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### Statement of

**Ms. Jacqueline Garrick, LCSW-C**  
**Whistleblowers of America**

**On**

**An Assessment of the Potential Health Effects of Burn Pit Exposure among Veterans**  
**Before the**  
**House Committee on Veterans' Affairs**  
**Subcommittee on Health**

**June 7, 2018**

Dear Chairman Dunn and Ranking Member Brownley;

Whistleblowers of America (WoA) is submitting this statement because we are concerned about the Department of Veterans Affairs (VA) lack of a consistent process to handle the toxic exposures, illnesses, and presumptions related to burn pits as the Gulf War continues. We have heard from numerous veterans – Vietnam to Gulf War to Iraq and Afghanistan (OIF/OEF) who feel that their concerns have been too long ignored while they get sick and their claims are denied. Furthermore, WoA also sees the fraud, waste and abuse of ignoring the Veterans Disability Benefits Commission (VDBC) recommendations<sup>1</sup> made over a decade ago and VA ineffectiveness in implementing research because of it. The VA has had the authority to create presumptions since 1921 and has done so only 150 times. However, this piecemeal approach to disability presumption decision-making has been laborious and insufficient for almost a century. Too many veterans have died while waiting. Congress should end this dysfunction before 2021.

The VA has confirmed that burn pits have been in existence since 1990, but we must do more than simply store veterans in a registry while they get sick and die. In the documentary *Delay, Deny, Hope You Die: How America Poisoned its Soldiers*,<sup>2</sup> veterans describe the expansive environmental contaminations that they endured while the government neglected its responsibility to protect them. Among those who the film follows is former Marine, Brian Alvarado, who at 70 pounds is unable to speak because of his Squamous Cell Carcinoma that he and his family attribute to his burn pit exposures yet unrecognized by VA as related to his

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<sup>1</sup> VDBC. (2007) Honoring the call to duty: veterans' disability benefits in the 21<sup>st</sup> century. Department of Veterans Affairs, Washington, DC. Chapter 5.

<sup>2</sup> Lovett, G. (2017) Morningstar Media.

exposures. In 2016, Ben Krause<sup>3</sup> wrote about the death of a 36 year-old Minnesota Air National Guard mother who died of Pancreatic Cancer after serving next to the 10 acre/100-200 tons a day burn pit on the base in Balad, Iraq. In January 2013, I visited the Bagram Air Force Base in Afghanistan on behalf of the Department of Defense (DoD) and saw the defunct burn bit operation and was truly taken aback by its enormity. Sadly, these stories are not new. In June 2018, The American Legion featured in its magazine, a feature story on Exposed in Service<sup>4</sup> related to Atomic Veterans from 1962 who were dosed with ionizing radiation but are also unable to obtain VA benefits because of the lack of evidence.

It is imperative that Congress fund VA research, plus research done by independent laboratories that can validate VA data on the impact of burn bit exposures as well as comorbid conditions more prevalent among those who have deployed to toxic environments where there is a likelihood of hazardous exposures. VA must have a research strategy that fences these priorities and MUST have a focus to support presumption decisions that can inform Veterans Benefits Administration (VBA) policies. It must also provide the proper management of research funds and oversight of execution.

In prior testimony, WoA, highlight its concerns with previous generations of veterans who have been suffered toxic exposures and environmental hazards. We outlined:

**Agent Orange:** A primary source of concern for veterans that have contacted WoA has been related to toxic exposures and environmental hazards. There are still so many Vietnam-era Veterans with Agent Orange related issues that have not been appropriately recognized because of the shortfalls in the research. For example, eye cancers are a continuous issue that lack research support. VA continues to deny claims for disability benefits, which in turn blocks veteran from accessing care. As the Vietnam generation ages and has more complex needs for care, the arguments over probable correlations need to be resolved before there is no one left for the science to help.

**Gulf War Illness:** Although it has been more than 25 years since the US invaded Iraq, the mysteries of Gulf War Illnesses haunt veterans while perplexing VA. A July 2017 GAO report concluded that VA is still inappropriately denying veterans claims. It found an 80 percent denial rate, which is three times greater than any other type of claim denials. Plus, it also took VA longer to adjudicate these benefits. This delay means that sick veterans are not fully eligible for VA healthcare. VA has promised better training and to develop a new plan for research.

**Fort McClellan:** The VDBC included these predominately female service members in its recommendations. Over 10 years later, the American Legion is still reporting on the “unknown toxic legacy” of Anniston and has a resolution that requires a toxic substance national research

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<sup>3</sup> Krause, B. 36-year old mother possibly the newest burn pit victim. DisabledVeterans.org, June 21, 2016

<sup>4</sup> Olsen, K. Exposure wars: the long, connected and continuing fight for accountability. June 2018. Pgs. 34-40

center, comprehensive examinations for environmental exposures, and improvement in these rules.<sup>5</sup> (This is consistent with the VDBC findings.)

**Camp LeJeune:** Due to the water contamination at the Marine Corps Base, Camp LeJeune, NC, increased reports of cancers in veterans and their families have been document over the last several decades related to the cleaning solvents in the water.

**Burn Pit Exposures:** Similar to previous generations of veterans, those who have served in Afghanistan and Iraq since 9/11 were exposed to a concoction of burning substances on military installations that has caused them to raise health concerns from cancers to respiratory and gastrointestinal disorders. Although VA denies conclusive research for these conditions and does not have a presumption for burn pits, it has established a registry. However, this is an area yet again that the VDBC recommendation could be informative and assistive to veterans' wellness if implemented. A registry alone assists no one.

### **VDBC Recommendations for Reconsideration:**

The VDBC conducted its work over a three-year period and reported its findings and 113 recommendations in October 2007. It was a Federal Advisory Committee established by President George W. Bush and its 13 commissioners were selected on a bipartisan basis. Presumption was a major issue that it tackled. The VDBC enlisted the subject matter assistance of the then Institute of Medicine (IOM) for its reliable and valid scientific approach. To meet the requirements outlined by VDBC, IOM established a committee that held meetings, reviewed research and other literature, and rendered its own report.<sup>6</sup> The IOM recommendations were incorporated into the VDBC Final Report after a full period of vetting and commentary by the community. In sum, the VDBC recommended:

1. Congress should create a formal advisory committee on disability related questions requiring scientific review
2. Congress should authorize a permanent independent Scientific Review Board (SRB) with a well-defined process using evaluation criteria
3. VA should develop and publish a formal process for disabling presumptions that is uniform, transparent, and sets forth all considered evidence.
4. The goal of presumptive disability should be to ensure compensation for veterans whose diseases are caused by military service (this goal is foundational for any related action)
5. The SRB should adapt a standard for "causal effect" based on a more likely than not broad spectrum of evidence that is either Sufficient, Equipoise and above, Equipoise and below, Against.

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<sup>5</sup> Olsen, K. The long shadow of Ft. McClellan. The American Legion Magazine. March 2018. Pgs. 22-28

<sup>6</sup> IOM. (2008) Improving the presumptive disability decision-making process for veterans. National Academies Press. Washington, DC.

6. This calculation should include relative risk assessment, epidemiology, animal studies, registries, mechanistic data, predictive algorithms, and interfaces with DoD.
7. When evidence is at Equipose or Above, an estimate of exposure should be included.
8. The relative risk and exposure prevalence should be used to estimate a service - attributable fraction.
9. Inventory all research related to veteran's health (VA, DoD or the funded)
10. Develop a strategic plan for OIF/OEF veterans research
11. Develop a plan for augmenting research capabilities within VA and DoD to more systematically generate health related evidence.
12. Assess enhancing research by linking VA and DoD health related databases
13. Conduct a critical evaluation of Gulf War (this includes OIF/OEF) tracking and environmental exposure monitoring data to categorize exposures during deployments (with DoD)
14. Establish Registries based on exposures, deployments, and disease
15. Develop an overall integrated (VA/DoD) surveillance plan
16. Include exposure monitoring in an VA/DoD Electronic Health Record
17. Implement a strategy for immediate and proximate exposure assessment and data collection
18. Interface VA and DoD exposure data systems
19. Mechanism to identify, monitor, track and treat individuals involved in research and other activities that are classified and secret
20. VA should consider environmental issues in a new presumption framework

Given that a decade has passed since the VDBC made these recommendations, Congress should ask the VA to relook at this systematic approach and design a comprehensive way forward for researching presumption related disabling conditions related to environmental hazards and toxic exposures. It should consider the comorbidity of chemical sensitivities and biological agents, especially in relation to neurological and psychological concomitant factors that may take years before onset.

Thank you for this opportunity to express our views on this significant issue impacting thousands of disabled veterans, Service members, and their families. We hope that this Committee will compel VA to act on researching the presumptive conditions related to environmental hazards and toxic exposures.

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Jacqueline Garrick is a former Army social work officer who has worked in the Departments of Veterans Affairs and Defense as well as for the House Veterans Affairs Committee. She is a subject matter expert in mental health and program evaluation. She is an advocate for disabled veterans and the use of peer support to improve resilience in traumatized populations. She founded Whistleblowers of America in 2017 based on her experience reporting attempted fraud with DoD Suicide prevention funds.

Whistleblowers of America is a 501C3, EIN 82-3989539. Its mission is to provide peer support to employees and veterans who have reported wrongdoing and experienced retaliation.

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