

**STATEMENT OF
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OF THE
DISABLED AMERICAN VETERANS
BEFORE THE
COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE ON HEALTH
UNITED STATES HOUSE OF REPRESENTATIVES
MAY 6, 2004**

Mr. Chairman and Members of the Subcommittee:

On behalf of the more than 1.2 million members of the Disabled American Veterans (DAV) and its Auxiliary, I wish to express my appreciation for this opportunity to present the views of our organization on four pieces of legislation before the Subcommittee.

These legislations cover a range of issues important to veterans and their families. The DAV is an organization devoted to advancing the interests of service-connected disabled veterans, their dependents and survivors. For the past eight decades, the DAV has been devoted to one single purpose: building better lives for our nation's disabled veterans and their families.

H.R. 3849

The Military Sexual Trauma Counseling Act of 2004 would make permanent the authority of VA to provide sexual trauma counseling to veterans. The DAV is concerned about the availability of quality mental health services for women veterans, especially women veterans who have experienced sexual trauma during military service. Only 43 percent of VA Medical Centers (VAMCs) have one or more designated women's health providers in outpatient mental health clinics to accommodate women veterans' special needs.

In addition to the 149,000 women serving in the National Guard and Reserve, more than 212,000 women serve on active military duty and comprise nearly 15 percent of the active force. As the number of women serving in the military continues to rise, we see increasing numbers of women veterans seeking VA health care services.

Despite the decline of the overall veteran population, the female veteran population of the United States is projected to increase by 6% between 2002 and 2020, from 1.2 million to 1.3 million. Currently, women veterans comprise approximately 5 percent of all users of VA health care services, and within the next decade, this figure is expected to double. With increased numbers of women veterans seeking VA health care following military service, it is essential that VA be equipped to meet their specific health care needs.

The DAV believes VA is obligated to deliver health care services to women veterans equal to those provided to male veterans. At our most recent annual National Convention, DAV delegates adopted a resolution seeking enactment of legislation mandating the provision of health care services, inclusive of gender-specific services, by VA to eligible women veterans to the same

degree and extent that services are provided to eligible male veterans, inclusive of counseling and/or psychological services incident to sexual trauma. Accordingly, we support this legislation and urge the Subcommittee to report this bill for consideration by the full committee.

H.R. 4020, H.R. 4231

The State Veterans Home Nurse Recruitment Act of 2004, H.R. 4020, would assist states in the hiring and retention of nurses and the reduction of nursing shortages at state veterans' homes. This legislation would direct VA to make payments to State homes that receive per diem payments from VA for the care of veterans, and have an employee incentive scholarship or other program designed to promote the hiring and retention of nursing staff. The assistance to state homes is limited to no more than 50 percent of the fiscal year costs of such recruitment and retention programs, and requires the assistance program to be implemented so that payments are made commencing no later than January 1, 2005.

H.R. 4231 would establish a pilot program to determine the effectiveness of certain recruitment and retention practices of qualified nurses, and to revise hiring systems and procedures to reduce the length of time of the hiring process. This bill also requires a report of findings be submitted no later than one year after the date of enactment. In addition, VA would be able to provide alternative work schedules and, upon completion of a specified alternative work schedule, would allow overtime pay for additional hours of work above and beyond the alternative work schedule.

DAV believes that nurses are part of the basic framework and nucleus for the provision of health care services to veterans. However, VA staffing levels are frequently so marginal that any loss of staff can result in a critical staffing shortage, present significant clinical challenges, and can result in adverse medical care. While VA has the largest nursing workforce in the country, with more than 55,000 registered nurses, licensed practical nurses, and other nursing personnel, VA is facing serious challenges in providing consistently high quality care and maintaining their specialized services.

DAV does not have a resolution from our membership on these two measures; however, their purposes appear beneficial. We do not oppose favorable consideration of H.R. 4020, and H.R. 4231 by the Subcommittee.

H.R. 4248

DAV believes in making a difference in the lives of homeless veterans across this nation. One of our top priorities is to help break the cycle of poverty and isolation, and move homeless veterans from the streets to self-sufficiency.

Supported by DAV's Charitable Service Trust and Colorado Trust, the DAV Homeless Veterans Initiative helps homeless veterans make the transition from life on the streets to one of productivity and normalcy by promoting the development of supportive housing and services to assist homeless veterans become self-sufficient and productive members of society. Since 1989, DAV allocations for homeless projects total over \$1 million, which includes grants allowing the

expansion of VA medical center services for homeless veterans who suffer mental illness and substance abuse.

VA's partnership with other homeless-service providers is directly affected by the Homeless Providers Grant and Per Diem Program. H.R. 4248, the Homeless Veterans Assistance Reauthorization Act of 2004, would extend for four years VA's authority to make grants to assist homeless veterans, and increases the annual appropriation from \$75 billion to \$100 billion. Accordingly, DAV supports the passage of this important legislation, which provides VA the necessary resources to combat homelessness.

Pending Draft Bill

This bill proposes to reform the qualifications, selection, and nomination requirements for the position of VA Under Secretary for Health. Specifically, it would eliminate among other things, the requirement establishing a commission to recommend individuals to the President for appointment.

DAV is concerned that the elimination of a commission is the elimination of a fundamental process. Replacing the debate among a selected group of individuals who are from various fields and interests relevant to VA, with periodic consultations is cause for serious concern. The formal process executed by a commission involves careful consideration, reflection, interaction, and discourse, which is necessary for well-rounded decision making, similar to the function of this Subcommittee.

Mr. Chairman, this concludes my testimony. I would be happy to answer any questions you may have.