurse practitioners, physician assistants, pharmacists and social workers. It will include training on working in home sites, and with patients who have Alzheimer’s disease.

Fain is co-principal investigator of the grant along with Jane Mohler, associate director of the UA Center on Aging. Mohler says the grant will focus on educating community health workers who interact with low-income, underserved, often Spanish-speaking, elders and their families.

HOSPITAL AT HOME

The natural next step from Hospital at Home is Independence at Home, Leff says.

Already, Cedars-Sinai in Los Angeles has a hospital-at-home program. The Geisinger Health System of Pennsylvania is developing one and so is Centura Health in Colorado Springs.

“There are probably a bunch of others that I don’t even know about,” Leff says. “The interest is growing, not just among passionate, mission-driven doctors but now you are starting to see interest from large health systems, interest from managed care systems, private venture, from the slew of forces that can actually push the field forward.”

The model can work even for people who live alone, he says.

“We did a multi-site national study in the early 2000s and about one-third of our patients lived alone,” he says. “If they needed help with their daily activities — it’s really quite inexpensive to pay to have a nurse’s aide in the home compared to the cost of sitting in a hospital bed. If you just get into a hospital bed, before they give you the first aspirin, that’s \$2,000.”

STRESS

People with dementia typically are in more care settings and experience more transitions between care settings than do older adults with other chronic conditions, says a 2014 Rand policy blueprint on dementia.

Those changes are harder on people with dementia than they are for non-dementia patients. And especially if they follow a hospital stay, they carry major risk of medical errors and infections, stress and agitation that can lead to hospital readmissions and worsening of delirium, the report says.

But caregivers often reach a point where they see no choice but to put a family member into a facility because of falls, wandering or “sundowning,” where their loved one is up all night.

Home visits could help some of those patients, but not all of them are open to the idea. Dr. Paul D. Kartchner, a Tucson physician who makes house calls, says home visits can lead to “an easier and better exam,” but he’s had patients decline them.

“They say no, that their house is messy,” Kartchner says. “I don’t see it ever replacing office visits, but it’s definitely got a place, especially if you know a patient well and you are monitoring their condition.”

The UA’s Fain says the idea is not to send sick people home as a way of saving money. And it’s not about having a primary-care doctor who does house calls. It’s about a continuum of care for people who need support starting at the early stages and moving all the way to full care at home.

For the right patient, “that is the kind and right thing to do,” Fain says. “Maybe they wouldn’t have to go into assisted living or skilled nursing.”

The key, she says, is developing a system that offers options.

“We should be able to anticipate and prepare a family, be there when they need us, and transition them according to their goals, preferences, and values,” she says.

“The system is changing. And it’s changing pretty quickly.”

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1.7 - The Journal Times: [Journal Times editorial: More must be done to cut veterans' suicide rate](#) (27 September, 219k online visitors/mo; Racine, WI)

A recent report by the Chicago Tribune, featured in the Sept. 20 Journal Times, shined a light on an issue that deserves more of our attention: The suicide rate among military veterans.

Veterans kill themselves at a rate nearly four times higher than the rate for nonveterans: 48.1 veterans per 100,000 people versus 12.3 nonveterans per 100,000. The U.S. Department of Veterans Affairs estimates that an average of 22 veterans commit suicide every day. That estimate includes all veterans, young and old, male and female, from conflicts past and present.

The Tribune’s report focused on the work of Tonnia Hinshaw and her colleagues in the suicide-prevention office of a VA hospital in North Chicago, Ill. Hinshaw is on the front line of this fight.

“I just want you to know that I’m about to check out,” a caller told her. “There’s a train track nearby. I can just sit myself down there and do it.”

Hinshaw, a social worker, recognized the man's voice, which was slurred from alcohol. A 62-year-old Vietnam veteran, he had called before and told her about his struggles with post-traumatic stress disorder.

Now, he broke into tears as he explained that he had lost his apartment, become homeless and, on this afternoon, been drinking for several hours.

For 90 minutes, Hinshaw talked to the veteran about his life and his family while attempting to get him to reveal where he was. Police found the man, unharmed and took him to the hospital. After months of intensive therapy, the veteran has since reconnected with his family and found an apartment. He sometimes stops by Hinshaw's office to say hello.

Today, Hinshaw sees the man as proof that people in crisis can be pulled back from the brink. "If they are calling me," she says. "They are reachable."

We owe it to our veterans to make sure that Tonnia Hinshaw, and all the men and women who work with veterans, have the resources necessary to make a human connection with veterans on the edge.

We owe it to them because veterans have put themselves in harm's way to protect us and to protect this nation. We need to do more specifically in the area of veteran suicide prevention because these men and women are more likely to keep their pain to themselves, to be unwilling or unable to talk about their experiences with those who have not had the same experience.

Toward that end, we'd like to see more government investment in peer-to-peer counseling. It's human nature to open up a little more to someone who's shared your experience.

We think more should be done to prevent at-risk veterans from reaching the point the veteran in Hinshaw's phone conversation had reached, starting with psychological evaluations at the time of the service member's discharge. We're also in favor of families being involved, as early as it's determined to be appropriate, in the therapeutic component of veterans' reintegration. The earlier a veterans' loved ones can be brought in to help, the better.

We'd like to see the VA put its support behind initiatives such as veterans hiking the Appalachian Trail upon their return home to clear their heads.

On Sept. 8, KGO-TV in San Jose, Calif., reported on Dan Nguyen, who'd risen to the rank of corporal in the Marine Corps and who made the 2,200-mile trek from Georgia to Maine in memory of a comrade, Cpl. Jason Karella, who died in Afghanistan in 2008 when his Humvee rolled over after being struck by an improvised explosive device.

"Definitely heartwrenching, that's for sure, but it's just part of the job description, you know what I mean," he said. "When you rely on somebody to watch your back, you eventually build a strong bond between each other and there's nothing that can be compared to that."

Nguyen took time off from teaching middle school math and science to hike the Appalachian Trail with another veteran in their friend's memory while trying to raise awareness of the issues veterans face.

“The war does not end when you get out of the military. Veterans come home and have a lot of issues like PTSD depression and feeling like they’re not part of a society,” he said. Nguyen’s trek helped raise more than \$11,000 for Higher Ground, a nonprofit organization rehabilitation program for military veterans.

We have sent young men and women like Dan Nguyen off to war. We must rededicate ourselves to taking care of them mentally as well as physically when they come home.

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1.8 - The St. Augustine Record: [Temporary VA clinic opens in St. Johns County](#) (27 September, Sheldon Gardner, 211k online visitors/mo; Saint Augustine, FL)

The St. Augustine Community Based Outpatient Clinic, run by the U.S. Department of Veterans Affairs, will open a new location today.

The clinic’s temporary location at 195 Southpark Blvd. in St. Johns County is now open, according to Cindy Snook, a VA spokeswoman. The clinic, which is a modular facility, will host a dedication and ribbon cutting at 11 a.m. on Oct. 30.

St. Johns County has been working with the VA for years to help the clinic get a new location. However, various issues slowed the process, and the VA stayed at the 1955 U.S. 1 South location past the deadline at the end of March. Because of that, the VA has been paying fines and other funds to stay and to have St. Johns County take care of the facility.

The property at 1955 U.S. 1 was sold to Lowe’s for about \$8 million, according to a previous Record report. The VA is still working on getting a permanent facility for a clinic in St. Johns County, and details such as a location have not been announced.

“Veterans are all relieved to see the move being made,” said Bill Dudley, chairman of the Veterans Council of St. Johns County.

Dudley said the move removes some of the frustration and angst veterans have had about where they would receive health care. It also is good from the taxpayers’ standpoint because the VA will no longer paying extra for staying past the deadline. The next hurdle is a permanent site, Dudley said. But, he said, “We’re happy now.”

The St. Augustine clinic was closed Thursday and Friday for the move to the interim clinic. Hours of operation at the interim clinic will be 8 a.m. to 4:30 p.m.

The phone number of the new clinic was not clear, but the number of the clinic at 1955 U.S. 1 South was 829-0814. People with emergencies should call 911. Veterans can call TelCare toll free at 1-877-741-3400 for help after business hours, according to Snook.

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1.9 - Morning Sun: [Gratiot County VA gets new location](#) (27 September, 167k online visitors/mo; Mount Pleasant, MI)

Effective Oct. 1, the Gratiot County Department of Veterans Affairs will be located in the Gratiot County Courthouse at 214 E. Center St. in Ithaca and will be open five days per week.

The office secretary, Mary Bates, will now be working full time.

New procedures will be in effect in order to increase efficiencies in service to veterans.

Appointments are encouraged but not required. All veterans and family members are encouraged to call and make an appointment for assistance with any aspect of benefits including admission to healthcare, disability compensation, wartime pension, life and home mortgage insurances, education benefits, survivor's compensation and benison, burial markers and benefits, the relief fund and more.

The office will be closed Sept. 21-30 for the move. The office will reopen at the new location on Oct. 1.

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1.10 - The Yuma Sun: [Veteran gets bike with help from VA Center, others](#) (27 September, Rachel TwoGuns, 119k online visitors/mo; Yuma, AZ)

Veteran Will Bailey had been in need of help for decades, but it was not until six months ago that he took the first step in becoming self-sufficient when he decided to introduce himself at the Yuma Veteran Affairs (VA) Center.

Bailey is a 1968-1971 Army veteran who served most of his time in Vietnam. At the VA Center, they offered him many services such as readjustment counseling and even got him enrolled at AWC to pursue a welding certificate, a trade he had 30 years of experience in but holds no official credentials.

Then, three months into his journey, his bike, the only mode of transportation he owned, went missing and was possibly stolen. "I didn't realize what a partner it was until the bike was not there anymore," Bailey said. Not wanting to ask for more, Bailey walked to most of his destinations in the severe Yuma heat.

It was not until Delphine Hamilton, outreach specialist at the VA center, noticed that Bailey was not coming to the center with his bike anymore that he told her it was missing.

Hamilton took action and together with MCCS, MCAS Yuma, AWC, State of Arizona Veteran Services, Vocational Rehab, YPIC, ACHIEVE, PPEP Inc, Goodwill of Central Arizona, GYEDC and others they were able to get Bailey a brand new bicycle. They accomplished this without Bailey's knowledge.

The bike was presented to Bailey on Wednesday afternoon: "It was a very wonderful surprise and it was a great feeling," Bailey said. "I've been riding it all over since then."

"If you make a difference in one person's life, it makes it all worthwhile," added Jezreel Ramirez, Community Experience Partner at Goodwill.

Now Hamilton is working with Bailey to get appropriate housing through HUD-Veterans Affairs Supportive Housing or HUD-VASH, because he currently does not have a proper place to live.

"We just want to see him make it," Hamilton said. "He's 66 and I told him, 'You're never too old to do anything'." In keeping with that sentiment, Bailey recently got a job at AWC as a work-study student. The veteran seems to be settling into the VA center well and is on his way to reaching his goals.

"There's no comparison as to where I was before. I was going nowhere fast," Bailey said. "If you're a veteran, it's to your benefit to get yourself known to the VA Center. It's tough to get out of a rut, but the place I'm at now is a whole new ballgame."

"Will has brought a lot of joy to us. We're all very happy to see him," Hamilton said, noting how Bailey brings produce for the VA workers to enjoy.

Hamilton, a veteran herself, said that Bailey was not the only veteran who had problems reaching out for help. "We want veterans to know that the community cares and the VA Center is their home."

Hamilton said there are many vendors in Yuma who support veterans as well, such as the Daybreakers Cafe, a veteran -owned restaurant that catered the VA center's open house.

"In the last few months, I'm overwhelmed with excitement about the growth and where we're going to go in the future here in Yuma for veterans and military," Hamilton said. "We want to thank the community and all the people we work with."

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1.11 - Jefferson Public Radio Network (Audio): [Veterans Administration Tackles Vets' 80 Percent Obesity Rate](#) (26 September, Conrad Wilson, 71k online visitors/mo; Ashland, OR)

A long list of circumstances related to age and their military service contribute to the fact that nearly 80 percent of veterans in the US weigh too much. Also, more than 25 percent are diabetic, nearly three times the national average.

Now, the Veterans' Administration is working to combat those statistics with nutritional education and cooking classes to teach vets better eating habits.

Ray Spaulding is standing over a frying pan full of sliced green apples. He's sautéing them in front of a cooking class at the Portland Veterans Affairs.

"I feel like I'm on the Martha Stewart show," he said

"You are!" said Jessica Mooney, a clinical dietitian at the VA, standing next to him.

Spaulding is 85 years-old. He served in the Air Force from 1948 to 1952.

“This is caramelizing!” he said

“Yeah, it’s going to be good,” Mooney replied.

Spaulding is making cooked apples sprinkled with a little bit of cinnamon.

Today’s class is about ways to make healthier desserts, like brownies made with cocoa, Splenda and pureed black beans — rather than flour and sugar.

Mooney, the VA dietitian, said this class is part of a series. Veterans cooked healthier breakfasts, dinners and snacks. She said they also learned about portion control and how to read nutritional labels.

Nearly 80 percent of veterans are either overweight or obese. Another quarter suffer from diabetes. Those numbers are higher than the national average for all Americans. Health workers at the Department of Veterans Affairs say many of the reasons for the higher rates stem from the time veterans spent in the military.

“The majority of our veterans have some type of health issue that could be managed through – or improved through diet and exercise,” she said.

Spaulding said he’s taking the course because he was hospitalized several times in the last few years before finally being diagnosed with diabetes.

“I have a better understanding about what’s going into the food and the components of the food I’m eating and using in my cooking,” he said. “I will be able to control things like my blood sugar, which is a real trial for me because I like sweets.”

Another veteran in the class, Deeann Croteau, said she took the class in part to lose weight.

“I have diabetes and I also have a sciatic nerve pinch in my back and they keep telling me to lose weight,” she said.

Spaulding and Croteau are among the 27 percent of veterans with diabetes — more than twice the national average for all Americans, according to the Department of Veterans Affairs.

And that’s on top of the nearly 80 percent of overweight and obese vets.

“There are a number of reasons,” said Michele Goldschmidt, who is Health Promotion and Disease Prevention Program Manager at the Portland VA. “Food, addictively, works exactly the same neurons in the brain as other addictive substances such as alcohol, and drugs.”

Goldschmidt said veterans face unique challenges after their military experience.

“Homelessness, job challenges, PTSD, issues related to their war experiences,” she said. “That adds up to using what could be considered to be a socially available and acceptable outlet. And eating is one of them.”

The VA is taking responsibility for solving a problem they say began in the military.

When they were in the service, most vets had the cooking done for them, so they never learned how to cook. And many of those who can cook are used to cooking for hundreds or thousands.

Beyond that, Mooney said, soldiers don't get a lot of time to eat.

"It takes your stomach 20 minutes to tell your brain that you're full," Mooney said. "So, if they're eating quickly they could eat significantly more than if they enjoyed their meal. And that's kind of what we're doing in the cooking classes. We're talking about sight, smell, how to create a plate that's beautiful and also tastes good and is healthy."

Since 2013 — when the Portland VA first offered a cooking class — about 150 veterans have enrolled. That's hardly enough to curb an obesity epidemic.

But Goldschmidt said right now there isn't enough funding to serve all of the Portland VA's 65,000 primary care patients at 13 clinics.

"It would be nice to go from The Dalles to Newport to Bend where we have the rest of our clinics," Goldschmidt said. "If we were able to do that on a regular basis, there would be far more classes, but we don't have enough registered dietitians."

Back in the cooking class, Spaulding is already planning to sign up for an advanced class this winter. He reaches his hand into the pan of simmering apples, fishes one out and pops it in his mouth.

"Is it good?" Mooney asked.

"It's wonderful. Want a bite?" Spaulding replied. "These apples are really amazing!"

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1.12 - The Leavenworth Times: [IN-DEPTH: PTSD still may carry stigma](#) (27 September, John Richmeier, 53k online visitors/mo; Leavenworth, KS)

About 60 percent of men and 50 percent of women in the United States will experience at least one traumatic event in their lives. Of those, about 8 percent of the men and 20 percent of the women will develop post-traumatic stress disorder.

About 60 percent of men and 50 percent of women in the United States will experience at least one traumatic event in their lives. Of those, about 8 percent of the men and 20 percent of the women will develop post-traumatic stress disorder.

And the rates are higher for people who experience specific types of trauma such as combat or sexual assault, according to the National Center for PTSD.

It's estimated that about 25 percent of combat veterans from the Iraq and Afghanistan wars develop PTSD, Dr. Robert Bischoff said.

He is the chief of behavioral health at Munson Army Health Center at Fort Leavenworth. He also serves as the director of psychological health for the fort's garrison.

For some soldiers suffering from PTSD, there is a feeling they should be able to drive on. But they tend to drive on until they crash and burn, Bischoff said.

"There's a huge stigma, I think particularly in the military population, about seeking help," said Dr. Chalisa D. Gadt-Johnson.

She is the program chief for the Stress Disorder Treatment Program for the Department of Veterans Affairs Eastern Kansas Healthcare System.

The VA Eastern Kansas Healthcare System includes the Eisenhower VA Medical Center in Leavenworth, but Gadt-Johnson works at the VA hospital in Topeka.

Gadt-Johnson said she believes the stigma associated with seeking help is why she continues to see Vietnam War veterans with PTSD.

There also have been issues in the past with some in Army leadership thinking soldiers should be able to "suck it up and drive on," Bischoff said.

"But luckily that is much less than it used to be in the Army," he said.

Gadt-Johnson said PTSD symptoms can include distressing dreams or flashbacks, negative changes in one's beliefs, irritability, trouble sleeping or concentrating, and avoidance of things associated with a trauma.

Gadt-Johnson said anyone who goes through a traumatic event may experience many of the same symptoms as people who suffer from PTSD.

"But most of us go on to recover from those things," she said.

She said people with PTSD become stuck in their recovery.

"So those symptoms become problematic for them in the long term," she said.

It's not clear why some people who have experienced traumatic events develop PTSD but others do not, according to the National Center for PTSD.

If symptoms persist three months after a traumatic event, it could be a sign that a person is suffering from PTSD, Gadt-Johnson said.

Another key indicator that someone may be suffering from PTSD is if the symptoms are creating problems in the person's life such as impacting relationships.

Bischoff said PTSD patients who come to Munson don't necessarily think they have PTSD. They come into the health center because they are having a problem, and it's discovered they have some of the other symptoms of the disorder.

In some cases, people may have thought they have moved on from the traumatic event. But they go through a life change, such as having a baby, and the added layer of stress brings the problems of PTSD to the surface.

"And it starts bubbling up," Bischoff said.

In some cases, people may try to use alcohol to help them cope with the symptoms of PTSD until their drinking gets them into trouble, he said.

Bischoff and Gadt-Johnson said Munson and the VA use researched-based treatments for PTSD.

"Recovery is possible from PTSD," Gadt-Johnson said.

Bischoff said Munson offers PTSD treatment services for active duty military personnel at Fort Leavenworth as well as their family members. He said the disorder affects an entire family not just the soldier.

And while Gadt-Johnson's program is located in Topeka, there are programs available at the Leavenworth VA hospital to help veterans suffering from PTSD.

Gadt-Johnson said a good resource for people wanting to learn more about the disorder is the website for the National Center for PTSD.

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2. Ending Veterans' Homelessness

2.1 - KQRE-TV (CBS-13): [Albuquerque "Stand Down" offers free items for homeless/near-homeless military veterans](#) (27 September, 1.1M online visitors/mo; Albuquerque, NM)

Homeless and near-homeless veterans can receive free clothing, food and services at the 2015 Project Stand Down & Hands Up—the annual “stand down” for homeless and near-homeless veterans on Thursday, October 15 and continuing Friday October 16 in downtown Albuquerque.

This year's stand down is at Noon Day Ministries, located at 2400 2nd Street NE. October 15 is set aside for veterans only from 9am-3pm; October 16 is open to veterans and non-veterans from 9am-2pm.

At Stand Down and Project Hand Up 2015, veterans can obtain free clothing, backpacks, bedding, food, hot meals, hygiene kits, flu shots, basic medical screening, legal consultation, and many other goods and services.

Veterans' Service Officers from the NMDVS and the Albuquerque VA Regional Office will be on hand to assist veterans with filing for their VA and state veterans' benefits. Representatives from the NMWS will offer employment assistance. Representatives from the NMVIC and other agencies will assist with helping find shelter and providing information on other services available to assist the homeless.

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2.2 - The Record: [Troy meets the challenge to end veterans' homelessness](#) (27 September, Jennie Grey, 188k online visitors/mo; Troy, NY)

When First Lady Michelle Obama initially announced the Mayors' Challenge to End Veteran Homelessness by 2016, she noted that returning veterans often kiss the ground when they first touch American soil in coming home. She said it would be a shame if those veterans then had to sleep on the ground because they had no home – and now that won't happen in Troy. Mayor Lou Rosamilia announced Sept. 26 that the city has met the First Lady's challenge to house all its homeless veterans.

"A year ago, I sat down with Field Office Director for the United States Department of Housing and Urban Development Jaime Forero, himself a vet, and learned about the challenge," Rosamilia said at a press conference in Monument Square.

A total of 760 leaders, including 602 mayors, eight governors, and 150 county and city officials have committed their cities to participating. "We wanted to provide veterans with homes and proper opportunities," Rosamilia said. "Vets go through a difficult transition period when they return home. So this is a great day in the City of Troy."

He called the work a team effort, including such partners as Congressman Paul Tonko, Albany Stratton Veterans Affairs (V.A.) Director Linda Weiss, and Joseph's House and Shelter Executive Director Kevin O'Connor.

The City of Troy Department of Housing and Community Development partnered with Joseph's House and Shelter, a Troy-based nonprofit homeless services agency, and nearly a dozen other local and regional organizations in a coordinated effort to identify and engage veterans experiencing homelessness in Troy. The team got those individuals placed in permanent housing.

Other key partners include the Veteran's Administration Health Care for Homeless Veterans, Heroes at Home, Rensselaer County Veterans Services Office, Soldier On, Troy Housing Authority, Catholic Charities Housing Office, Unity House, Albany Housing Coalition and CARES, as well as local volunteers.

"It's an honor to stand here with these distinguished individuals who make a difference in the lives of homeless veterans," Tonko said. "Mayor Rosamilia doesn't walk away from a challenge. He gives his heart and soul."

Tonko spoke of Pope Francis's recent message to the United States and the world: to become a culture of caring. Veterans fight battles for their country, the congressman said. They ought not come home to fight another battle, one of finding shelter.

"Our servicemen and -women have served the world in powerful ways," he said. "They fight for our peace."

O'Connor's team from Joseph's House wore purple T-shirts that read, "Keep Calm and End Homelessness." The executive director thanked the dozen community partners who had helped with the challenge.

"We have now housed 33 veterans," O'Connor said. "That's not a large number, but every one of them is worthy of our help. We have placed them in emergency shelter services, treatment-related housing and permanent housing. And Troy Housing Authority is developing more permanent housing for veterans."

Forero noted that new veterans would move into Troy and need help as well. Now the support system is in place for them. The challenge team established additional protocols, including community outreach and public engagement with residents, to ensure continued identification of and connection with new vets coming into the Collar City.

The challenge team plans to spread out its services to all of Rensselaer County next. The partners want to end homelessness for everyone, not just vets.

"We had a year-long challenge to provide services in a compassionate way," O'Connor said. "The pope brought our country a message of compassion, dignity and worth for all people."

Weiss thanked everyone who worked to meet the mayors' challenge.

"The V.A. clinic will still be right here on River Street, but we are only a part of this team," she said.

The mayor concluded, "It's about us as human beings serving those who serve us. This job will never end. Every day, a new person could come looking for housing. Now there will be someone there for him or her."

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2.3 - The Post-Journal: [Local Agencies Collaborate To Aid Homeless Veterans](#) (28 September, A.J. Rao, 144k online visitors/mo; Jamestown, NY)

Although homelessness among veterans is not believed to be as widespread in Chautauqua County as other parts of New York state, local leaders and organizations still argue that one homeless veteran is one too many.

According to Gary Chilcott, director of the county's veteran services branch in Jamestown, it remains unclear how many of the approximately 11,000 veterans in Chautauqua County are homeless. One reason, he said, is that many veterans who are homeless or at risk of becoming homeless do not reach out to supportive services or are simply unaware that these services exist.

"I don't think we're really reaching out enough," Chilcott said. "That's one of our limitations. There's three of us (in the Jamestown and Dunkirk offices) for 11,000 veterans ... so we're spread pretty thin."

Chilcott said an emphasis on outreach and education, either through the media or the dozens of American Legion and VFW organizations in the county, will make a tremendous difference for local veterans, particularly those in rural communities.

Moreover, while proposals to develop a dedicated veterans facility in the county have been hampered by cost and resource shortages, the county's collaborative approach to veterans services has proven viable in its own right.

"What we're trying to do is become a veterans "one-stop," where we stay connected with other agencies and direct veterans to (where they need to go) for food stamps, heat, medical care or other public assistance," Chilcott said.

Chautauqua Works, for example, offers veterans and their eligible spouses first priority for jobs and training. Chautauqua Opportunities, Inc., provides assistance with rent, utilities, moving costs and security deposits, among others. Chilcott said his office also provides a \$500 loan to veterans who need immediate financial assistance.

Earlier this month, Rep. Tom Reed, R-Corning, announced that he will renew funding for some of these programs; specifically, more than \$5 million will be distributed to non-profit programs across Western New York and the Southern Tier through the Department of Veterans Affairs Supportive Services for Veteran Families program.

Chautauqua Opportunities, Inc., will be one of the recipients of funding, which, according to Chilcott, is "huge for the county and very much needed."

According to the U.S. Department of Veterans Affairs, approximately 12 percent of the adult homeless population are veterans. They are predominantly male, single, in urban areas and suffer from mental illness or alcohol and substance abuse.

Chilcott said the majority of veterans that enter his office with housing issues tend to be middle-aged and Vietnam-era veterans. Younger veterans, he said, may not have a home of their own, but have better support systems with friends and family.

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2.4 - The Beaufort Gazette: [Vosicky: The lessons of a single homeless night](#) (27 September, Brian Vosicky, 30k online visitors/mo; Beaufort, SC)

Most of us live similar lives, at least in terms of the basics.

We go to school or work a job and, at the end of the day, come home to a place that is warm and comfortable. There is food and a bed to lie down in and hot and cold running water. There are lights to drive away the darkness and, if we are so inclined, entertainment in a variety of electronic forms.

Most of us take these things for granted. We do so because we've never been without them.

But some of us are, every day.

Some of us live without the most basic needs, without a home and the comforts that come with it.

I got the smallest taste of what that must be like recently when USCB Civic Engagement Coordinator Danielle Breidung asked me to take part in "Sleeping Under the Stars," an event designed to raise awareness about homelessness in our community.

Christy Turner of the United Way and Ben Boswell of the Human Services Alliance worked with Breidung and USCB professor James Glasson to coordinate the event. In a small classroom in the USCB Library, Turner and Boswell explained what our community faces.

What I learned shocked me.

It is much easier to become homeless than I imagined.

Unemployment, a lack of affordable housing, bad credit, unexpected medical bills, mental illness, and domestic violence can all lead to homelessness.

"The stigma is that these people are just lazy, when in reality most of them work longer hours than we do and still don't make enough money to pay for their basic needs" Boswell said.

"Most of us are just one medical emergency or natural disaster away from homelessness" Turner added. She said that most of the homeless here were "families sleeping in cars with their children" or "living in sub-standard housing, motels, or in tents in the woods."

A large percentage of the homeless are veterans.

As part of a new initiative to bring immediate relief to those who have nothing, Turner and Boswell want to give the homeless in the county "City Packs" -- military-grade backpacks containing a blanket, a towel, toiletries, food, water, duct tape, ponchos and a medical kit.

After the presentation in the library, we were all given such packs and told to sleep "somewhere on campus."

Having a blanket, poncho, and duct tape made quite a difference in terms of shelter. My alternative would have been a makeshift shelter constructed from cardboard and trash bags. My dinner was simple, barebones -- peanut butter and crackers.

I was there one night.

I could not imagine what it must be like to live that way every night -- with no end in sight.

There are people in this county who do.

We, of course, cannot rescue them all.

But we can do something. We can donate needed items. We can volunteer our time.

And we can remember this:

"I have learned to give, not because I have too much, but because I have known the feeling of having nothing." - Anonymous

Brian Vosicky is a Marine Corps veteran who served in the Middle East, Europe and Africa. He is studying psychology at the University of South Carolina Beaufort.

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3. Ending the Claims Backlog – No Coverage

4. Veteran Opportunities for Education/GI Bill

4.1 - RCR Wireless News (Video, Audio): [Veteran Affairs GI Bill Funds Wireless Workforce Apprenticeships – Inside Telecom Careers Eps 14](#) (27 September, Jeff Mucci, 73k online visitors/mo; Austin, TX)

Rosye Cloud, Senior Advisor for Veteran Employment for the Department of Veterans Affairs, describes how veterans and employers can leverage Veteran Affairs GI Bill for The Telecommunications Industry Registered Apprenticeship Program (“TIRAP”)

Veteran Affairs GI Bill Funds Wireless Workforce Apprenticeships

The Veteran Affairs GI Bill, when applied to registered apprenticeship programs, offers veterans exiting the military with greater stability during their six month transition period via:

- connecting veterans with employers
- providing a living stipend on top of their salary
- industry approved skills training and certification
- career roadmap

Over 250,000 veterans exit the military each year. According to Cloud, these veterans “are ready to work” and offer employers candidates with proven leadership skills and a “grit factor” not often found with other potential employee segments of the market.

Watch RCR Wireless News interview with Rosye Cloud for more information about how the Veterans Affairs GI Bill apprenticeship program fits into a number of wireless industry workforce initiatives being developed and implemented with the support of The Wireless Infrastructure Association (PCIA), the Department of Labor, and Warriors4Wireless.

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5. Women Veterans

5.1 - WABC (ABC-7, Video): [Here and Now](#) (27 September, 845k online visitors/mo; New York, NY)

This three minute clip covers the service Military Women in power offers to women veterans in dealing with VA and getting VA services and benefits. It also references the difficulty women who have experienced sexual assault experience in returning to civilian life. [Video Clip](#)

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6. Other

6.1 - The Chicago Tribune: [Column: A solution to the government's VA problem](#) (27 September, Jonah Goldberg, 14.2M online visitors/mo; Chicago, IL)

There is only one guaranteed way to get fired from the Department of Veterans Affairs. Falsifying records won't do it. Prescribing obsolete drugs won't do it. Cutting all manner of corners on health and safety is, at worst, going to get you a reprimand. No, the only sure-fire way to get canned at the VA is to report any of these matters to authorities who might do something about it.

That, at least, is what the U.S. Office of Special Counsel recently reported to the president of the United States. The Special Counsel's office is the agency to which government whistleblowers go to report wrongdoing.

"Our concern is really about the pattern that we're seeing, where whistleblowers who disclose wrongdoing are facing trumped-up punishment, but the employees who put veterans' health at risk are going unpunished," Special Counsel Carolyn Lerner recently told National Public Radio.

Now, obviously, this shouldn't happen. Everyone, except perhaps the managers at the VA, probably agrees with that. So by all means, let's have some reforms and further protections for whistleblowers.

But that's not a real solution. The real fix is to get rid of the VA entirely.

The United States has an absolute obligation to do right by veterans. It does not have an absolute obligation to run a lousy, wasteful, unaccountable, corrupt and inefficient bureaucracy out of Washington. Of all those adjectives, the one that gets to the core of the problem is "unaccountable."

Elected officials are supposed to be held responsible for the actions of the government, right? Well, which politician should we fire for the endless stream of outrageous VA scandals of the last few years? The president? Leave aside the fact that he won't be on the ballot in 2016; not a lot of voters put reforming the VA bureaucracy at the top of their list of priorities.

Is there a congressman or senator who might lose an election because of the VA scandals? If there is, I can't figure out who it might be. Every representative and senator has raced to the cameras to express their outrage, and not one is accepting a scintilla of responsibility for the problem. But they are all responsible because they have simply ceded authority to the bureaucrats themselves.

There is a reason the Founding Fathers put most governmental functions at the state and local level. It's because a large nation cannot be run from the center.

Imagine that the federal government simply gave all of the VA hospitals to the states they're in. Instead of the VA budget, Congress just cut checks to states to spend on their veterans. You'd still have problems, of course. But what you would also have are local elected officials — city councilmen, state legislators, mayors, governors, etc. — whom voters could hold directly accountable. Moreover, these officials would be more likely to understand the nature of the problems faced by their constituents.

As a result, you would see states handling similar problems in different ways. Some techniques would be better, some would be worse, and some would just be different. Arizona is simply different than Vermont, so it may handle things differently. Still, this process would allow everyone to learn from both mistakes and successes in a way that a centralized bureaucracy cannot or will not.

Personally, I'd rather see the money spent on veterans go straight to the veterans themselves, in the form of cash payments or vouchers to be used for health care in the private sector. But my point really isn't to figure out the best way to provide for veterans; it's to highlight the best way to organize a free society.

One of the chief reasons so many people are angry at Washington right now is that government has become detached from democratic accountability. Obamacare really isn't a piece of health-care legislation, it's a huge permission slip for bureaucrats to design a system as they see fit. The same goes for large swaths of the federal government. Congress doesn't make many decisions about environmental regulations; the EPA does. Moreover, the EPA makes decisions that no Congress would ever approve if the decisions were left to the elected officials. Congress likes it that way, because the politicians would rather complain about bad decisions than take responsibility for tough ones.

That's not how America is supposed to work. We elect politicians to make decisions. If they make bad ones, we get to fire them come Election Day. The growth of the federal bureaucracy is really a protection racket. It insulates both the bureaucrats and elected officials from the voters they're supposed to work for.

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6.2 - The Times: [The gourd that made Streator famous](#) (27 September, 283k online visitors/mo; Ottawa, IL)

THUMBS UP TO ... the greatest pumpkin. Tipping the scales at 2,145, a pumpkin grown this year in Streator actually outweighs a Mitsubishi Mirage by nearly 200 pounds. The man who grew the gourd is Streator's Gene McMullen, for whom big pumpkins are big fun. In his patch at his Short Street home, nearby the high school football field, McMullen has for almost two decades grown a few pumpkins each year, but never to this success.

To get them so large, McMullen said, takes a certain amount of breeding of plants and a healthy dose of luck. Also, he has carefully tended the soil over the years, which is how in 2014 he grew a 1,692-pound pumpkin, then the eighth largest in the world. This year's winner is the largest

ever in North America and the second heaviest worldwide. This is a guy who knows how to have a hobby, and the media attention has been fun for Streater. Congratulations are most definitely in order.

THUMBS DOWN TO ... yet ANOTHER preventable injury. By now we can all practically fill in the blanks whenever there's a fall at Starved Rock State Park near Utica: The injured party is almost always old enough to know better, young enough to be foolish and hardly ever a local. Last week an 18-year-old Highland Park man was transported via helicopter to a Downers Grove hospital after falling at Starved Rock. Authorities said he climbed over the railing at Lover's Leap — one of the highest cliffs at the park — and fell about 30 feet at 10:45 a.m. He then climbed back up the rock face and back over the fence, but could not continue any further.

Also predictable: Highly trained personnel snapped into action. Utica firefighters and EMTs along with conservation police responded within minutes. Responders executed the rescue by carrying the victim, strapped onto a stretcher, approximately a mile up and down winding trails and steps from the top of the precipice to a waiting ambulance. OSF Life Flight flew him from an open field adjacent to the park to Advocate Good Samaritan Hospital.

The man is lucky to be alive to be served the ticket for entering a restricted area. Would that this were the last time someone takes such a needless risk.

THUMBS UP TO ... collaboration. A wonderful thing has happened in Seneca, where a whole bunch of people and organizations got together to do something progressive with civic resources. In recent years, a lot of work has gone into the high school's west campus to make it more utilitarian for the school but also accessible and practical for the community.

The Tri-County Head Start Program is renting a portion of the building to offer preschool classes and built a new playground outside. In collaboration with the Seneca Park Board, two first floor rooms, a meeting room, and kitchen area have been newly renovated and will be available for rent through the Park Board. In 2012, the old auto shop area was converted to batting cages which, along with the gym, are used for the school's co-curricular activities. The school is using other parts of the building to store paper, architectural drawings and seasonal supplies.

The school's architectural design class was heavily involved, and Park Board members provided input for the design of the meeting room and kitchen. This all represents a great development for Seneca.

THUMBS DOWN TO ... a national disgrace. How else, at this point, can one describe the Department of Veterans Affairs? Last week VA whistleblowers from across the country told a Senate committee the department has failed to hold supervisors accountable more than a year after a scandal that broke over chronic delays for veterans seeking medical care and falsified records covering up the waits, according to the Associated Press.

Shea Wilkes, a mental health social worker at a Louisiana VA hospital, who helped organize a group known as VA Truth Tellers, said agency leaders are "more interested in perpetuating their own careers than caring for our veterans. ... Years of cronyism and lack of accountability have allowed at least two generations of poor, incompetent leaders to plant themselves within the system," isolating the VA "from the real world of efficient and effective medical treatment" for veterans.

Thousands of people who gave their country the best they had to offer are now getting the worst we can return. Shameful.

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6.3 - Midland Reporter-Telegram: [Carson's ideas to reform VA concern local veterans](#) (27 September, Erin Stone, 70k online visitors/mo; Midland, TX)

The Department of Veterans Affairs has encountered much criticism given the sometimes fatal consequences of its long waiting lists. However, Republican presidential candidate Dr. Ben Carson's recent comments about moving veterans' health care partially into the privatized realm has veterans -- including those who are well aware of the flaws of the current VA -- up in arms.

In an op-ed published last week in USA Today, Carson described improving the VA with what he called "offer choice," which would give veterans a health savings account (HSA) "to allow veterans to access the best possible medical care at a nearby DOD, VA or civilian medical facility."

Leaders of veterans' organizations worry that this will lead to the complete privatization of veterans' health care and the eventual elimination of the department altogether, especially given Carson's comments in an August radio interview stating the VA doesn't need to exist, said Paul Reed, commander and Service Officer for the Permian Basin Chapter of Disabled American Veterans.

Reed believes the new Veterans Choice Program is a concrete example of this incremental movement toward fully privatizing the VA. Through the Choice Program, eligible veterans are sent a Choice Card with which they are allowed to seek covered care outside of the VA if their wait time is more than 30 days or the closest VA is more than 40 miles away from their home.

"I respect Dr. Carson. He's got a rags-to-riches story. He's achieved the American dream, and he himself started his career as a doctor in the VA," Reed said in a phone interview. "But now what the VA is inching toward -- it's kind of like tossing us a card and saying, 'Go take care of yourselves.' So we are vehemently against it."

The Choice Program is managed by TriWest. If an eligible veteran contacts TriWest for an alternative care option, the appointment must be within 30 days. It is not yet clear how successful this has been.

Reed, who is a disabled veteran, said that doctors outside of the VA system are not closely attuned to issues specific to veterans. Furthermore, veterans not only may be directed away from the VA through the Choice Program, but also bear the consequences of private doctors who won't accept VA coverage, he said.

"There are three doctors in the Permian Basin that have told me and my legislative chairman that they won't do business with the VA because the VA doesn't pay its bills and there's too much bureaucracy" Reed said.

The DAV and other national organizations -- American Legion, AMVETS, Iraq and Afghanistan Veterans, Veterans of Foreign Wars of the United States, Paralyzed Veterans of American,

Military Order of the Purple Heart and Military Officers Association of America -- signed and sent an open letter to Carson in response to his ideas for reforming the VA.

“Your suggestion that giving veterans health savings accounts in lieu of access to a VA health care system would effectively diminish our nation’s sacred obligation to ‘care for him who shall have borne the battle ...’” the letter states. “It would put the onus on the veteran for finding their own health care providers, navigating through the private market-based system, determining whether it meets the standard of care they require, and dealing with the consequences if it goes awry.”

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6.4 - Iowa State Daily: [Iowa State hosts sixth annual Veterans Conference](#) (27 September, Alex Connor, No user info; Ames, IA)

Iowa State makes many attempts to give back to the military community and it will do so again this Monday.

Iowa State will host the sixth annual Iowa Statewide Veterans Conference. Registration begins at 8:30 a.m., and the cost of the conference is \$40. Student veterans and military personnel along with their family members can attend the event for free.

The opening ceremony will begin at 9:15 a.m. in the Sun Room of the Memorial Union and will be accompanied by the ISU ROTC Tri-Services.

Jathan Chicoine, veterans services coordinator; Tom Hill, senior vice president for Student Affairs; and Jonathan Wickert, senior vice president and provost, will give the opening remarks.

The opening keynote speaker, Major General Timothy Orr, the adjutant general of Iowa, will give a speech pertaining to this year’s theme: Learning to return services.

Orr first enlisted in the Army National Guard in 1978, and received his officer’s commission in 1985. He was commanded at the company, battalion and brigade levels and has provided command and control of more than 100 Army and Air National Guard units.

Orr’s primary responsibility is to guarantee the mobilization, deployment and sustainment of the Iowa National Guard. He ensures that the state can readily provide forces in support of state and national requirements.

A lunch panel and discussion about World War I and World War II Native-American code talkers will take place after Orr’s speech.

Commander Don Loudner will lead the panel and present a brief historical context for the code talkers’ story. Other family members of the code talkers will also be there to provide a personal perspective of the history.

Loudner, who is a member of the Hunkpati Dakota, spends time researching, identifying and contacting surviving code talkers and their families for the U.S Department of Veterans Affairs.

Code talkers were Native-American service members from at least 25 tribal nations who helped shift the direction of the war, according to the veterans ISU website.

Native-American code talkers were essential in both world wars because the enemy was unable to break the code. This military program didn't even become public until the 1990s.

Throughout the day, breakout sessions will be available that attendees can go to, such as, Home Base Iowa, Veterans in Entrepreneurship, Credit for Prior Learning: Trends and Challenges and the Student Veteran and Family Member Panel.

A resource fair will take place in the South Ballroom of the Memorial Union that will be free for student veterans and military personnel. People who attend the fair do not need to register for the conference.

Troops to Teachers, Des Moines Vet Center and the Wounded Warrior Project are a few of the booths that will be in attendance.

Activities will conclude at 4:30 p.m. with closing remarks by Chicoine and a closing ceremony by the ROTC Tri-Services.

A student veterans reception will take place from 4:30 to 6:30 p.m. in the Great Hall of the Memorial Union.

"I am truly optimistic that all of us can really take that time to reflect more deeply on this idea on learning to return services," Chicoine said. "Already we've had so many successes in the planning of [the conference]."

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