

Testimony of



Legislative Priorities
&
Policy Initiatives *for the*
119th Congress

Presented by

Jack McManus
National President

Before the
House and Senate
Veterans Affairs Committees

February 25, 2025

Chairmen Moran and Bost, Ranking Members Blumenthal and Takano, and distinguished members of your respective committees. It is my pleasure as National President of Vietnam Veterans of America (VVA) to appear before you to present the highlights of our legislative agenda and policy issues for the 119th Congress.

Vietnam Veterans of America is a national Veterans Service Organization chartered by the United States Congress as a non-profit organization to promote the well-being of American Vietnam veterans and to promote social welfare in the United States by encouraging the growth, development, readjustment, self-respect, confidence, and usefulness of Vietnam veterans and veterans of all eras.

VVA is committed to speaking truth to power, acting openly and honestly in its affairs, and demanding truth, effectiveness, and accountability from the government. As demonstrated by the following agenda, VVA stands by its founding principle, which serves as a rallying cry for all veterans, emphasizing the need for solidarity:

Never Again Will One Generation of Veterans Abandon Another.

Our goal is to perpetuate a legacy of selfless service, respect, and caring for the next generation of veterans that shall never die. Our founding principle is a challenge to ourselves and future generations to never abandon a fellow veteran. Our organization is dedicated to advocating for the rights, health, and well-being of all our fellow servicemen and women.

ACCOUNTING AND RECOVERY

Fund the Defense POW/MIA Accounting Agency (DPAA)

Our long-time, top priority remains a demand for continued funding and logistical support for the DPAA to provide for the fullest possible accounting and recovery of servicemembers of the Vietnam War and of all other conflicts. We must not forget the prisoners of war and those who went missing in action. Since VVA's formation, the accounting and recovery of POW/MIA servicemembers have remained our top priority.

The DPAA investigates potential crash and burial sites and aids in the recovery and identification of remains in Southeast Asia and other conflict locations. To do so, it must engage in extensive research, conduct interviews, and collaborate with numerous nonprofit organizations and foreign governments.¹

¹ *Fiscal Year 2024 Budget Estimates*, DEFENSE POW/MIA ACCOUNTING AGENCY (March 2023).

There are still 1,573 unaccounted-for American servicemembers from the Vietnam War and funding delays impact the ability of the DPAA to bring our brothers-in-arms home to rest.² Funding the DPAA is an effective way for Congress to ensure that the families of the unaccounted-for receive the fate-clarifying information that they deserve. Time is the enemy as witnesses are passing away and identified potential sites are being altered by construction and land reclamation.³

LEGISLATIVE PRIORITIES

Conduct Research Mandated in the *Toxic Exposure Research Act*

For several decades, VVA has pushed for the government to recognize the impact of Agent Orange, Gulf War illness, burn pits, and other toxins not only on veterans but on their descendants. With help from Congress, the *Toxic Exposure Research Act (TERA)* was enacted to conduct research for this purpose.⁴ By establishing the intergenerational impact of toxic exposure, the families of our nation's servicemembers would be positioned to make critical informed personal and healthcare decisions.

Unfortunately for them, the VA simply refuses to comply with Congressional will. While Congress has done its part to advance the interests of toxic-exposed veterans with the passage of the *PACT Act*, the new bill does not specifically address intergenerational impact, and so the descendants of veterans, particularly those from the Vietnam War, continue to suffer. For this reason, we urge Congress to compel the VA to conduct the research that is already owed per *TERA*. We further urge them to explore other agencies, such as the Department of Health and Human Services, to ensure that this critical research is initiated and completed without delay.

Revise the *Blue Water Navy (BWN) Act* and Investigate Broadscale Dioxin Exposure

Congress must amend the *Blue Water Navy Vietnam Veterans Act of 2019* (PL 116-23) to include servicemembers who served aboard vessels that supported the war effort but were excluded from coverage.⁵ Congress must also investigate heightened dioxin exposure due to Navy water distillation methods.

² [*Past Conflicts*](#), DEFENSE POW/MIA ACCOUNTING AGENCY (Feb. 9, 2023).

³ [*V.I. in Vietnam: May 15 – June 5, 2023*](#), Mokie Porter, Vietnam Veterans of America (July 2023).

⁴ Pub. L. 114-315 §§ 631-34 (2016).

⁵ Pub. L. 116-23 (2019).

The *Blue Water Navy Vietnam Veterans Act* established a presumption of Agent Orange exposure for veterans who served offshore in the territorial waters of Vietnam between January 9, 1962, and May 7, 1975. Unfortunately, the act imposed a rough twelve-nautical mile limit for presumed exposure. The result was the denial of presumption for the tens of thousands of sailors who served aboard nearly two dozen aircraft carriers.⁶

Dioxin does not respect arbitrary lines in the sea, and can be found in most bodies of water.⁷ Before the advent of reverse osmosis systems following the Vietnam War, U.S. military vessels used multi-stage flash (MSF distillation) for water purification.⁸ While this water purification method is effective at removing larger masses from potable water, condensers increase the toxicity of drinking water by increasing the concentration of dioxins and adjacent pollutants.⁹ Exposure amounts for sailors were estimated to be 2 to 3 magnitudes higher because of distiller use.¹⁰ It should be noted that these toxic effects were seen using systems comparable to the reverse osmosis systems used by the Navy after the Vietnam War – systems that were supposed to be more effective at removing contaminants, but that failed to purge dioxin and other toxins. Generations of sailors and Marines were presumably at risk of exposure. Congress is therefore obliged to compel the DoD and VA to properly investigate dioxin exposure due to these faulty water purification methods.

Conduct Research on Pre-Gulf War Burn Pit Use and Include Those Veterans for Healthcare Eligibility Due to Toxic Exposure

Burn pit exposure is not a scenario unique to the Gulf War and Global War on Terror. Servicemembers have been instructed to burn their waste for centuries. For this reason, the exclusion of veterans who served in locations outside of the Middle East and West Asia or before the Gulf War was a misstep when Congress passed

⁶ [Carrier Deployments During the Vietnam Conflict](#), NAVY DEPT. LIBRARY (last visited Feb. 20, 2024).

⁷ See, Booth, et al., [Global Deposition of Airborne Toxin](#), 75 MARINE POLLUTION BULLETIN (1-2), pg. 182-86 (Oct. 15, 2021); see also, [Persistent Organic Pollutants: A Global Issue, A Global Response](#), Env. Protection Agency (last visited Feb. 20, 2024) (for satellite imagery of persistent organic pollution being transported worldwide).

⁸ [BLUE WATER NAVY VIETNAM VETERANS AND AGENT ORANGE EXPOSURE](#), NATL ACAD. PRESS (2011), at 104.

⁹ Natl. Res. Cent. For Env. Toxicology (ENTOX), [Examination of the Potential Exposure of Royal Australian Navy \(RAN\) Personnel to Polychlorinated Dibenzodioxins and Polychlorinated Dibenzofurans via Drinking Water](#), DEPT. OF VET. AFFAIRS., Australia (2002).

¹⁰ Ibid.

the *Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics (PACT) Act*.¹¹

Monitor PACT Act Implementation and the Toxic Exposure Fund (TEF)

TEF dollars must be spent conducting research that will inform the public of any former or current risks of military service, providing healthcare access for affected veterans, and instructing the Department of Defense on methods of minimizing toxic exposure in future conflicts. To date, the VA has not made an adequate effort to provide transparency on how these funds are or will be spent, and while VVA is opposed to spending caps on toxic exposure research, it would welcome congressional oversight on spending to ensure that money is being spent in a way that will benefit veterans and their families.

Compel VA to Conduct an Epidemiological Study on Fort McClellan and Other Exposure Sites, and Inform Veterans About the Risks and Their Rights

Congress must ensure that the VA executes the Fort McClellan epidemiological study required by the *Sergeant First Class Heath Robinson Honoring our Promise to Address Comprehensive Toxics (PACT) Act* and ensure that veterans and others impacted by toxic exposure at Fort McClellan are informed about their right to participate and receive healthcare.¹²

A \$442.3 million Base Realignment and Closure (BRAC) cleanup began at Fort McClellan on September 30, 2003.¹³ There are still at least 28 identified active cleanup sites including, e.g. [Mock Village at Yahou Lake](#) and [Training Area T-5](#), both of which have contaminated groundwater, and the expected completion date for cleanup is 2046.¹⁴

Between 1935 and 1999, an estimated 650,000 veterans trained at Fort McClellan.¹⁵ These veterans were potentially exposed to radioactive compounds, chemical warfare agents, and airborne polychlorinated biphenyls (PCBs) caused by emissions from a neighboring Monsanto Corporation plant in Anniston, Alabama.¹⁶ The pollution and associated health risks are well documented.¹⁷ As is often the case,

¹¹ Pub. L. 117-168 (2022).

¹² Pub. L. 117-168 (2022).

¹³ [Fort McClellan](#), *ProPublica* (last visited Dec. 14, 2023).

¹⁴ *Ibid.* Contaminants include chloroform, carbon tetrachloride, TCE, and tetrachloroethane.

¹⁵ *Supra*, footnote 1.

¹⁶ [Potential Exposure at Fort McClellan](#), Dept. of Vets Affairs (last updated Jan. 11, 2023).

¹⁷ *See, e.g.* Dept of the Army, *Installation Assessment of Fort McClellan*, 110 Al. Recs. Eval. Rep. Vol. I (April 1977); *CERFA Letter Report Fort McClellan, Alabama*, Env. Sci. & Eng., Inc. (Dec. 1997); *Final Environmental Baseline Survey Fort McClellan, Alabama*, Env. Sci. & Eng., Inc.

many veterans and their families likely lived in off-base housing and were more directly exposed to the contaminants introduced by Monsanto.

While conditions on the ground have significantly improved since remediation efforts began, exposure risk for veterans assigned there lasted over six decades. Nearly half a million troops passed through Fort McClellan during this period, and it was the home of the MP Corps, Chemical Corps, and Women's Army Auxiliary Corps.

Unfortunately for our nation's veterans, this issue extends beyond Fort McClellan. As noted in a recent VA proposed rule, there are multiple identified sites where Agent Orange and pesticides were tested, used, and stored. These locations, domestic and abroad, are listed by the DoD's Armed Forces Pest Management Board (AFPMB), which is tasked with maintaining the list. The AFPMB accepts submissions to the list from members of the public to further the list's development, but there is no mechanism to ensure that additional sites will be listed. Moreover, despite the VA indicating that it may expand presumptions of exposure to locations on the AFPMB list, there is no guarantee that it will do so, or that it will do so for locations that are added in the future. Congress must make regular inquiries about toxic exposures on domestic and overseas installations, so that veterans and their families can mitigate the harm caused by their toxic exposure.

IMPROVING ACCESS TO EARNED BENEFITS

Increase Support for Vulnerable Veteran Populations

Congress must address the unique challenges faced by combat-injured veterans who are forcibly medically retired before completing their service, many of whom are granted compensation at a rate of only 75% of their base pay or lower. The base pay of junior-ranking servicemembers is on the lower end of the pay scale, leaving these vulnerable veterans with an unreasonably low rate of compensation. It is our belief that severely wounded servicemembers forced out for medical reasons before completing their first term of service due to a combat wound or injury should receive dual compensation without offsets. Active Duty, National Guard, and Reserve

(Jan. 1998); *Radiological Historical Assessment Pelham Range, Fort McClellan Anniston, Alabama Final Report*, U.S. Army Corps of Eng. (Dec. 2001); *Final Decision Document for the LaGarde Park Site of the Former Fort McClellan, Anniston, Alabama*, U.S. Army Corps of Eng. (Jun. 2006); *Health Consultation for Anniston PCB Site (Monsanto Company)*, ATSDR (Jul. 30, 2003); Public Comment Release, *Evaluation of Soil, Blood, & Air Data From Anniston, Alabama, Calhoun County, Alabama*, ATSDR (Jan. 27, 2010); *Anniston Community Health Survey*, ATSDR (Jul. 22, 2015).

servicemembers should all be included. The *Major Richard Star Act* (H.R. 1282/S.344), introduced in the 118th Congress, would allow combat-disabled military retirees to receive full retirement pay and disability benefits simultaneously; under current law, these payments are offset against each other. However, the *Star Act* was only available to those who had been able to complete 20 years of service and thus left a significant group of veterans forced out of a career opportunity by critical injury vulnerable and uncompensated. VVA urges Congress to introduce new legislation to address and correct this compensation offset issue for all combat-disabled veterans.

Pass Legislation Reinstating the 48-Hour Review Period for Disability Claims

Historically, Veterans Service Organizations (VSOs) have played a significant role in aiding veterans applying for disability benefits by reviewing their claims before the issuance of a final decision. These reviews were conducted within the 48 hours preceding the issuance of these decisions. During the review, VSOs would identify and address errors, omissions, and missing evidence. Unfortunately for our community, the Department of Veterans Affairs removed this review process and instated the Claims Accuracy Review (CAR) program.

The CAR program suffers from several limitations. Its narrow criteria fail to capture the breadth of potential issues identified during the previous 48-hour review process. Moreover, it duplicates the existing claims appeal process, creating unnecessary delays and redundancy.

Veterans remain disproportionately impacted by human error in VA claims processing. Data indicates that approximately 50% of claims are initially denied, with a staggering 80% containing errors at the Board of Veterans Appeals stage – errors that could have been identified during the previously available VSO review.¹⁸

Reinstatement would allow Veterans Service Officers (VSOs) to dispute erroneous conclusions and point to errors, improving claims outcomes for veterans and reducing the need for participation in the appellate process.

Enact Legislation Prohibiting the Reduction of VA Disability Compensation for Incarcerated Veterans

Veterans involved with the justice system who are otherwise eligible for VA benefits served their country with distinction, and incarceration should not be used as a justification for diminishing earned benefits. Congress must enact legislation

¹⁸ BD OF VETS' APPEALS, [Decision Wait Times](#), DEPT OF VETS' AFFAIRS (last visited Feb. 16, 2024).

prohibiting the reduction of VA disability compensation for these veterans, placing any balance above 10% into an escrow account until a veteran's release date.

Under current regulations,¹⁹ benefits for these veterans are capped at 10%, leaving them with inadequate financial resources upon release. The natural consequence of this is an increased risk of poverty, homelessness, and recidivism for veterans and their families.²⁰ By holding justice-involved veterans' money in escrow, we can reduce instability and help them return as productive members of society once they have served their time.

Examine and Revise Current VBA-Fiduciary Program to Address Injustices

Under the current Veterans Benefits Administration-Fiduciary Program, a veteran may be deemed "mentally incompetent" if the VA determines the veteran cannot manage their financial benefits.²¹ This determination—often made without judicial oversight—triggers an automatic reporting of the veteran to the National Instant Criminal Background Check System (NICS) and effectively stigmatizes them for life. The program's flawed practice of linking financial incompetency with "dangerousness" and automatic classification as a "criminal" can have devastating consequences on veterans' rights, livelihoods, and dignity. They are permanently labeled as "unstable" and "untrustworthy" when often their financial issues are a direct result of conditions like PTSD or physical conditions acquired during service to our country that have placed them in financial distress.

The VBA-Fiduciary Program is rife with constitutional violations, which are not just legal abstractions. Veterans are unjustly stripped of their Second Amendment right to bear arms based on financial assessments, not verifiable evidence of dangerousness. They lose their Fifth Amendment rights by being denied due process when they are not given proper notice, hearings, or appeals before being reported to NICS. Finally, they are stripped of their Fourteenth Amendment rights when they are treated unequally compared to non-veterans, deprived of equal protection and fundamental fairness under the law.

This flawed VBA-Fiduciary Program undermines trust in the VA, discourages veterans from seeking help, and perpetuates the stigma surrounding mental health

¹⁹ 38 CFR § 3.665 - Incarcerated beneficiaries and fugitive felons—compensation.

²⁰ Hall, Harger, and Stansel, *Economic Freedom and Recidivism: Evidence From U.S. States* (2014), at 4 (The most frequently committed crimes among recidivists are financially motivated).

²¹ [Lapse in Fiduciary Program Oversight Puts Some Vulnerable Beneficiaries at Risk](https://www.vaogig.gov/), (February 11, 2025) VA-OIG, Office of Audits and Evaluations, <https://www.vaogig.gov/> (accessed on 02/13/2025).

and financial struggles. VVA urges Congress to act swiftly to reform this system to ensure no veteran loses their rights without due process. Veterans who have served this nation with honor deserve better than to be subjected to unconstitutional and dehumanizing policies.

IMPROVING OPPORTUNITIES FOR VETERANS HEALTHCARE

With the passage of the *Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act* (HR 83.71), we are cautiously optimistic that we will begin to see improved opportunities for veterans' healthcare, covered under the provisions of the new law. However, we must continue to work to ensure that the directives of the new law are enacted in a timely manner to create a sustainable healthcare model allowing veterans to receive care locally.

The VA should collaborate with community healthcare facilities, especially in rural areas, to provide necessary medical services to veterans. Many healthcare providers are reluctant to participate in the VA system due to delayed payments and bureaucratic red tape. Establishing a reimbursement model that ensures timely payments is crucial for encouraging participation.

Veterans represent a small percentage of the U.S. population, yet they require frequent access to quality healthcare services, often because of service-connected health conditions. In recent years we have seen an alarming trend of healthcare systems shutting down, which directly impacts veterans' access to care. We must create a framework that prioritizes local healthcare access for veterans.

Our aging veteran population faces unique challenges that require focused attention. Many veterans report significant difficulties in securing timely medical appointments. Prioritizing their health needs and ensuring they receive the attention and care they deserve is vital.

Suicide Prevention Initiatives

The alarming rate of veteran suicides demands immediate action.²² According to the most recent *2024 National Veteran Suicide Prevention Annual Report*, the “rate for Veterans aged 55- to 74-years-old increased by 4.4%; and for Veterans aged 75-years-old and older, the suicide rate increased by 4.9%.”²³

²² U.S. Department of Veterans Affairs, Office of Suicide Prevention. *2024 National Veteran Suicide Prevention Annual Report*. 2024. Retrieved 02/12/2025 from chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.mentalhealth.va.gov/docs/data-sheets/2024/2024-Annual-Report-Part-2-of-2_508.pdf.

²³ Ibid, p. 13.

Veterans in crisis must have immediate access to mental health services without being turned away due to staffing shortages or funding limitations. Tragically, many veterans have taken their lives shortly after being denied access to care. When mental health services cannot be provided within 24 hours of a veteran's request, the VA must refer them immediately to the nearest veteran's community care provider and provide transportation.

We urge the continued funding and prioritization of alternative therapies and peer mentoring programs that provide vital support to veterans struggling with mental and physical health issues. Such initiatives can significantly reduce the suicide rate among veterans and foster a sense of community and understanding.

Addressing Homelessness Among Veterans

The *2024 Point in Time (PIT) Count* of the homeless in the United States, revealed an encouraging 7.6% decrease in veteran homelessness compared to January 2023, bringing the total number of veterans experiencing homelessness to 32,882.²⁴ The nationwide picture of veteran homelessness, however, remains complex and deeply concerning, particularly in areas like West Los Angeles. We must ensure that properties designated for homeless veterans are not repurposed for non-veteran use, as has been done in West L.A. This includes preventing such properties from being converted into country clubs or other non-supportive uses.

We recommend continuing to develop comprehensive support systems to address the root causes of veteran homelessness, including mental health services, job training, and housing assistance. Legislative efforts must focus on providing the necessary resources and support to prevent homelessness among veterans. Careful oversight of new programs to address veteran homelessness must also be mandated by Congress to avoid delays and misappropriations like what has played out at the West L.A. Campus and VA Medical Center.²⁵

Order the VA to Reinstitute the Use of Physician Assistants as Mental Health Treatment Providers at VA Hospitals and Clinics

²⁴ [HUD Releases 2024 Annual Homelessness Assessment Report](https://nchv.org/hud-releases-2024-annual-homelessness-assessment-report/), National Coalition for Homeless Veterans (NCHV), <https://nchv.org/hud-releases-2024-annual-homelessness-assessment-report/>, accessed on 02/12/2025.

²⁵ *A Major Victory in the Fight to End Veteran Homelessness on the West L.A. Campus*, Mokie Porter, Vietnam Veterans of America (Sept. 13, 2024). <https://vva.org/press-releases/a-major-victory-in-the-fight-to-end-veteran-homelessness-on-the-west-la-campus/>, accessed on 02/12/2025.

Access to mental healthcare has historically been a struggle for veterans. The VA is the largest centralized provider of these services, operating over 1,500 facilities where it provides mental health services to roughly 2 million veterans.²⁶ The level of service, however, is grossly inadequate; an August 2023 OIG survey found that more than 75% of the VA's hospital networks and associated clinics reported severe shortages of mental health providers.²⁷ Permitting PAs to practice in this space will allow for the dramatic expansion of access to mental health services for our nation's veterans.

Amend the Tax Code for Puerto Rico to Draw More Healthcare Workers

Access to healthcare in rural areas is a persistent challenge for our nation's veterans. Veterans residing in Puerto Rico are no exception. A chronic issue for the Commonwealth is the shortage of employees within the Puerto Rico VA healthcare system. It is difficult to motivate individuals to move from their homes to other areas, and we often must turn to financial incentives to achieve the outcomes we desire.

Residents of Puerto Rico are generally exempt from individual federal income tax.²⁸ Unfortunately for veterans, federal employees are not exempt.²⁹ Adjusting the Internal Revenue Code will fix this arbitrary tax disparity and provide an incentive for skilled professionals to move to Puerto Rico to deliver critically needed care. As the veteran population continues to age, the need for healthcare workers will continue to increase. Congress must act to eliminate this barrier to care.

HONORING MILITARY AWARDS AND DECORATIONS

Re-introduce the *Donut Dollies Congressional Gold Medal Act*

1,120 women volunteered to serve with the Red Cross during the Vietnam War and 627 of those women worked as Donut Dollies. They were members of the Supplemental Recreation Activities Overseas (SRAO) program.³⁰ Providing critical morale boosts to soldiers, Dollies traveled by helicopter to forward operating positions.³¹ This perilous, volunteer service resulted in three deaths – three Dollies

²⁶ Kathleen McGrory and Neil Bedi, [How the VA Fails Veterans on Mental Health](#), ProPublica (Jan. 9, 2024).

²⁷ Office of Inspector General, [OIG Determination of Veterans Health Administration's Severe Occupational Staffing Shortages: Fiscal Year 2023](#), Dept. of Vets' Affairs (Aug. 22, 2023).

²⁸ 26 U.S.C. § 933 - Income from sources within Puerto Rico.

²⁹ Ibid.

³⁰ See H.R. 3592, 118th Cong. (May 22, 2023).

³¹ See generally, Sue Behrens, [The SRAO Story](#) (1986).

did not make it home from Vietnam.³² In recognition of their service to our nation, members of the Donut Dollies should be awarded the Congressional Gold Medal.

Maintain the Gold Star Families Criteria³³

VVA is also strongly opposed to any proposed dilution or expansion of the criteria for which the Department of Defense Gold Star Lapel Button is awarded (10 US Code §1126 & DoD Instruction 1348.36). It should always be our nation's aspiration that America has fewer and fewer Gold Star Families, not more of them. The currently decreasing number of Gold Star Families (due to an absence of hostilities involving American forces, and the progressing ages of older Gold Star Families from WWI, WWII, the Korean War, and the Vietnam War) is not a reason to alter the current criteria to create millions of new Gold Star Families.³⁴

Investigate Military Award-Granting Processes

VVA supports a thorough investigation into the military awards system to ensure that deserving servicemembers receive appropriate recognition. We also call for a review of the current process of allowing non-military organizations and commercial companies to apply for and receive a wordmark or trademark for a military award or decoration. This practice should immediately be stopped. It is dishonorable and disgraceful and is injurious to legitimate veterans' organizations as it undercuts their fundraising efforts.

Many veterans, especially those from Iraq, have faced significant barriers in receiving recognition for their valor due to an award-granting process that has involved civilian contractors with little to no military experience. We need to investigate how these awards were processed and the criteria that were applied, as the recognition of only one living Medal of Honor recipient from the Iraq War to date raises serious concerns about the fairness and transparency of the awards system.

Further, it is essential to ensure that the contributions of the National Guard and Reserve members are recognized equitably. They have served valiantly and should not be overlooked in the awards process. We have heard of cases where a member of the Guard or Reserve has been recommended for a Medal of Honor or

³² Dick Conoboy, [*Donut Dollies in Vietnam – Three Did Not Come Home Alive*](#), NORTHWEST CITIZEN (May 22, 2023).

³³ <https://www.hopeforthewarriors.org/blog-an-honor-no-one-wants-what-is-a-gold-star-family-and-how-is-it-different-from-a-blue-star-family/>

³⁴ Tom Burke, [*"The Debate of Who Deserves a Gold Star Designation," The VVA Veteran*](#) (Sept-Oct 2024). https://vvaveteran.org/44-5/44-5_vicepresident.html

Distinguished Service Cross and had these honours not properly reviewed downgraded one to two levels based on that factor or rank alone (The unwritten rule) identified by retired members who worked in this area. This is simply unfair, and we ask for common sense and decency in this review. SSG Bellavia MOH Iraq identified some of this in his editorial in 2019.

<https://www.militarytimes.com/news/pentagon-congress/2019/11/06/lone-living-medal-of-honor-recipient-from-iraq-wants-more-recognition-for-the-heroes-of-that-fight/>

We agree wholeheartedly with Abraham Lincoln when he said a “Nation that does not honor its heroes shall not long endure”.

A comprehensive review of the military awards processing system must be conducted to name and rectify systemic failures that have prevented deserving service-members from receiving honours then immediately correcting those errors in a timely manner. It is crucial to ensure that servicemembers’ statements of support are respected in the awards process, restoring trust in the system and ensuring that deserving individuals are recognized for their sacrifices based on “actions” and not rank, personality or component of service, denying these earned honours denies America its heroes we most desperately need today.

This is also critical when we look at the recent issues of Traumatic Brain Injury (TBI) and the processing of the Purple Heart Medal. This medal is often denied due to lack of medical treatment in theatre or documented treatment in theater. For example, TBI is the signature wound of the war in Iraq and Afghanistan. However, the sheer number of TBI claims as meeting the criteria for the awarding of the Purple Heart has led to many denials of the award. The denial implicitly presumes that the servicemember is lying about their injury in combat. Many servicemembers have been denied this earned honor, even when their claim is accompanied by multiple eye-witness statements and medical treatment when they return home. Let us apply common sense and honor those that have earned it.

CONCLUSION

We present these legislative priorities not only as a call for action, but as a testament to our unwavering commitment to ensure that no veteran is left behind. The sacrifices made by our generation demand that we work together to create a system that honors all veterans, providing them with the care and respect they have earned.

Let us make a collective effort to ensure that every veteran, regardless of when, where, or with what military branch they served, receives the support they need and deserve. Thank you for your time and for the opportunity to present this testimony. Together, we can build a future where no veteran is ever abandoned.

VIETNAM VETERANS OF AMERICA
Funding Statement
February 25, 2025

The national organization Vietnam Veterans of America (VVA) is a non-profit veterans' membership organization registered as a 501(c) (19) with the Internal Revenue Service. VVA is registered with the Secretary of the Senate and the Clerk of the House of Representatives in compliance with the Lobbying Disclosure Act of 1995.

VVA is not currently in receipt of any federal grant or contract, other than the routine allocation of office space and associated resources in VA Regional Offices for outreach and direct services through its Veterans Benefits Program (Service Representatives). This is also true of the previous two fiscal years.

For further information, contact:
Executive Director for Government Affairs
Vietnam Veterans of America
(301) 585-4000 extension 111

Jack McManus

Jack McManus was first re-elected to serve as VVA National President at VVA's 20th National convention, held in August 2023, in Orlando, Florida. First elected VVA national treasurer in 1995, he was re-elected to the position in 1997, and again in 2019. He previously served as the VVA Michigan State Council President for six and one-half years from 1989 to 1996, overseeing the largest state program in VVA. In 1997, he was awarded VVA's highest honor, the VVA Commendation Medal, for his extraordinary service to the organization, to all veterans, and to the community at large. The VVA New York State Council has also recognized him with its own Commendation Medal. During his career as a private businessman, McManus's company employed approximately 3,500 in two service sector businesses, with \$150 million annually in sales. In 1978, his company was recognized as the first drug-free workplace in the building service contracting industry. The company also emphasizes special hiring programs for handicapped individuals, ex-offenders, and rehabilitated substance abusers for its internal rehabilitation programs. From 1978 to 1985, McManus was the program manager for his company's contract with the Kennedy Space Center space shuttle program in Florida. Originally, from New York City, Jack McManus joined the Air Force in 1965, where he served until 1969. Between 1967 and 1968, he was assigned to Operation Ranch Hand in Vietnam. Jack received his B.A. in Business Management from New York University in 1973. He resides in North Carolina with his wife, Jackie. He is a recipient of numerous business and community awards.