

Wounded Warrior Project
4899 Belfort Road, Suite 300
Jacksonville, Florida 32256
☎ 904.296.7350
📠 904.296.7347



WOUNDED WARRIOR PROJECT
STATEMENT FOR THE RECORD
HOUSE COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES HOUSE OF REPRESENTATIVES

ON

“On Pending Legislation Including: H.R. 2943; H.R. 2942; H.R. 2676; H.R. 2677; H.R. 712; H.R. 1647; H.R. 3083; H.R. 485; Discussion Draft, Ryan Kules Specially Adaptive Housing Improvement Act of 2019; and Discussion Draft, To Improve the Work-Study Allowance Program Administered by the Secretary of Veterans Affairs”

June 20, 2019

Chairman Takano, Ranking Member Roe, and distinguished members of the House Committee on Veterans' Affairs, thank you for inviting Wounded Warrior Project (WWP) to testify on these important legislative priorities.

Wounded Warrior Project's mission is to honor and empower wounded warriors. Through community partnerships and free direct programming, WWP is filling gaps in government services that reflect the risks and sacrifices that our most recent generation of veterans faced while in service. Over the course of our 15-year history, we have grown to an organization of nearly 700 employees in more than 25 locations around the world, delivering over a dozen direct-service programs to warriors and families in need.

Through our direct-service programs, we connect these individuals with one another and their communities; we serve them by providing mental health support and clinical treatment, physical health and wellness programs, job placement services, and benefits claims help; and we empower them to succeed and thrive in their communities.

We communicate with our warriors on a weekly basis and are constantly striving to be as effective and efficient as possible by matching our programs – and our advocacy before Congress – to meet warriors' needs.

DUTY ★ HONOR ★ COURAGE ★ COMMITMENT ★ INTEGRITY ★ COUNTRY ★ SERVICE





We use these weekly engagements, our yearly WWP Alumni Survey, and direct programming to inform us of our positions outlined in this testimony.

Draft Bill: Ryan Kules Specially Adaptive Housing Improvement Act of 2019

One of WWP legislative priorities is the passage of legislation that expands VA's Specially Adaptive Housing Grant program (SAH). These expansions are outlined in the draft bill titled the *Ryan Kules Specially Adaptive Housing Improvement Act of 2019*. Ryan Kules is a bilateral wartime amputee who works at Wounded Warrior Project and helped highlight many of the program's deficiencies.

One aspect of this legislation that WWP is supportive of is the full reinstatement of the SAH benefit every ten years. As younger veterans age, get married, and have families, their needs in an adaptive home may change drastically. This is also true for those whose disabilities get worse over time. A veteran with a prosthetic leg might be fine to walk around their home when they are in their thirties, but they might require a wheelchair when they become senior citizens. We want warriors to thrive in their work and personal lives. Often, they must move to take advantage of opportunities to improve their socioeconomic conditions. It is not reasonable to expect a veteran to buy a home and never leave. This benefit is reserved for those catastrophically injured and who deserve our assistance throughout their entire life, not just one portion of it.

This bill also increases the total grant amount from \$81,080 to \$98,492, increases the total amount of applicants into the "expanded" SAH grant program from 30 to 120 a year, and increases the times a veteran may use the grant from three to six. These were all identified as deficiencies in the program that needed updating.

The VA Specially Adaptive Housing Grant assists the most critically ill, injured, and recognizes that Wounded Warriors find solitude in their homes as they transition from service into the civilian world. Wounded Warrior Project supports this Draft Bill as written and considers this piece of legislation a major priority for WWP during the 116th Congress.

H.R. 2942: To Direct the Secretary of Veterans Affairs to Carry Out the Women's Health Transition Training Pilot Program through at Least Fiscal Year 2020, and for other purposes

There are currently around 2,000,000 women veterans in the United States, which comprise 10% of the entire veteran population. Women veterans are the fastest growing cohort which is expected to double by 2045¹. Transition from military to civilian life is a critical touch point for VA and DoD. While women veterans are

¹ <https://www.pewresearch.org/fact-tank/2017/11/10/the-changing-face-of-americas-veteran-population/>



more likely to attend college, they are also more likely to be homeless over their male counterparts with a homelessness rate of 7.1 percent versus 5.3 percent². Understanding the unique challenges that women veterans face during transition is critical in ensuring success among this population. The Women's Health Transition Training Pilot Program helps transitioning women servicemembers by informing them of women's health and mental health care services available through the Veterans Health Administration, along with other tools that may be of use during their transition from military service.

We support H.R. 2942, which would expand the Women's Health Transition Training Pilot Program through fiscal year 2020.

H.R. 2676, H.R. 2677, H.R. 712, H.R. 1647: VA Survey of Cannabis Use Act, To Require the Secretary of Veterans Affairs to Provide Training in the Use of Medical Cannabis for all Department of Veterans Affairs Primary Care Providers, VA Medical Cannabis Research Act of 2019, Veterans Equal Access Act

Several emerging and alternative therapies have reported some initial results that are promising for the management and treatment of the invisible wounds of war, including post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI). A debate surrounding veterans' rights to access medical cannabis has emerged as a popular topic of discussion in the context of alternative therapies.

Choosing an alternative treatment method is a personal decision that should be made between each warrior, his or her family, and his or her medical team. Wounded Warrior Project encourages warriors to make informed decisions in pursuing the treatment options that are most relevant to their circumstances under guidance from their health care providers. Wounded Warrior Project supports evidence-based and evidence-informed therapies, as well as complementary and alternative therapies that have proven to be successful in rehabilitation and recovery.

While our position is limited in scope, we are using our annual survey to try to better understand how warriors are using cannabis. The 2018 WWP Alumni Survey reveals that around 18 percent of our alumni indicate they have used marijuana; 4.7 percent of those used marijuana less than once a month and 8.4 percent of them used marijuana more than twice a week, with the remainder falling in between³. To better inform our position on the use of medical cannabis, we added additional questions to our 2019 WWP Alumni Survey. While 2019 data is not published yet, we did find that 17 percent of our warriors indicated they use cannabis to treat a mental or physical condition and 49 percent of warriors know a veteran who is using cannabis to treat a condition.

H.R. 2676

² <https://www.woundedwarriorproject.org/media/183005/2018-www-annual-warrior-survey.pdf>

³ <https://www.woundedwarriorproject.org/media/183005/2018-www-annual-warrior-survey.pdf>



Wounded Warrior Project supports legislation to expand research, evidence-based, and evidence-informed therapies. One avenue to help understand the “whole picture” of an issue is survey-based data gathering. We routinely do this with our WWP Alumni Survey and, to this end, support H.R. 2676 as it will require the Secretary of Veterans Affairs to partner with a federally funded research center to conduct surveys to measure cannabis use by veterans. We would recommend a change on page 6, line 5, to strike “not later than one year after the date,” and replace this with “not later than two years after the date” as we have found that surveys take a considerable amount of time to develop, disseminate, and analyze. We do not think one year is long enough for VA to conduct a suitable survey on this topic.

H.R. 2677

H.R. 2677 requires VA to establish a training program to inform primary care providers on the use of medical cannabis. While we do not have a position on H.R. 2677, we are concerned with the lack of clarity on what training VA primary care providers would receive under this proposal and whether the fact that they are federal employees limits their ability in any way. We think that before VA can start training health care providers on the usages of medical cannabis, there must be additional studies on the effects of this drug on this population and the risks regarding the usage of a schedule I drug for veterans while it remains categorized as such.

H.R. 712

Much like H.R. 2676, WWP supports legislation to expand research, evidence-based, and evidence-informed therapies. H.R. 712 would require the Secretary of Veterans Affairs to carry out a clinical trial of the effects of cannabis on certain health outcomes of adults with chronic pain and PTSD. While we support the intent of the bill, we do have some concerns regarding the ability of VA to implement this research study. Specifically, page 5, line 4 through 13, requires the VA to use varying forms of cannabis to include, full plants and extracts, at least three different strains of cannabis, and varying methods of cannabis delivery. Currently, the University of Mississippi is the only institution with DEA approval to grow cannabis for research purposes. This is also the only institution that the federal government may purchase cannabis from for a federal study. Reports from former federally funded researchers have indicated that the University of Mississippi is limited in what they grow, which would hamper this proposed research study. If this bill were to pass, VA could possibly be put in a position to perform a study on cannabis strains that may not currently available to the federal government.

While we support the intent of H.R. 712, we recommend reviewing page 5, line 4 through 13, to avoid a failure in the study due to lack of appropriate cannabis availability.

H.R. 1647

While WWP supports legislation on medical cannabis that is researched-based, we are concerned regarding legislation that could be detrimental to veterans and VA employees due to complications regarding



federal and state cannabis laws. Currently, cannabis is a schedule I drug, but many States have laws legalizing medical or recreational cannabis. H.R. 1647 is concerning as it will authorize VA federal employees to recommend and give their opinion on a possible State-level approved medical cannabis treatment alternatives. While medical cannabis is legal in some States, it is still deemed illegal by the federal government. Given that veterans receive medical advice and treatment across different states, it is plausible that a federal employee would recommend medical cannabis to a veteran who resides in a state where it is not legal. This could lead to unnecessary legal action against the veteran due to confusion regarding Federal versus State medical cannabis laws. Additionally, there are insufficient protections in place for veterans regarding employment when using medical cannabis. Lastly, there is no protection for federal employees who recommend the usage of a federally scheduled I drug. This could lead to legal troubles for medical providers who recommend medical cannabis to a veteran as an alternative treatment. These fears lead us to oppose H.R. 1647 until such a time where these concerns can be addressed.

H.R. 3083: AIR Acceleration Act

Wounded Warrior Project acknowledges that VA needs the ability to alter its footprint to become more focused and better aligned with today's ever-changing veteran population. The Asset & Infrastructure Review (AIR) Act was passed in order to assess current resources and allow for a more focused and better-aligned infrastructure that will be designed to support the care to veterans where they might need it. Additionally, this legislation includes stakeholder involvement and other safeguards in the review process to ensure that the final result of the AIR Act is what the community would approve of. With this in mind, we support H.R. 3083 as it would accelerate the implementation of the AIR Act but recommend adding language that clearly states that this bill will be implemented after the market assessments have been completed.

H.R. 2943: To Direct the Secretary of Veterans Affairs to Make all Fact Sheet of the Department of Veterans Affairs in English and Spanish

Wounded Warrior Project does not have a position on this piece of legislation at this time.

H.R. 485: Veterans Reimbursement for Emergency Ambulance Services Act

Wounded Warrior Project does not have a position on this piece of legislation at this time.

Draft Bill: To Improve the Work-Study Allowance Program Administered by the Secretary of Veterans Affairs



Wounded Warrior Project does not have a position on this piece of legislation at this time.

Closing Remarks

In closing, we would like to acknowledge the bipartisan and inclusive spirit that guides the work of these committees. We share a sacred obligation to ensure that our veterans and their families get the support and care they have earned, and the success they deserve. At Wounded Warrior Project, we are committed to that mission, and we are constantly striving to be as effective and efficient as possible in the life changing programs we provide, as well as our advocacy efforts. We appreciate the committee inviting WWP to comment on these pieces of legislation and the work each member has done on behalf of veterans across the country.