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ISSUE PAPER

TO: Mrs. Shannon Fairbanks

Senior Policy Advisor, Office of Policy Development

FROM: Nick Longworth, Consultant

SUBJECT: Agent Orange Issue

Veterans Administration

Current Status

ISSUE: How may the Administration most effectively provide for the concerns of the public regarding Agent Orange, and counter the adverse publicity generated by this issue.

BACKGROUND: The National Veterans Task Force on Agent Orange plans a working conference at American University, May 22-24 on "development of viable resources to meet the needs of Agent Orange victims"; Vietnam Veterans Against the War, National Association of Black Veterans, New Jersey Victims of Agent Orange, Vietnam Veterans Still Suffering, 2 AFL-CIO Locals and the American Postal Workers Union plan to picket the VA, march past the White House and rally in Lafayette Park on May 22nd; and the Brooklyn-Staten Island Vet Center is sponsoring an "Agent Orange Marathon" to raise money for an AO Clinic. (Attachment 1) Agent Orange, composed of 2,4-D, 2,4,5-T and an unwanted contaminant, dioxin (TCDD), was used as a defoliant on 10% of Vietnam (1962-70). There is no clear evidence that exposure to Agent Orange results in any long-term adverse effects on humans other than chloracne, an acne-like skin condition. VA records indicate that while individuals who fear they've been exposed have serious concerns, the issue appears to be of minimal concern to most of the 2.8 million who served in Vietnam - only 5% of phone calls to Regional Offices concern AO; 9,643 written inquiries have been received (.34% of those who served in Vietnam); 7,993 claims have been filed (.29% of those who served in Vietnam). Efforts to resolve the issue include the VA's specific studies, Policy Coordinating Committee, Data Analysis Task Force, Chloracne Task Force, AO Registry, and numerous studies by other government and civiliam agencies. (Pg. 8) The VA Epidemiological Study, PL 96-151 December 20, 1979 (design contract recently awarded to UCLA) should identify any long-term disease/disability associated with Vietnam service. The USAF Ranch Hand Study of 1196 personnel who sprayed Agent Orange and are currently the only group in which exposure levels can be documented, should help to determine whether disease or disability is associated with AO exposure. To date DOD has been unsuccessful in determining individual exposure since definitive troop movement records were not kept. The Interagency Work Group oversees and coordinates all federal research efforts on AO. A lawsuit has recently been brought in NY District Court by a group of veterans charging VA with malpractice and failure to provide appropriate medical care to AO victims. General Counsel believes VA will be successful in deferring the suit. Although available scientific evidence does not support the contentions that AO has a permanent adverse effect on human health or any effect other than chloracne, the VA remains most concerned about the real fears of Vietnam veterans who, in President Reagan's words "obeyed their country's call", and is firmly committed to resolving this issue expeditiously. Vietnam veterans who are concerned about AO exposure will receive a complete baseline medical examination, the full scope of medical care for which the person is eligible, and will be tracked through the AO Registry. 45,000 have already received this service. Special attention should be focused on HR 34-99 (Attachment 2), recently passed by the HVAC, which presents unmanageable professional and resource problems.

OPTIONS: 1) Immediate statement to reaffirm support of and confidence in scientific validity of Ranch Hand Study and oversight work of Interagency Work Group (which is generally accepted by Congress and Vet organizations as unbiased), followed by periodic statements on status of studies; 2) Do nothing, wait for additional scientific data.

RECOMMENDATIONS: Immediate statement of concern for the problem and support for the VA $\overline{\text{Epidemiological}}$ Study, AF Ranch Hand Study and Interagency Work Group. Statement should be made before Friday, May 22nd. Suggested statement on Page 17. Intensive work with SVAC and HVAC to formulate a compromise. Continuance of present VA policies.

BUDGET

The following is a summarization of budgeted monies for Agent Orange activities in FY '81 and FY '82.

FY '81	FTE	Dollars
Administrative	8	71:0, 000
Research	3	216,000
Medical Care	30	\$2,200,000
	41	\$3,126,000

This represents .05% of all DM&S allocated funds.

FY	182	FTE	Dollars
ō.	Administrative	11	809,000
	Research	3	516,000
	Medical Care	75	6,579,000
_	ODM&T	4	1,600,000
		93	\$9,504,000



This represents .11% of all DM&S allocated funds. *

ODM&T funds are provided by Office of Data Management and Telecommunications.

^{*} Administrative, Research and Medical Care funds are provided by Department of Medicine and Surgery.

Another unfortunate legacy of the Vietnam conflict is the continuing concern of many veterans that they have suffered or may yet develop health problems as a result of long-term effects of certain chemicals to which they were exposed while serving in Vietnam. This Administration is committed to the fullest possible scientific examination of these concerns, with the aim of insuring that this matter is dealt with fairly and equitably. The important scientific research being coordinated by the White House Interagency Work Group, including the Air Force Ranch Hand Personnel Study, will be a major priority of this Administration.

Mr. Ronald Bitzer Center for Veterans Rights 514 West Adams Boulevard Los Angeles, California 90007

Dear Mr. Bitzer:

I am pleased to respond to your mailgram posing a series of questions about the Veterans Administration. I apologize for the delay in responding but wanted to allow time for my staff to thoroughly review your concerns. I will respond below to each question:

Delayed Stress Among Vietnam Veterans

- 1. Mr. Hopkins' case was thoroughly reviewed by a panel of psychiatrists at the Brentwood VA Medical Center, prompted by his demands made at the Wadsworth VA Medical Center.

 No evidence of a post-traumatic stress disorder was found but he did have psychological symptoms which preceded his military service. The criteria, as described in the Diagnostic and Statistical Manual III, specifically indicate that the symptomatology must occur after a severe stressor during active military service.
- 2. No treatment was recommended for Mr. Hopkins nor was medication prescribed. The VA assures me that they will be

Mr. Ronald Bitzer

glad to investigate this matter further but some time would be required to obtain the medical records and have them reviewed by their Central Office psychiatrists. The Goroner's Report is not yet available.

3. In March 1980, the Veterans Administration liberalized its method of considering a psychiatric disorder having its onset with a life threatening episode in military service, including being a Prisoner of War.

It established a procedure to be followed in examining veterans which would elicit information to establish a proper diagnosis, which would lead to the grant of service connected compensation for post-traumatic stress disorder. The procedure and grant of benefits were a liberalization, in line with the latest findings of the American Psychiatric Association.

4. The VA has been actively involved in an educational program to acquaint their staff with the characteristic symptomatology of the post-traumatic stress disorder. A resource group composed of VA and non-VA experts has been utilized in this program, especially in the VA's Vietnam Veteran outreach programs.

They will continue to stress the importance of recognizing this disorder, as well as any other mental disorder.

Mr. Ronald Bitser

Health Problems Related to Agent Orange Herbicide Exposure

I. The VA has not failed to instruct its physicians in the diagnosis of chloracne. Two educational conferences for the Environmental Physicians in VA medical centers have dealt with the condition and its diagnosis. In addition, a separate task force was created to prepare a detailed and even more definitive discussion of the diagnosis. It has almost completed its work.

The VA has had no development over the last few weeks that would warrant elaboration of Dr. Shepard's statement of April 27, 1981. No evidence has been brought forward, in fact, that VA physicians are misdiagnosing chloracne or that it has been a pivotal consideration in dealing with the problems of Vietnam veterans.

2. On July I, 1980, the Veterans Administration wrote to you denying your appeal under the Freedom of Information Act for the names and addresses of Vietnam veterans residing in California and informing you that the agency would consider your request under the authority and requirements of Title 38

United States Code, paragraph 3301. A definitive answer to your

Mr. Ronald Bitzer

request was postponed pending a comprehensive review and evaluation for the former Administrator concerning the general area of name and address disclosures. This review was not completed because of the change in Administrations. Policy options in this area will be presented to the new Administrator upon his appointment.

3. There is no need at this time to appoint an outside group to examine the VA's handling of "re-entry problems" which may have resulted from Agent Orange exposure. The issues surrounding the use of Agent Orange in Vietnam relate to physical conditions more than to "re-entry." The Veterans Administration is actively pursuing answers to the medical questions related to Agent Orange exposure.

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4. Neither the officials at the Veterans Administration nor I can speak for those who picketed the VA Central Office on May 22, 1981. We understand, however, that the approximately 30 individuals who demonstrated there were part of a conference of about 200 veterans who met in Washington to express their concerns regarding claims of disability due to Agent Orange and delayed stress.

Mr. Ronald Bitzer

Budget Cuts in the VA

I. All federal activities have been asked to participate in efforts to control deficit spending. The VA budget, through realignment of existing resources, permits the Veterans Administration to continue to treat a record number of veteran patients with a professional staff of unprecedented quality. I believe that the American people can be confident that the health care of this Nation's veterans is not being neglected,

The Academic Affairs Information Letter which you referred to in your mailgram urged VA facilities to search for methods of cost containment. The letter points out that housestaff save money:

"As long as housestaff provide essential patient-care services, the Nation's hospitals could thereby function with fewer practicing physicians resulting in lower operating budgets." There is reference to a private (not VA) hospital where the cost was up to 60 percent more on teaching versus non-teaching floors of the hospital, largely on the basis of more laboratory tests. However, all intensive care patients were admitted to the teaching floor which would require higher costs to deliver the more intensive care.

Mr. Ronald Bitzer

2. There are no planned reductions of physician positions in the VA medical care system now or in the foreseeable future.

I appreciate the opportunity to provide this information.

RONALD REAGAN

4-0318785140 05/20/81 ICS IPPMTZZ CSP WSHB 2134799215 MGM TDMT LOS ANGELES CA 733 05-20 0125P EST

PRESIDENT FONALD REAGAN WHITE HOUSE WASHINGTON DC 20500

VIETNAM VETERANS ARE REQUESTING A MEETING WITH THE PRESIDENT OF THE UNITED STATES DURING YOUR MEMORIAL DAY VISIT TO SOUTHERN CALIFORNIA AT THE SITE OF THE MARCH 14, 1981 PROTEST BY THE LATE JAMES R HOPKINS TO INHUMANE TREATMENT BY VETERANS ADMINISTRATION PERSONNEL TO THE SICK VETERANS OF THE NATION.

THE REASONS FOR THE NECESSITY OF THIS PERSONAL VISIT, WHICH SOME VIETNAM VETERANS AND SUPPORTERS ARE STRESSING BY OUR WAIT-IN THERE, ARE THE FOLLOWING:

DELAYED STRESS AMONG VIETNAM VETERANS "THERE ARE NO FEATURES, COMPLAINTS OR CLINICAL FINDINGS TO SUPPORT. ANY RELATIONSHIP TO AGENT CRANGE, OR THE POST-VIETNAM STRESS SYNDROME, ALTHOUGH THIS WAS SPECIFICALLY EXPLORED FROM THE APRIL 7-8, 1981 CASE REVIEW OF THE LATE JAMES R HOPKINS AT THE BRENTWOOD V.A. HOSPITAL BY DOCTORS CYRIL BARNERT, RAMZI KIRIAKCS, GERALD MCKENNA AND MANUEL STRAKER. 1. WHY DID THE BRENTHOOD V.A. CASE REVIEW FOR JAMES & HOPKINS COMPLICATE THE CRITERIA FOR A CIAGNOSIS OF DELAYED STRESS BY ADDING SYMPTONS IN ADDITION TO THE MINIMUM REQUIREMENTS OF THE AMERICAN PSYCHIATRIC ASSOCIATION (REFER TO SEE DIAGNOSTIC AND STATISTICAL MANUALS OF MENTAL DISORDERS, 3RD EDITION)? 2. WILL YOU ORDER AN IMMEDIATE INVESTIGATION INTO THE FAILURE OF WADSWORTH AND BRENTHOOD V.A. HOSPITALS TO PROVIDE EVALUATION AND TREATMENT TO THE LATE JAMES FOFKINS? 3. WHY ARE VIETNAM VETERANS, SPECIFICALLY SWORDS TO PLOWSHARES IN SAN FRANCISCO, QUESTIONING THE MCDIFICATION OF THEIR CRITERIA FOR DISABILITY COMPENSATION TO VIET NAM VETERANS FOR DELAYED STRESS BY THE VETERANS ADMINISTRATION, SC THAT FEWER VETERANS GUALITY FOR SERVICE-CONNECTED DISABILITY AND REHABILITATION FROM THE GOVERNMENT. 4. WILL YOU ORDER A NATIONAL INVESTIGATION INTO THE VETERANS ADMINISTRATION PROGRAMS OF PSYCHOLOGICAL COUNSELING FOR VIETNAM VETERANS BY A TEAM OF NON-V.A. EXPERTS IN THE FIELD OF DELAYED STRESS?

HEALTH PROBLEMS RELATED TO AGENT ORANGE MERBICIDE EXPOSURE
"IT IS HIGH TIME THAT THE VETERANS ADMINISTRATION AND VARIOUS
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BUDGET CUTS IN THE V.A.

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2. HOW WILL V.A. HOSPITALS BE ABLE TO OPERATE AT ALL WITH THE PLANNED REDUCTION OF 20,000 PHYSICIANS IN THE HOSPITAL SYSTEM BY 1986?

PLEASE RESPOND
CENTER FCR VETERANS RIGHTS
RONALD BITZER
TEL 213-746-6315
514 MEST ADAMS BLVD
LOS ANGELES CA 90007

13:23 EST .

MGMCOMP MGM

MEMORANDUM

-> Bitzer Started Sit in on 5/20 -> Hunger shiher started

THE WHITE HOUSE

WASHINGTON -> Bitge letter state that from

6:00pm s/es, he would regolite w/ longuate.

We received yesteray

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-> lut traestie a UA-posted position of paper

of May Cleband - us closing leterous onhearh centers

& Chris Nocl: maybe help us seperate Bitse + home striken

Need some authority to issue with re P's program.
Why supporting the P's program qually - VA

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MGFCOMF FGF

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File Drange.

May 29, 1981

I know you are as relieved as I am that the original hunger strikers at the Wadsworth Veterans Administration hospital broke their fast last night.

One major reason why they did so is the attached letter from our Acting Administrator of Veterans Affairs, Dr. Donald L. Custis. Dr. Custis' letter was telecopied to the Wadsworth hospital and was very well received by the hunger strikers.

The situation is not resolved entirely because additional protestors led by one Ronald Bitzer of the Center for Veterans Rights in Los Angeles is still protesting at the hospital. Letters identical to the one sent to the hunger strikers ("Dear Concerned Veterans" letter) were sent to Bitzer and a group of veterans in Santa Barbara who had also communicated to the President.

I hope that Dr. Custis' statement of the President's policy and actions respecting these issues will be of use to you.

Cordially,

Morton C. Blackwell Special Assistant to the President

Sent to Cooper Halt Robert Apanogle Morman Hart nett Roft. Muller Minor Roberts

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Cordially,

Morton C. Blackwell Special Assistant to the President

file agent

VIETNAM VETERANS of SANTA BARBARA
An Independent Non-Incorporated Group of Vietnam Veterans
Meeting to Help Ourselves and Help Other Vietnam Veterans
7:30 pm, Tuesdays, Veterans' Memorial Building, 112 W. Cabrillo Blvd.
Santa Barbara, CA. 93101

FOR IMMEDIATE RELEASE Contact: Steve Schlah Phone: 687-1134

OFFICIAL

Vietnam Veterans of Santa Barbara have given a list of requests to a representative of President Ronald Reagan at the Western White House, Refugio Canyon, CA. 93117. Below are those requests.

1. We request a Housing Program be implimented for Vietnam Veterans that is comenserate with that given to veterans of World War II. Articles of that Housing Program for Vietnam Veterans should include provisions "no money down", extended mortgage term, and "availability".

2. We request "real" employment opportunities within the Private Sector, implimented under similar guidelines to the "HIRE" program, but solely formulated for Vietnam Veterans.

3. We request that funding be continued and expanded for the "VET CENTER"

Vietnam Veterans Outreach Program. It has shown both that it can be

effective and that it is truly needed by the Vietnam Veteran community.

4. We request that the Disabled Veterans Outreach Program (DVOP) continue to be funded by the Department of Labor and to add "permenant status to the DVOP representative positions. This program could be used to help impliment our employment request labeled number 2.

5. We request that the nearly one billion dollars (\$1,000,000,000)cut from the Veterans Administration budget be restored. For years, the V.A. has not been able to give the services to "all" veterans that it was mandated by Congress to perform, due to inadequete budgets in the past. Thus, there is no fat to cut from that budget, only lives.

6. We request that as the V.A.'s budget is restored, that its hospital and out-patient care should be brought up to the standards of hospitals in the Private Sector. President Reagan should now be aware what "good" medical care can and should be, and the care he received is not what veterans receive in V.A. facilities. (This is not to say that the Doctors and nurses the V.A. employ are substandard, but that they are underpaid and overworked. Their extreme dedication can only work so many days per week.)

7. We request that the V.A. impliment actions and compensation for cases involving Post-Traumatic Stree Disorders as they have been requested in studies sponsored by the Disabled Veterans of America (DAV) and researched by Dr. John Wilson and Dr. Charles Figley.

8. We request that the Federal Government initiate research into the side effects of Agent Orange (Dioxin Herbicide used in Vietnam as a defeliant) when it contacts human life, as it did to Vietnamese and Americans in Vietnam.

9. We request that the present time limit of ten (10) years of GI Bill eligibility be eliminated. Whether a veteran uses his or her benefits (up to 45 monthes of benefit) should be determined by his or her own individual needs and assessments and not the calendar. In a time of technological change, as today, educational needs change, and if a veteran still has benefits that have not been used, he should be entitled to use that which he has earned.

We, Vietnam Veternas of Santa Barbara, feel that these requests are not anything that veterans are not entitled to, but that which they deserve and should have been granted long ago.



PRESIDENT REAGAN:

WE THE VIEINAM VETERANS OF SANTA BARBARA PRESENT YOU WITH THIS MULTI-METAL SCULPTURE, NOT ONLY IN MEMORY OF THE 56,000 MED WHO DIED IN VIET NAM, BUT IN THE HOPE THAT YOU WILL READ AND FAMILIARIZE YOURSELF WITH THE LATEST STUDIES BY FIGLEY AND WILSON, ON FOST TRAUMATIC STRESS DISORDER. PERHAPS, SINCE YOUR OWN BECENT (OVER)

LIFE-THREATENING EPISODE, YOU CAN EMPATHIZE WITH SOME 700,000 young MEN WHOSE LIVES WERE WRECKED BY THE HORROR OF VIETNAM, WE HAVE WATCHED HOPEFULLY WHILE THREE ADMINISTRATIONS HAVE THRNED A DEAF EAR TO THE NEEDS OF VIET NAM VETERANS. PERHAPS WE CAN EVOKE SOME COMPASSION NOW ON THIS SYMBOLIC DAY, TEN YEARS AFTER THE WAR.

DAVID BELDING 945-3717
STEVE SCHLAH-687-1134
KESSLER MONTDO-687-6576
WAYNE HALLANDER

Elizabeth Date

Draft Response for signature of Acting Veterans Affairs Administrator,
Dr. Donald Custis.

The President has asked me as his newly designated Acting Administrator of Veterans Affairs to respond to your recent communication regarding issues of particular concern to Vietnam Veterans.

He has personally appointed me Acting Administrator until such time as the Senate confirms his nominee, Mr. Robert Nimmo, as Administrator of Veterans Affairs.

First, you may have been unaware that the President had decided to continue the ongoing work of the Interagency Work Group which has been the focal point within the government for research on the possible effects of Agent Orange. While some activities and programs of the Federal government have been slated for substantial reductions or elimination, the President's fiscal year 1982 budget contains \$9,540,000 of budgeted monies for research on the possible effects of Agent Orange. This is more than 300% greater than the \$3,126,000 budgeted for Agent Orange in the current fiscal year of 1981.

An unfortunate legacy of the Vietnam conflict is the continuing concern of many veterans that they may have suffered or may yet develop health problems as a result of long-term effects of certain chemicals to which they were exposed while serving in Vietnam. The President is committed to the fullest possible scientific examination of these concerns, with the aim of insuring that this matter is dealt with fairly and equitably. The important scientific research being coordinated by the White House Interagency Work Group, including the Air Force Ranch Hand Personnel Study, will be a major priority of this Administration.

Second, in the overall figures for the Veterans Administration, the President's budget sets out budget authority for fiscal year 1982 of

\$24.2 billion. This is an increase of \$1.3 billion over the \$22.9 billion budget authorization for current year 1981. This \$597 million over the initially proposed cuts, will permit the Veterans Administration to: (1) operate with no reductions in personnel in the Department of Medicine and Surgery, (2) operate with no reductions in veterans benefits.

Third, the President feels it is important to correct a widespread misunderstanding with respect to the funding of the Vietnam Veteran Outreach Centers. Many Vietnam Veterans have contacted the President in recent days expressing their dismay that these Outreach Centers are to be discontinued. While it is true that the U.S. Senate did pass many weeks ago a version of a budget resolution which many thought would end funding of the Outreach Centers, the situation has completely changed.

On the President gave his full support in the House to www in the Reagan Bi-partisan Budget Resolution which restored the most of previously proposed cuts in Veterans programs. The level of funding restored is more than enough to fund the Outreach Centers, with a proposed budget of \$26 million for FY '82 as opposed to only \$12 million expended in FY '81.

The Congress has authorized the President's spending levels but must now pass legislation specifically extending the life of the Outreach Centers. This has the overwhelming support of both parties in both the House and Senate. The President wants you to know that since the has been specifically committed to keeping the Outreach Centers funded and open when Congress authorizes and appropriates funds for this program by law.

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by the White House to stop plans to implement any proposed reductions in Veterans programs which were reversed and restored by the Reagan Bi-partisan Budget Resolution. The American Legion, the Veterans of Foreign Wars, AMVETS, Blinded Veterans Association, and Jewish War Veterans have all endoresed the Reagan Bi-partisan Budget Resolution which contains the President's aforementioned support of veteran's programs.

My office looks forward to working with you now and in the future.

Cordially,

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PRESIDENT RONALD REAGAN
ATIN MORTIN BLACKWELL ASSISTANT FOR
VETERANS AFFAIRS
WHITE HOUSE
WASHINGTON DC 20500

SPECIFICATIONS OF DEMANDS

- A. ADMINISTRATIVE ACTIONS FROM THE WHITE HOUSE
- 1. THE APPOINTMENT OF A TEAM OF NON-VA EXPERTS TO INVESTIGATE MEDICAL TREATMENTS AT THE WADSWORTH AND BRENTWOOD VA HOSPITALS AND THE MEDICAL TREATMENT BY THE VA OF THE LATE JAMES HOPKINS.
- 2. THE APPOINTMENT OF DR CHARLES FIGLEY AND DR ROBERT LIFTON OF PURDUE AND YALE UNIVERSITIES RESPECTIVELY TO THIS NON-VA TEAM TO ENSURE THAT THE TEAM INCLUDES IN ITS INVESTIGATION THESE 3 MEDICAL ISSUES:
 - A. THE FUNCTION OF THE VET CENTER
 - B. THE ADEQUACY OF THE AGENT ORANGE SCREENING EXAMINATIONS
- C. THE FUNCTIONING OF THE REGIONAL OFFICE RATING BOARDS WITH RESPECT TO DECISIONS BY VA PHYSICIANS CONCERNING CLAIMS FOR POST -TRAUMATIC STRESS DISORDERS
- 3. AGREEMENT BY THE VA TO RESPOND TO ALL FREEDOM OF INFORMATION ACT REQUEST FROM THE CENTER FOR VETERANS RIGHTS WITHIN THE SPECIFIED TIME PERIOD UNDER THE LAW (5U.S.C.552A).
- 4. AGREEMENT TO ESTABLISH OFFICES OF PATIENT REPRESENTATION IN ALL VA HOSPITALS COMPARABLE TO THE PATIENT REPRESENTATIVES IN THE OKLAHOMA VA HOSPITAL BY JANUARY 1 1982.
- 5. AGREEMENT FOR A MEETING IN LOS ANGELES WITH OFFICIALS OF THE VA DEPARTMENT OF MEDICINE AND SURGERY, INCLUDING DR BARCLAY SHEPARD, TO BRIEF THE PUBLIC ABOUT THE RESEARCH PROGRAMS SPONSORED BY THE GOVERNMENT INTO THE LONG TERM HEALTH EFFECTS OF HERBICIDE EXPOSURE IN VIETNAM. THIS MEETING WILL TAKE PLACE IN JUNE OR JULY THROUGH COORDINATION WITH THE CENTER FOR VETERANS RIGHTS.
- 6. ESTABLISHMENT OF AN OFFICE OF VETERANS AFFAIRS INSIDE THE WHITE HOUSE WITH ACCESS TO THE PRESIDENT AND THE LEADERS OF ALL FEDERAL GOVERNMENTAL AGENCIES.

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B. LEGISLATIVE ACTIONS PROPOSED BY THE WHITE HOUSE TO CONGRESS

1. PROPOSAL BY PRESIDENT REAGAN OF A PROGRAM OF MEDICAL SCREENING OF ALL VETERANS WHO WISH TO BE SCREENED FOR CURRENT DISABILITIES FROM MILITARY SERVICE. THIS PROGRAM, A "DELAYED RE-ENTRY PROGRAM" WILL INCLUDE THE FOLLOWING:

- (1) INDIVIDUAL COUNSELING WITH ANOTHER VIETNAM VETERAN WHO HAS BEEN TRAINED TO UNDERSTAND AND TO FIND THE VARIOUS READJUSTMENT PROBLEMS ASSOCIATED WITH VIETNAM WAR SERVICE AND THE LACK OF COMPASSION BY SOCIETY UPON RETURN FROM THAT WAR TIME EXPERIENCE.
- (2) PSYCHOLOGICAL COUNSELING AND CLAIMS ASSISTANCE FOR VETERANS WITH POST-TRAUMATIC STRESS DISORDERS AND OTHER PSYCHOLOGICAL PROBLEMS, INCLUDING REPRESENTATION BEFORE THE BOARD OF VETERANS APPEALS.
- (3) COMPLETION OF HEALTH QUESTIONNAIRES AND EXAMINATIONS FOR SYMPTONS THAT COULD BE RELATED TO EXPOSURE TO TOXIC HERBICIDES. VA HOSPITALS WOULD BE UTILIZED ONLY TO COMPLETE NECESSARY MEDICAL TESTS. IN VIEW OF THE PROBLEMS WITH THE CURRENT AGENT ORANGE SCREENING EXAM.
- (4) SCREENING OF ALL LESS THAN HONORABLE MILITARY DISCHARGES TO DETERMINE QUALIFICATION FOR UPGRADING OF LESS THAN HONORABLE MILITARY DISCHARGE.
- (5) REVIEW OF ALL MENTAL AND PHYSICAL DISABILITIES TO DETERMINE STATUS OF TREATMENT, COMPENSATION AND VOCATIONAL REHABILITATION BY THE VETERANS ADMINISTRATION.
- (6) COORDINATION OF EXISTING SERVICES IN THE COMMUNITY TO PROVIDE EMPLOYMENT ASSISTANCE.
 - (7) OUTREACH TO INCARCERATED VETERANS IN ALL PRISONS.
- 2. PROPOSAL BY PRESIDENT REAGAN OF THE ELIMINATION OF THE DELIMITING DATE FOR EDUCATIONAL BENEFITS, SINCE MANY DISABLED VETERANS HAVE NOT UTILIZED THEIR EDUCATIONAL BENEFITS.
- 3. PROPOSAL FOR RETROACTIVE DISABILITY COMPENSATION FOR POST-TRAUMATIC STRESS DISORDER WHEN THE DATE OF ORIGIN OF THIS DISABILITY IS ESTABLISHED BY MEDICAL RECORDS TO PRE-EXIST THE CHANGE OF POLICY BY THE VA FOR COMPENSATION FOR THIS DISORDER (1980).

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Please see SCHOOLS, Page 5

Harry Handler after selection as L.A. schools chief. After interviewing candidates from across the country, the board promoted its deputy superintendent.



JOHN OLIGNY / Los Angeles Times

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ive Under Way

ushed the average cost of a week of camp to fore than \$100, the generous support of Times adders is more important than ever. Without his support, many children will miss an invaluale experience.

Each child assisted by the Camp Fund has seed difficult personal circumstances—broken smilies, poverty, physical or emotional prob-

Many of these children work to earn a portion their fee by mowing lawns, selling peanuts or andy, baby-sitting or doing odd jobs. But withat help from the Camp Fund, their savings can rely pay the whole bill.

"Thousands of disadvantaged young people are Please see CAMP FUND, Page 6

Vigil Continues as Vets Await Reagan

Protesters Say They Will Discuss Their Complaints About VA Only With President

By KRISTINA LINDGREN, Times Staff Writer

More than 30 Vietnam veterans sat out the fourth day of their protest at the Veterans Administration's Wadsworth Hospital in West Los Angeles Saturday, waiting in vain for a response from President Reagan.

On the lawn outside, three hunger strikers—two of whom are patients at the nearby Brentwood Hospital, a VA psychiatric complex—staged an independent protest of conditions there.

Both groups insisted that the issues—from hospital mistreatment to cuts in veterans programs—that motivate their protest are broader than the death last Sunday of the emotionally troubled ex-Marine James R. Hopkins. In fact, two of the hunger strikers said they began their fast two days before Hopkins died, triggering the Wadsworth "wait-in" protest.

'I Want Respect'

"People are not aware of a lot of things that go on here," said John Keaveney, 31, who said he stopped eating solid food May 15 along with Marlin Adkins, 37.

"It's a warehouse for people, that's why I'm here," said Keaveney, who served two tours of duty with the U.S. Army in Vietnam. "I want the respect of the American people, the respect they owe us.

"If not, I'll die."

Michael McCarthy, co-director of the Center for Veterans Rights and one of the "wait-in" leaders said, "We are staying in the hospital until we have a meeting with Reagan," whose proposed budget cuts threaten veterans' programs.

Wednesday, the veterans sent the President a telegram detailing their grievances against the VA and the proposed budget cuts, then took over part of the Wadsworth lobby, vowing they would not leave until Reagan met with them.

But White House Deputy Press Secretary Larry Speakes, who was with Reagan at the President's ranch near Santa Barbara, said Saturday that the matter is being handled by the VA in Washington. Speakes said the White House is not directly involved.

Insist on Seeing Reagan

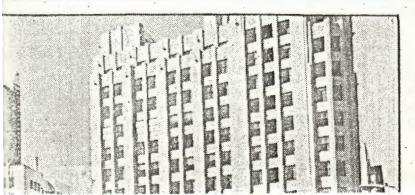
McCarthy said his group has had no contact with VA officials in Washington, adding that, in any case, the protesters would discuss only hospital complaints with the VA. Of their broader grievances, he said:

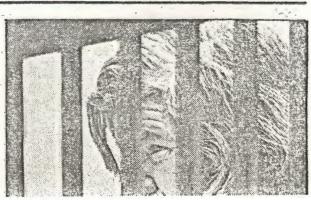
"We aren't talking to anyone but the President."

As demonstrators planned a symbolic Memorial Day funeral march for Hopkins, whose body was found in his Calabasas home lying next to a liquor bottle and an empty pill vial, Vietnam veteran leader Ron Kovic predicted, "This protest is going to be big, very big."

Kovic led a 17-day hunger strike in Sen. Alan Cranston's (D.-Calif.) Los Angeles office seven years ago to publicize the plight of Vietnam

Please see VETERANS, Page 5





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VETERANS: Protesters Await Reagan

Continued from First Page

veterans. He said Saturday that their gains under the Carter Administration after years of protests were being eroded under Reagan.

"I'm warning the President of the United States and the Republican Administration," Kovic said bitterly. "We can only take so much. The death of James Hopkins is symbolic, indicative of how desperate the Vietnam veteran is becoming. How many more time bombs must go off."

Hopkins, a 32-year-old ex-Marine who drove a jeep through the glass doors of Wadsworth and sprayed the hospital lobby with machine gun fire on March 14, was awaiting a federal court appearance on charges of destruction of federal property when he was found dead.

The cause of death has not been determined, but Los Angeles County Coroner Thomas T. Noguchi has ordered an investigation into whether Hopkins died as a result of exposure to Agent Orange, a powerful defoliant used in Vietnam.

When Hopkins, in camouflage battle gear, surrendered to police after crashing into the hospital, he told them he was suffering from exposure to the herbicide.

Subsequently, Hopkins was examined by a team of VA doctors, who wrote in his case file, "There are no features, complaints or clinical findings to support any relationship to Agent Orange, or the post-Vietnam stress syndrome," according to Ron Bitzer, co-director of the Center for Veterans Rights.

That finding, Bitzer complained, was typical of the VA's failure to address the special needs of Vietnam-era veterans.

"We are dealing with a bureaucracy that's out of control," Bitzer charged. "The VA... is incapable of providing readjustment services to the Vietnam-era veteran. We have special problems: emotional disturbances, exposure to toxic herbicides and an inability to deal with institutions and authority."

All the veterans in the Wadsworth lobby complained bitterly about the planned elimination of the more than 90 veterans outreach centers recently established across the country specifically to deal with

the problems of Vietnam veterans.

"We just got a place to go to and they're cutting it off," said Virgit Niegel. Niegel said he has been unable to hold a job or get proper treatment since his discharge and survives by donating plasma and getting food stamps.

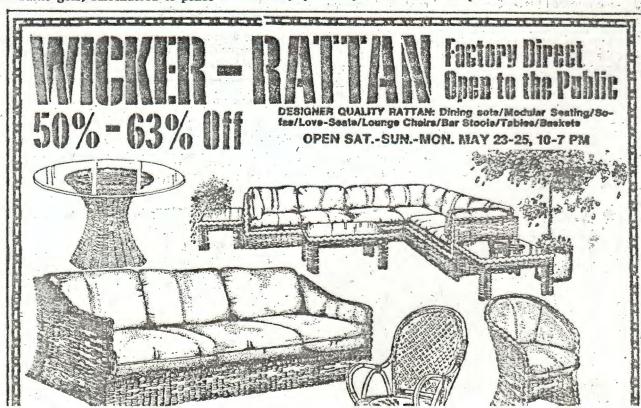
Keaveney said he began his hunger strike March 15 because he was tired of being tranquilized instead of treated for what he called "delayed combat neurosis."

Keaveney said he had tried to admit himself as a patient at Brentwood about six weeks ago because he was "tired of the nightmares, of the mortar shells dropping in on me and seeing my friends dead." He said he was only admitted after he threatened to "pull off the doctor's head."

"The last time I saw a doctor was two weeks ago for 10 minutes."

The Memorial Day march in honor of Hopkins was scheduled to begin at 1 p.m. Monday in front of the Wadsworth Hospital lobby.

A separate rally in support of the hunger strikers was planned today at 2 p.m.



Mr. Ronald Bitzer
Center for Veterans Rights
514 West Adams Boulevard
Los Angeles, California 90007

Dear Mr. Bitzer:

I am pleased to respond to your mailgram posing a series of questions about the Veterans Administration. I apologize for the delay in responding but wanted to allow time for my staff to thoroughly review your concerns. I will respond below to each question:

Delayed Stress Among Vietnam Veterans

- 1. Mr. Hopkins' case was thoroughly reviewed by a panel of psychiatrists at the Brentwood VA Medical Center, prompted by his demands made at the Wadsworth VA Medical Center.

 No evidence of a post-traumatic stress disorder was found but he did have psychological symptoms which preceded his military service. The criteria, as described in the Diagnostic and Statistical Manual III, specifically indicate that the symptomatology must occur after a severe stressor during active military service.
- 2. No treatment was recommended for Mr. Hopkins nor was medication prescribed. The VA assures me that they will be

Mr. Ronald Bitzer

glad to investigate this matter further but some time would be required to obtain the medical records and have them reviewed by their Central Office psychiatrists. The Goroner's Report is not yet available.

3. In March 1980, the Veterans Administration liberalized its method of considering a psychiatric disorder having its onset with a life threatening episode in military service, including being a Prisoner of War.

It established a procedure to be followed in examining veterans which would elicit information to establish a proper diagnosis, which would lead to the grant of service connected compensation for post-traumatic stress disorder. The procedure and grant of benefits were a liberalization, in line with the latest findings of the American Psychiatric Association.

4. The VA has been actively involved in an educational program to acquaint their staff with the characteristic symptomatology of the post-traumatic stress disorder. A resource group composed of VA and non-VA experts has been utilized in this program, especially in the VA's Vietnam Veteran outreach programs.

They will continue to stress the importance of recognizing this disorder, as well as any other mental disorder.

Mr. Ronald Bitser

Health Problems Related to Agent Grange Herbicide Exposure

I. The VA has not failed to instruct its physicians in the diagnosis of chloracne. Two educational conferences for the Environmental Physicians in VA medical centers have dealt with the condition and its diagnosis. In addition, a separate task force was created to prepare a detailed and even more definitive discussion of the diagnosis. It has almost completed its work.

The VA has had no development over the last few weeks that would warrant elaboration of Dr. Shepard's statement of April 27, 1981. No evidence has been brought forward, in fact, that VA physicians are misdiagnosing chloracus or that it has been a pivotal consideration in dealing with the problems of Vietnam veterans.

2. On July 1, 1980, the Veterans Administration wrote to you denying your appeal under the Freedom of Information Act for the names and addresses of Vietnam veterans residing in California and informing you that the agency would consider your request under the authority and requirements of Title 38 United States Code, paragraph 3301. A definitive answer to your

Mr. Ronald Bitzer

request was postponed pending a comprehensive review and evaluation for the former Administrator concerning the general area of
name and address disclosures. This review was not completed
because of the change in Administrations. Policy options in this
area will be presented to the new Administrator upon his appointment.

- 3. There is no need at this time to appoint an outside group to examine the VA's handling of "re-entry problems" which may have resulted from Agent Orange exposure. The issues surrounding the use of Agent Orange in Vietnam relate to physical conditions more than to "re-entry." The Veterans Administration is actively pursuing answers to the medical questions related to Agent Orange exposure.
- 4. Neither the officials at the Veterans Administration nor I can speak for those who picketed the VA Central Office on May 22, 1981. We understand, however, that the approximately 30 individuals who demonstrated there were part of a conference of about 200 veterans who met in Washington to express their concerns regarding claims of disability due to Agent Orange and delayed stress.

Mr. Ronald Bitzer

Budget Cuts in the VA

1. All federal activities have been asked to participate in efforts to control deficit spending. The VA budget, through realignment of existing resources, permits the Veterans Administration to continue to treat a record number of veteran patients with a professional staff of unprecedented quality. I believe that the American people can be confident that the health care of this Nation's veterans is not being neglected.

The Academic Affairs Information Letter which you referred to in your mailgram urged VA facilities to search for methods of cost containment. The letter points out that housestaff save money:

"As long as housestaff provide essential patient-care services, the Nation's hospitals could thereby function with fewer practicing physicians resulting in lower operating budgets." There is reference to a private (not VA) hospital where the cost was up to 60 percent more on teaching versus non-teaching floors of the hospital, largely on the basis of more laboratory tests. However, all intensive care patients were admitted to the teaching floor which would require higher costs to deliver the more intensive care.

Mr. Ronald Bitzer

2. There are no planned reductions of physician positions in the VA medical care system now or in the foreseeable future.

I appreciate the opportunity to provide this information.

RONALD REAGAN

Draft of response for signature of Acting Veterans Affairs
Director, Dr. Donald Custis, to communications from Ron
Bitzer, Chris Noel, and Steve Schlah.

The President has asked me as his newly designated Acting Administrator of Veterans Affairs to respond to your recent communications about issues of particular concerns to the Vietnam Veterans.

As you may know, the President appointed me Acting Administrator today to fill the vacancy created by the departure of Rufus Wilson.

First, I am pleased to inform you that the President has decided to continue the ongoing work of the Interagency Work Group which has been the focal point within the government for Agent Orange activities. Many Vietnam Veterans and leaders of Veterans groups had urged the President to take this step.

Second, while many activities and programs of the Federal government have been slated by the President for substantial reductions or elimination, the President is pleased that his fiscal year 1982 budget contains \$9,540,000 of budgeted monies for Agent Orange activities. These is more than 300% larger than the \$3,126,000 budgeted for Agent Orange in the current fiscal year of 1981.

Third, in the overall figures for the Veterans Administration, the President's budget sets out budget authority for fiscal year 1982 of \$24.2 billion. This is an increase of \$1.3 billion over the \$22.9 billion budget authorization for

current year 1981. Again, this increase is in contrast to the well known budget cuts proposed by the President for many other areas.

Fourth, the major battle in Congress over the President's economic recovery package has been the fight in the House for the Reagan Bipartisan Budget Resolution for fiscal year 1981, otherwise known as the Gramm-Latta proposal. As you know from the news coverage, the President won an impressive victory. The Reagan Bipartisan Budget Resolution, for which the Administration fought so hard, included a \$597 million increase over previously proposed cuts in the Veterans Administration budget. This budget authorization of \$24.2 billion, \$1.3 billion over the current year and \$597 million over the initially proposed cuts, will permit the Veterans Administration to operate with no reductions in personnel in the Department of.

Medicine and Surgery and no reductions in veterans benefits.

Fifth, the President feels it is important to correct a widespread misunderstanding with respect to the funding of the Vietnam Veteran Outreach Centers. Many Vietnam Veterans have contacted the President in recent days expressing their dismay that these Outreach Centers are to be discontinued. While it is true that the U.S. Senate did pass many weeks ago a version of a budget resolution which many thought would end funding of the Outreach Centers, the situation has completely changed.

The President gave his full support in the House to

the Reagan Bipartisan Budget Resolution which restored the overwhelming majority of previously proposed cuts in Veterans programs. The level of funding restored is more than enough to fund the Outreach Centers.

Congressionial support for the Outreach Centers is overwhelming. Virtually all Senators and Congressmen have the clear understanding that the restored funding will keep the Outreach Centers open.

The Congress has authorized the spending levels but it now must pass legislation specifically extending the life of the Outreach Centers. This has the overwhelming support of both parties in both the House and Senate. The President wants you to know he is specifically committed to keeping the Outreach Centers funded and open when Congress authorizes and appropriates funds for this program by law.

The Veterans Administration has been specifically directed by the White House to cease plans to implement any proposed reductions in Veterans programs which were reversed and restored by the Reagan Bipartisan Budget Resolution Congress passed. In short, extension of the life of the Outreach Centers is locked in by overwhelming sentiment in the Congress and by the President's committment mentioned above.

In part because of the restored funding levels and because of the specific committment of the President, the American Legion, the Veterans of Foreign Wars, AMVETS, Blinded Veterans Association, and Jewish War Veterans all endorsed the Reagan Bipartisan Budget Resolution which restored funding to a level which would permit the extension of the Outreach Centers and the retention of personnel levels in the Veterans Administration's Department of Medicine and Surgery and no reductions in veterans benefits.

I only wish that every news reporter covering Veterans affairs was aware of these facts.

An unfortunate legacy of the Vietnam conflict is the continuing concern of many veterans that they may have suffered or may yet develop health problems as a result of long-term effects of certain chemicals to which they were exposed while serving in Vietnam. The President is committed to the fullest possible scientific examination of these concerns, with the aim of insuring that this matter is dealt with fairly and equitably. The important scientific research being coordinated by the White House Interagency Work Group, including the AirForce Ranch Hand Personnel Study, will be a major priority of this Administration

The President has personally designated me to be his acting Administrator of Veterans Affairs until such time as the Senate confirms his nominee, Mr. Robert Nimmo, as Administrator of Veterans Affairs.

I believe you will find me an

an enthusiastic supporter of the President's policies outlined in this letter. My office looks forward to working with you in the future.

Cordially,



May 28, 1981



Mr. Ronald Bitzer
Center For Veterans Rights
514 West Adams Blvd.
Los Angeles, CA 90007

Dear Mr. Bitzer:

The President has asked me as his newly designated Acting Administrator of Veterans Affairs to respond to your recent communication regarding issues of particular concern to Vietman Veterans. He has personally appointed me Acting Administrator until such time as the Senate confirms his nominee, Mr. Robert Nimmo, as Administrator of Veterans Affairs.

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Third, the President feels it is important to correct a wide-spread misunderstanding with respect to the funding of the Vietnam Veteran Outreach Centers. Many Vietnam Veterans have contacted the President in recent days expressing their dismay that these Outreach Centers are to be discontinued.

The President, in his nationally televised speech before the Congress on April 28th, stressed his support of the Reagan Bi-partisan Budget Resolution which restored most of the previously proposed cuts in Veterans programs. The level of funding restored is more than enough to fund the Outreach Centers, with a proposed budget of \$26 million for FY '82 as opposed to only \$12 million expended in FY '81.

The Congress has authorized the President's spending levels but must now pass legislation specifically extending the life of the Outreach Centers. This has the overwhelming support of both parties in both the House and Senate. The President wants you to know that he is specifically committed to keeping the Outreach Centers funded and open when Congress authorizes and appropriates funds for this program.

Fourth, the Veterans Administration has been specifically directed by the White House to stop plans to implement any proposed reductions in Veterans programs which were reversed and restored by the Reagan Bi-partisan Budget Resolution.

The American Legion, the Veterans of Foreign Wars, AMVETS, Blinded Veterans Association, and Jewish War Veterans have all endorsed the Reagan Bi-partisan Budget Resolution which contains the President's aforementioned support of veteran's programs.

My office looks forward to working with you now and in the future.

Cordially,

Donald L. Custis Acting Administrator 15th No agreement

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