

(AZERA)

**Department of Veterans Affairs
Advisory Committee on Women Veterans
October 26-28, 1999
Minutes**

The meeting of the VA Advisory Committee on Women Veterans convened at 8:30 a.m. on October 26, 1999, at VA Headquarters in Washington, D.C.

Advisory Members Present

Dr. Linda Schwartz, Chair
Col. Karen Ray, USA (Ret)
Mrs. Bertha Cruz Hall
Ms. Joy Ilem
Mrs. Veronica A'zera
Mrs. Constance Evans
Ms. Sherry Blede
Mrs. Jan McSparren
Capt. Lory Manning, USN (Ret)
Col. Christine Cook
CSM Douglas Russell, USA (Ret)
Capt. Barbara Brehm (DACOWITS)

VA Staff Present

Ms. Joan Furey, Director OOW
Ms. Connie LaRosa, Acting Director, WVHP, VHA
Dr. Susan Mather, ACMD, VHA
Ms. Maryanne Carson, EA, OOW
Mr. Edward Chow, OO8
Mrs. Alice Raatjes, Associate Director OOW
Ms. Kimberly Evans, Truman Scholar DVA

Guests

Carolyn Amos, VFW Field Representative
Polin Cohanne, Chief of Staff VETS, DOL

I. Opening Activities

Ms. Furey called the Advisory meeting to order at 8:30 a.m. Dr. Schwartz arrived at 8:55 a.m. and took over the meeting. Guests were introduced.

Ms. Furey reviewed the items in each member's packet. Ms. Furey informed the group that DVA General Council had decided that the sexual trauma brochure could not be published by the Advisory committee. Mrs. A'zera made a motion to give the brochure to the Center for Women Veterans to be produced. Mrs. Cruz Hall seconded the motion and it was unanimously passed by the committee.

The minutes of the March 1999 meeting were reviewed and accepted with a few minor changes.

The Seattle site report was reviewed. Dr. Schwartz made the suggestion that the report be combined with Mrs. Cruz Hall's open forum report. There were a few minor changes made to the report and it was accepted.

Ms. Furey passed out copies of Public Law 104-66, the federal reports elimination and sunset act of 1995. She explained that the law takes affect this year. The committee is still required to report to the Secretary of Veterans Affairs, but he or she has no requirement to respond or to send the report to Congress any longer.

Dr. Schwartz said this was another example of the erosion of programs for women veterans and just another example of the lack of concern for women veterans issues. Another example is her unanswered request for a meeting with the Secretary and Deputy Secretary of Veterans Affairs. She said the committee's job is to guard the perimeter to keep services from eroding away, because the women veteran population is increasing.

Dr. Schwartz announced that this was good timing because the House Veterans Affairs Committee Minority Staff requested a meeting with the committee on October 28th. Dr. Schwartz asked for every committee member to come up with issues and concerns. The information will be compiled, made into an issue paper and given to staff members at the meeting.

Ms. LaRosa announced a new proposal to change the women veteran coordinator positions. The Women's Health Program HQ contracted with Partners in Change through the Cleveland EES group to help develop a Performance Model of the Women Veteran Program Manager role (previously the Women Veteran Coordinator). HQ submitted a list of WVCs both full time and part time who they considered to have excellent women's health programs. The Partners in Change group then interviewed a sample of these WVCs along with some of their supervisors and tow of the deputy field directors. From these interviews, a performance model was organized.

Six performance results were identified: provide quality customer service; outreach; increase utilization of Women's Health Services; expansion of services; engage in organizational improvement plans; and educate internal staff to needs of women. VISn 4 and 9 have agreed to pilot the new program. It is anticipated that the pilot will take six months. During that time the model will be tested for validity and more quantitative and qualitative criteria will be developed. Ms. LaRosa said she felt this model will help leaders maintain clinical programs of excellence in women's health while utilizing staff effectively and efficiently.

Ms. Furey raised a concern that she and the committee were not consulted until now. No other stakeholders were asked or interviewed. Ms. LaRosa and Dr. Mather both agreed this was an oversight.

II. Briefings and Presentations

Briefing: Committee Budget - FY 2000

Alice Raatjes, Associate Director, Center for Women Veterans DVA

Kathleen Hamilton, Budget Analyst, DVA

A briefing was given on the committee and Center for Women Veterans budget.

Briefing: Update: Summit 2000/Agenda review

Joan Furey, Director Center for Women Veterans, DVA

Ms. Furey handed out a tentative agenda for the National Women Veterans Summit, cosponsored by DVA, the White House and the Disabled American Veterans. Ms. Furey asked committee members if they would consider having their June meeting in conjunction with the summit. Committee members will come in and participate in the summit and then meet for three days after at the VA headquarters. Discussion was tabled until next day because Dr. Lois Johns wanted to join the group via telephone.

Briefing: Veterans Benefits Administration and response to committee 1998 report

Joseph Thompson, Under Secretary for Benefits

Nora Egan, Deputy Under Secretary for Management

Robert Epley, Director Compensation and Pension Service

Mr. Thompson gave a briefing overview and the direction VBA is heading. VBA is the oldest part of VA and deals with more veterans than any other department. VBA is going through massive change and realignment. For the first time in many years, VBA is actually increasing FTE by 340. Only 164 are brand new hires, the remainder will be out of other VBA departments, buyouts and possibly reduction in force. There are 340,000 cases pending and VBA's goal is to reduce that number to 300,000. The average processing time for rated cases is 135 days and 35 days for non rated cases. Mr. Thompson announced they will be expanding their operations at the military outprocessing centers.

Mr. Epley said there were only two committee recommendations (# 29 & #35) VBA did not occur with and it was mainly because the committee used the word "all."

Briefing: Readjustment Counseling Service update and response to recommendations

Charles Flora, Deputy Director

Mr. Flora said that in FY99 vet centers saw 8,896 veterans for over 42,000 visits. Of those veterans, 2,726 were women. Through involvement in the Transitional Assistance Programs, 1,927 women veteran have been contacted. Since 1993, more than 9,000 new clients have been treated through the sexual trauma counseling program. After the Millennium bill passes this Congress, Vietnam era vets who have not requested service through a vet center by January 1, 2000, will no longer be eligible for service.

Briefing: Veterans Health Administration

Dr. Thomas Garthwaite, Acting Under Secretary for Health

Dr. Garthwaite said the goal of VHA is to maintain the momentum of improving access and quality of care that has occurred in the last five years. In a recent national patient survey, 80 percent of VA customers said the VA was better that two years ago. He clarified that all VISNs should be seeing all priorities. If not, he would like to know. He reassured committee members that any closings or staff reductions in the women's health services would have to come through Dr. Mather's office first. He did not foresee the loss of any services because of the budget.

Briefing: Persian Gulf Illness

Mark Brown (title ??)

Mr. Brown has only been with DVA for two months. He has a background in toxicology and worked at the Commerce Department. He briefed the committee on current Gulf War research through the National Health Survey on Gulf War Veterans and their families. Health questionnaires were given out to 15,000 Gulf vets. They are ready to begin the third phase which includes physical exams.

Mr. Brown gave a briefing on the five demonstration projects to look for new and innovative treatment of Gulf War Illness. There are also two treatment plans being tried with the Department of Defense at a cost of \$20 million. It is the Exercise Behavioral Therapy Treatment and the antibiotic trial.

Briefing: Women Veterans Health Programs

Dr. Susan Mather, ACMD, VHA

Dr. Mather gave the committee an overview of the reproductive health survey and the recommendations VHA is making to the Secretary. They have found an increase in mortality in women who served in the Vietnam War. A significant increase in cancer of uterus and pancreas. Only reproductive problem found in the 4,390 women surveyed was birth defects. There was a ratio of 1:24 for defects. VHA is proposing legislation to compensate the children with birth defects. Proposal was sent to the Secretary.