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THE WHITE HOUSE

WASHINGTON

October 27, 1982

MEMORANDUM FOR RED CAVANEY

FROM:

MORTON C. BLACKWELL 

SUBJECT:

Veterans Groups Thoughts on Agent Orange Situation

All three largest veterans groups are pleased with the decision to shift the agent orange study from the VA to the Communicable Disease Center in Atlanta.

Cooper Holt of VFW said: "We have been working to achieve this for a long time. This is pleasing to everybody."

Gabby Hartnett of the DAV expressed delight at the C. D. C. assignment. He says he hopes the study will go faster now and that it will have more credibility.

Mylio Kraja of the American Legion says that it took too long to get where we are. The blame for foot dragging at VA is at least allocable to the Carter Administration as much as to the Reagan Administration. He says he thinks a "cloud will be lifted from the study". He said the VA is simply not credible on agent orange because of the lack of activity on the subject.



Washington, D.C. 20201

*File
Vietnam
Veterans*

March 26, 1981

To: All Veterans Coordinators

From: Co-chair, Under Secretary's Task Force on Veterans
Director, Office of Veterans Affairs

Subject: Current Events

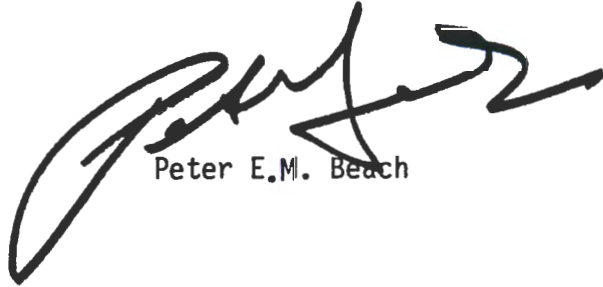
- The Congressional Veterans Caucus formed by Vietnam era veterans who are now Congressmen and women and Senators, has been joined by veterans of previous wars. The list is attached.

At a recent meeting the caucus made the following issues the priorities they wish to save in the budget process now in progress:

- a) Operation Outreach (Psychological Readjustment Centers)
 - b) Agent Orange - continued work of the scientific community.
 - c) DVOP (Disabled Veterans Outreach Programs. funded by Labor under CETA)
 - d) VCIP (Veterans-Cost-of-Instruction Program due to end this summer)
- Front page articles in the Washington Post highlight the attempt to save "Operation Outreach" and also focus on the more than 7,000 women veterans who served in Vietnam and who have been ignored.
 - The White House Interagency Work Group on Agent Orange met March 26th to hear reports from the DOD and VA representatives and the chair of the Scientific Committee, Dr. Jack Moore. The work of the Committee is at a most crucial stage.
 - The White House Veterans Coordinating Committee will go out of existence on March 27th 1981. So far there has been no word as to plans for reconstituting such a Committee

under new leadership from the White House.

- WHCOA - Veterans Conference on Aging was held on March 19th with the attached agenda. Should you be interested please call me relative to your Agency or Regional involvement.

A handwritten signature in black ink, appearing to read 'Peter E.M. Beach', written in a cursive style.

Peter E.M. Beach

Attachments

March 19, 1981

WHITE HOUSE VETERANS
COORDINATING COMMITTEE
(WHVCC)

AGENDA

Veterans Conference on Aging

- Welcome - Dr. Dennis Rhoades
Executive Director, WHVCC
- Follow through on Resolutions - Dr. Dominic Mastrapasqua
Deputy Director
WHVCC
- WHCOA update - Leon Harper
WHCOA Staff
- Veterans role in State Conferences
- HHS involvement -
 - Under Secretary's Office: Dr. Peter E.M. Beach
Director
Office of Veterans Affairs
Co-chair, Under Secretary's
Task Force on Veterans
 - Social Security Administration: Janice Warden
Associate Commissioner
Social Security Administration
 - HCFA: (Health Care Financing Administration) Sidney Robbins
Office of Beneficiary Services
 - Human Development: Administration on Aging (AoA) Ms. Charlotte Frank
Deputy Commissioner on Aging
Dr. J. Skinner
Office of Research Development
and Evaluation (AoA)
- Action Steps
- Other Business Items

THE VETERANS' CONFERENCE ON AGING

Convening Organizations

American Legion
AMVETS
Disabled American Veterans
Veterans of Foreign Wars of the U.S.
Veterans of World War I of the U.S.A.

Staff Office

Veterans Coordinating Committee
The White House
Washington, D.C. 20500
(202) 456-7160

AN OVERVIEW OF THE CONFERENCE

In late November 1981, The (national) White House Conference on Aging will convene in Washington, D.C., to establish a national agenda for serving elderly Americans in the Eighties. Previous such conferences in 1961 and in 1971 have produced numerous programs for older citizens, such as the creation of the Administration on Aging, the "Meals on Wheels" program, and federal grant programs for states and communities. The 1981 event will review such efforts, and propose recommendations to federal, state, and local governments, and to the private sector, for meeting the needs of our senior citizens in this new decade.

The White House Conference on Aging process is a "grass roots" approach. In this manner, both states and population groups -- such as VETERANS -- conduct conferences to identify issues and concerns, and to make recommendations, to serve their constituencies. The input of fifty state conventions and almost as many mini-conferences of population groups are condensed into a national conference agenda, from which recommendations will be promulgated by the over 3,000 delegates and observers in November of this year.

The Veterans' Conference on Aging is one of those population group mini-conferences, and it has been formally recognized as a program of the 1981 White House Conference on Aging. Other such mini-conferences which have been conducted include mini-conferences for Urban Elderly, Hispanic Elderly, Rural Elderly, Black Elderly, etc. Each of these mini-conferences, including this one for veterans, produces a report to the White House Conference on Aging

Our conference will produce a report which will be comprised of resolutions passed by a majority of voting delegates .

The Veterans' Conference on Aging has been divided into three parts: the Federal Briefing on Veterans' Aging, January 15, 1981, at the American Legion building; the Veterans' Symposium on Aging, February 5, 1981, at the Veterans of Foreign Wars building; and the Conference Reception, February 5, 1981, at the Disabled American Veterans Building.

The Federal Briefing on Veterans' Aging is a "primer," a thought-stimulating program where government and congressional officials share their views and programs which impact the aging veteran. It generates the "big picture"

of programs and postures related to aging veterans .

Three weeks later, the Veterans' Symposium on Aging offers a forum for representatives of veterans organizations to formally react to the briefing's content, and to other issues of importance, by passing resolutions which identify concerns and make recommendations to meet the needs of the older veteran in this decade. (SEE RESOLUTION PROCESS PAPER.)

Finally, the Veterans' Conference on Aging Reception will offer an informal atmosphere for veterans, congressional, Administration, aging and federal leadership to share their views and concerns, get better acquainted, and enjoy each other. It will also offer a moment to stop and recognize the service and sacrifice of all veterans, and to renew the pledge to remember that service when veterans reach older age. A brief ceremony honoring the aging veteran will be conducted during the reception.

Shortly after the conference concludes on February 5, its report will be submitted to the White House Conference on Aging. That report will then be distributed by them to state conferences on aging -- over thirty states will hold conferences during March, April and May 1981. Therefore, veterans issues will be among the issues reviewed by state conferences.

Each participating veterans organization should consider involving its state departments in these state conferences (INFORMATION ON STATE CONFERENCES IS ENCLOSED). In this way, you can ensure that states address the needs of aging veterans. You can also possibly have your officers and staff members at the state level be selected by governors as delegates to the national conference in November. In this way, veterans affairs would be included among the topics and recommendations of the national event.

A copy of the "Guidelines of the White House Conference on Aging" is enclosed, which expands on the state and mini-conference processes.

As you know, the Eighties will see a dramatic growth in older veterans, as the veterans of World War II enter their sixties and seventies. Social, economic, medical, and other needs of these veterans will increase tremendously the demand on the Veterans Administration, state veterans homes, employment agencies, and social service agencies, to provide services and benefits to meet their needs. And equally dramatic will be the increase in dependents and widows of veterans, with additional needs and concerns. Is our society prepared to meet the needs of these millions of older Americans? Are veterans organizations preparing to make special efforts on their behalf? What has to be done -- now and the immediate future -- to fulfill the Nation's contract with those who previously defended it? The Veterans' Conference on Aging, and the White House Conference on Aging, offer a serious and important opportunity for veterans organizations to work together and meet this challenge of the Eighties.

VIETNAM VETERANS IN CONGRESS

TOM DASCHLE, CHAIRMAN	439	5x2801	Ryan Kreuger
LEON PANETTA, VICE CHAIR.	431	5x2861	Matthew Cossolotto
LES ASPIN	442	5x3031	Warren Nelson
DON BAILEY	116	5x5631	Becky Halkias
MICHAEL BARNES	1607	5x5341	Keith Haller
DOUG BEREUTER	1314	5x4806	Dan Jura
DAVID BONIOR	1130	5x2106	Tom Martin
ALLEN ERTEL	1211	5x4315	MaryLouise McClintock
MARTIN FROST	1238	5x3605	Bonnie McClellan
ALBERT GORE, JR.	1131	5x4231	Jim Haile
TOM HARKIN	2411	5x3806	Holly Burkhalter
JAMES R. JONES	203	5x2211	Ruthie Smith
JOHN LA FALCE	2447	5x3231	Nancy Artz
JOHN P. MURTHA	2423	5x2065	Bill Allen
TOBY ROTH	215	5x5665	Lana Buck

SENATE

CHRIS DODD	363	4x2823	John Ruffino
H. JOHN HEINZ	443	4x6324	Jason Hall
LARRY PRESSLER	2104	4x5842	J.C. Argetsinger

NEW MEMBERS

HOUSE

HANK BROWN	1319	5x4676	Beth Richards
DAN COATS	1427	5x4436	Karen Hoppe
NORMAN D'AMOURS	2242	5x5456	Mike Radway
HAL DAUB	1008	5x4155	Jeff Jepson
JAMES FLORIO	1471	5x6501	David Hijham
CHARLES DOUGHERTY	422	5x8251	Steve Lodge
DAVE MARTIN	502	5x4611	Donna Bell
PETE MCCLOSKEY	205	5x5411	Annie McLane
JIM SANTINI	2429	5x5969	Nicki Sabbath
DENNY SMITH	1207	5x6245	Beth Bolles
TIM WIRTH	2454	5x2161	Steve Coffin
PAT WILLIAMS	1512		

SENATE

BARRY GOLDWATER	337	4x2235	
DAN QUAYLE	363A	4x5623	Patty Gray

Commander Concerned about Declining Number of Veterans in U.S. Congress

DAV National Commander Stan Pealer said he is concerned about the declining number of wartime veterans being elected to serve in the United States Congress.

"Ten years after the end of World War II," the commander said, "the vast majority of members of Congress were Second World War veterans. Many of them were combat veterans, and a goodly number were combat disabled.

"These veterans were very conscious of the price tag of war. They understood the need to maintain and improve a separate system of veterans' benefits and services. They fully appreciated the sacrifices through which disabled veterans have earned the rights and benefits they and their families enjoy. They simply knew that disabled veterans were not to be treated as welfare recipients."

Today, these veterans, who guarded veterans' programs for more than a quarter of a century, are retiring from Congress in increasing numbers. And the commander said they're not being replaced by Vietnam era veterans in numbers adequate to ensure a solid base of understanding in the Congress of the need for veterans' programs.

However, the commander was encouraged that all of the Vietnam era veterans who served in the 96th Congress and ran for re-election to the 97th Congress won the seats for which they ran.

(A list of Vietnam era veterans who won re-election to the Congress, compiled by the Vietnam Veterans in Congress caucus, is provided below. Though this list may seem substantial, Commander Pealer noted that many of these congressmen and senators served for training purposes only in the Reserves or National Guard and that only a few saw combat in Vietnam.)

In addition to the re-election victories listed below, retired Navy Rear Admiral Jeremiah Denton, who was a POW in North Vietnam for seven years, was elected as a senator from Alabama.

"In stating my concern over the declining number of veterans in Congress," said Commander Pealer, "I don't want to imply that nonveterans cannot be friends of veterans. Many nonveteran politicians have lined up on our side time and time again.

"I do mean to say, however, that we're going to have to work very hard in the future to make sure that our representatives in Congress understand why veterans' programs are needed. We'll have to build an awareness among nonveteran politicians that veterans' benefits were earned through sacrifice for our country.

"DAV chapters and departments, Auxiliary units, and individual members have a crucial role to play in building this understanding."

Vietnam Era Veterans Re-elected to the Senate

Jake Garn (R-Utah) Air National Guard (currently)
John Glenn (D-Ohio) Marine Corps, 1942-65

Barry Goldwater (R-Ariz.)
Army and Air Force Reserve, 1930-67

Vietnam Era House Members Elected to Senate Seats

Christopher J. Dodd (D-Conn.) . . U.S. Army, 1969-75
Dan Quayle (R-Ind.)
Indiana National Guard, 1969-75

Vietnam Era Veterans Re-elected to House Seats

Les Aspin (D-Wis.) U.S. Army, 1966-68
Don Bailey (D-Pa.) U.S. Army, 1967-70
Michael D. Barnes (D-Md.) . . . Marine Corps, 1967-69
Robin L. Beard (R-Tenn.) . . . Marine Corps, 1962-65
Douglas K. Bereuter (R-Neb.) . . U.S. Army, 1963-65
David E. Bonoir (D-Mich.) . . U.S. Air Force, 1968-72
Tom Corcoran (R-Ill.) U.S. Army, 1963-65
Daniel B. Crane (R-Ill.) U.S. Army, 1967-70
Norman E. D'Amours (D-N.H.)
Army Reserve, 1964-67
Thomas A. Daschle (D-S.D.)
U.S. Air Force, 1969-72
H. Joel Deckard (R-Ind.) Indiana National Guard
Charles F. Dougherty (R-Pa.)
Marine Reserve, 1957-59, 1962-79
Allen E. Ertel (D-Pa.) U.S. Navy, 1959-62
Floyd J. Fithian (D-Ind.) Naval Reserve, 1955-71
James J. Florio (D-N.J.) Naval Reserve, 1958-74
Martin Frost (D-Tex.) Army Reserve, 1966-72
Albert Gore, Jr. (D-Tenn.) U.S. Army, 1969-71
Tom Harkin (D-Iowa) U.S. Navy, 1962-67
Jon Clifton Hinson (R-Miss.)
Marine Reserve, 1964-70
Carroll Hubbard, Jr. (D-Ky.)
Kentucky Army and Air National Guard
James R. Jones (D-Okla.) U.S. Army, 1964-65
Kenneth Bentley Kramer (R-Colo.) U.S. Army, 1967-70
John J. LaFalce (D-N.Y.) U.S. Army, 1965-70
Edward J. Markey (D-Mass.)
Army Reserve, 1968-73
Paul N. McClosky, Jr. (R-Calif.)
Marine Reserve, 1960-67
W. Henson Moore (R-La.) U.S. Army, 1965-67
John P. Murtha (D-Pa.) Marine Reserve
Bill Nelson (D-Fla.) U.S. Army, 1968-70
Leon E. Panetta (D-Calif.) U.S. Army, 1965-70
Charles Pashayan, Jr. (R-Calif.) . . U.S. Army, 1968-70
Ronald E. Paul (R-Tex.) U.S. Air Force, 1963-65
William R. Ratchford (D-Conn.)
Connecticut National Guard, 1961-65
Toby Roth (R-Wis.) Air Force Reserve, 1963-69
James Santini (D-Nev.) U.S. Army, 1963-66
Pat Williams (D-Mont.)
Colorado and Montana National Guard, 1962-69
Tomothy E. Wirth (D-Colo.) Army Reserve, 1961-67

VA'S STREET TEAMS - PSYCHOSOCIAL READJUSTMENT.
(SEE ADAMHA-VA MEMO OF AGREEMENT)

OPERATION OUTREACH VET CENTERS

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**LIST OF ALL OUTREACH PROGRAM VET CENTERS
CURRENT AS OF JULY 17, 1980**

<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>	
302	Mr. Donald Reed Vet Center 2145 Highland Avenue Birmingham, Alabama 35205	Parent Facility: Status:	Birmingham, AL Fully Operational
		Telephone: Opened:	(205) 933-0500 3/7/80
603	William Oleson Vet Center 550 West 8th Avenue, Rm. 101 Anchorage, Alaska 99501	Parent Facility: Status:	Anchorage, AK On Site
		Telephone:	(907) 277-1501
616	Francisco Mazo Vet Center 807 N. 3rd Street Phoenix, Arizona 85004	Parent Facility: Status:	Phoenix, AZ Fully Operational
		Telephone: Opened:	(602) 261-4769 6/27/80
307	Luther Johnson, Ph.D. Vet Center 813 West 3rd Street Little Rock, Arkansas 72201	Parent Facility: Status:	Little Rock, AR Fully Operational
		Telephone: Opened:	(501) 378-6395 5/8/80
606	Robert Malone, M.S.W. Vet Center 251 W. 85th Place Los Angeles, California 90003	Parent Facility: Status:	Brentwood, CA Fully Operational
		Telephone: Opened:	(213) 753-1391/2/3 3/29/80
623	Joseph Montelongo Vet Center 2449 W. Beverly Blvd. Montebello, California 90640	Parent Facility: Opening: Time: Telephone: Telephone: Congressional Liaison	Brentwood, CA 7/25/80 1:00 p.m. (213) 728-9984/9999 (213) 728-9966/7 Notified
612	Elaine Alvarez Vet Center 616 16th Street Oakland, California 94612	Parent Facility: Status:	Martinez, CA Fully Operational
		Telephone: Opened:	(415) 763-3904 5/24/80
624	Vet Center Orange County, California	Parent Facility: Status:	Long Beach, CA Orange County
618	William Mahedy Vet Center 1520 State Street, Suite 110 San Diego, California 92101	Parent Facility: Status: Telephone: Opened:	San Diego, CA Fully Operational (714) 235-9731/2/3 2/26/80

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<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>
619	Jack McClosky Vet Center 1708 Waller Street San Francisco, California 94117	Parent Facility: San Francisco, CA Status: Fully Operational Telephone: (415) 386-6726/7/8 Opened: 6/16/80
620	Joaquin Gallardo Vet Center 2989 Mission Street San Francisco, California 94110	Parent Facility: San Francisco, CA Status: Fully Operational Telephone: (415) 824-5111/2 Opened: 6/16/80
614	Thomas Alvarado Vet Center 1648(A) E. Santa Clara San Jose, California 95116	Parent Facility: Palo Alto, CA Status: Fully Operational Telephone: (408) 258-5600 Opened: 1/17/80
615	James Barker Vet Center 361 S. Monroe Street, Suite 5 San Jose, California 95128	Parent Facility: Palo Alto, CA Status: Fully Operational Telephone: (408) 249-1643 Opened: 1/17/80
605	Frederick Hoskins Vet Center 7222 Van Nuys Blvd., Suite E Van Nuys, California 91406	Parent Facility: Brentwood, CA Status: Fully Operational Telephone: (213) 988-6904/5 Telephone: FTS 608-2000 Opened: 1/26/80
607	Jaroslav Melnyk Vet Center 1406 Pacific Avenue Venice, California 90291	Parent Facility: Brentwood, CA Status: Fully Operational Telephone: (213) 392-4124/5/6 Opened: 5/28/80
504	Thomas Scarano, Ph.D. Vet Center Silver State Savings Bldg. 1500 Grant Street, Rm. 303 Denver, Colorado 80203	Parent Facility: Denver, CO Status: Fully Operational Telephone: (303) 861-9281/7521 Telephone: FTS 322-3265 Opened: 2/21/80
117	Joe E. McDonald Vet Center 82-90 Asylum Street Hartford, Connecticut 06103	Parent Facility: West Haven, CT Status: On Site Telephone: (203) 624-7234/0355 Telephone: (203) 278-1290
116	Mike B. Moskowitz Vet Center 363 Whalley Avenue New Haven, Connecticut 06510	Parent Facility: West Haven, CT Status: Fully Operational Telephone: (203) 624-7234/0355 Opened: 2/22/80

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<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>
215	Mark Kaufki, Ed.D. Vet Center Van Buren Medical Center 1411 N. Van Buren Street Wilmington, Delaware 19806	Parent Facility: Wilmington, DE Status: Fully Operational Telephone: (302) 571-8277 Telephone: FTS 487-5360 Opened: 6/25/80
213	Adrian Fleming, M.S.W. Vet Center 1101 Pennsylvania Ave., S.E. Washington, D.C. 20003	Parent Facility: Washington, D.C. Status: Fully Operational Telephone: (202) 543-4701/2/ Opened: 4/25/80
214	Walter Hundley, M.S.W. Vet Center 402 H Street, N.E. Washington, D.C. 20002	Parent Facility: Washington, D.C. Status: Fully Operational Telephone: (202) 543-5225/15/ Opened: 4/25/80
311	Arnold Feiner, Ph.D. Vet Center 423 N. Andrews Avenue Ft. Lauderdale, Florida 33301	Parent Facility: Miami, FL Status: Fully Operational Telephone: (305) 523-8392 Opened: 4/14/80
305	Neal Butler, R.N. Vet Center 228 Pearl Street Jacksonville, Florida 32202	Parent Facility: Gainesville, FL Status: Fully Operational Telephone: (904) 358-1233 Opened: 3/31/80
310	William Weitz, Ph.D. Vet Center 2615 Biscayne Blvd. Miami, Florida 33137	Parent Facility: Miami, FL Status: Fully Operational Telephone: (305) 573-8830 Telephone: (305) 573-8833 Opened: 3/1/80
301	Dr. Joseph Gelsomino Vet Center 250 31st Street, South St. Petersburg, Florida 33712	Parent Facility: Bay Pines, FL Status: Fully Operational Telephone: (813) 821-3355 Opened: 3/24/80
304	David J. Lewis Vet Center 43 14th Street, N.E. Atlanta, Georgia 30309	Parent Facility: Decatur, GA Status: Fully Operational Telephone: (404) 872-4614 Opened: 1/23/80
609	Stephen Molnar Vet Center 1291 Kapiolani Blvd. Honolulu, Hawaii 96814	Parent Facility: Honolulu, HI. Status: Fully Operational Telephone: FTS 556-0220 Ask For: 808/546-3743 Opened: 5/29/80

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<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>	
604	John Mackay, M.S.W. Vet Center 103 W. State Street Boise, Idaho 83702	Parent Facility: Status: Telephone: Telephone: Opened: 2/28/80	Boise, ID Fully Operational (208) 342-3612 554-7385
410	Earl Brown Vet Center 5242 W. Chicago Avenue Chicago, Illinois 60651	Parent Facility: Status: Telephone: Opened: 1/14/80	Hines, IL Fully Operational (312) 626-1882/3/4
411	David Bingaman Vet Center 1100 W. Garfield Avenue Oak Park, Illinois 60304	Parent Facility: Status: Telephone: Opened: 3/3/80	Hines, IL Fully Operational (312) 383-3225
409	John Crowley Vet Center 528 W. Berry Street Fort Wayne, Indiana 46802	Parent Facility: Status: Telephone: Opened: 5/13/80	Fort Wayne, IN Fully Operational (219) 423-9456
413	Daniel E. Lonquist, Ph.D. Vet Center 811 Massachusetts Avenue Indianapolis, Indiana 46204	Parent Facility: Status: Telephone: Opened: 7/17/80	Indianapolis, IN Fully Operational FTS 331-2838
505	Robert Franklin Vet Center 2001 Cottage Grove Avenue Des Moines, Iowa 50312	Parent Facility: Status: Telephone: Telephone: Opened: 1/12/80	Des Moines, IA Fully Operational (515) 282-4476 FTS: 862-5279
517	John K. Bateman, Ph.D. Vet Center 310 S. Laura Street Wichita, Kansas 67211	Parent Facility: Status: Telephone: Telephone: Opened: 2/22/80	Wichita, KS Fully Operational (316) 752-4980 FTS 752-6311
308	George Bentley, M.S.W. Vet Center 821 S. 2nd Street Louisville, Kentucky 40203	Parent Facility: Opening: Time: Telephone: Congressional Liaison	Louisville, KY 8/ 8/80 1:00 p.m. (502) 589-1981 Notified
312	Harold Doughty, M.S.W. Vet Center 1529-31 N. Claiborne New Orleans, Louisiana 70116	Parent Facility: Status: Telephone: Opened: 4/16/80	New Orleans, LA Fully Operational (504) 943-8386

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115	Joseph P. Franciose Vet Center 175 Lancaster Street, Rm. 213 Portland, Maine 04101	Parent Facility: Togus, ME Status: Fully Operational Telephone: (207) 780-3584 Opened: 2/8/80
201	Mr. William Strouse, Jr. Vet Center 1420 W. Patapsco Avenue Patapsco Plaza Shopping Ctr. Baltimore, Maryland 21230	Parent Facility: Baltimore, MD Status: Fully Operational Telephone: (301) 355-8592 Opened: 3/13/80
202	Mr. Clarence Davis Vet Center 1400 E. Federal St. Room 215 Baltimore, Maryland 21213	Parent Facility: Baltimore, MD Status: Fully Operational Telephone: (301) 752-1847 Opened: 3/13/80
209	Thomas Murtaugh, Ph.D. Vet Center 7 Elkton Commercial Plaza Elkton, Maryland 21921	Parent Facility: Perry Point, MD Status: Fully Operational Telephone: (301) 398-0171 Opened: 2/22/80
102	Jimmie Jackson, B.A. Vet Center 480 Tremont Street Boston, Massachusetts 02116	Parent Facility: Boston, MA Status: Fully Operational Telephone: (617) 451-0171/2/ Opened: 2/13/80
101	Ronald Lembo Vet Center 362 Washington Street Brighton, Massachusetts 02135	Parent Facility: Boston, MA Status: On Site Telephone: (617) 783-1344/134
104	Robert F. Gillis Vet Center 15 Bolton Place Brockton, Massachusetts 02401	Parent Facility: Brockton, MA Status: Fully Operational Telephone: (617) 580-2730 Opened: 3/28/80
401	John Caknipe, Ph.D. Vet Center 5514 Woodward Avenue Detroit, Michigan 48202	Parent Facility: Allen Park, MI Status: Fully Operational Telephone: FTS 378-8798 Opened: 5/9/80
402	Donald Tate, Ph.D. Vet Center 18411 W. Seven Mile Road Detroit, Michigan 48219	Parent Facility: Allen Park, MI Status: Fully Operational Telephone: FTS 378-8791 Opened: 5/9/80

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CURRENT AS OF JULY 17, 1980**

<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>
204	Dexter Westbrook Vet Center 601 Broad Street Newark, New Jersey 07102	Parent Facility: East Orange, NJ Status: Fully Operations Telephone: (201) 622-6940 Opened: 6/13/80
601	Mr. Louis R. Rocco Vet Center 4603 4th Street, N.W. Albuquerque, New Mexico 87107	Parent Facility: Albuquerque, NM Status: Fully Operations Telephone: (505) 345-8366/8 Telephone: FTS 572-9541 Opened: 1/11/80
110	Walter Sampson Vet Center Bronx, New York	Parent Facility: Montrose, NY Status: Searching Telephone: FTS 882-9419 Telephone: (212) 873-2870
105	Jim Duffy Vet Center 165 Cadman Plaza, East American Red Cross Bldg. Brooklyn, New York 11201	Parent Facility: Montrose, NY Status: Site Leased Telephone: (212) 330-9213 Telephone: FTS 882-9419
107	Dave Kowalewski Vet Center 114 Elmwood Avenue Buffalo, New York 14201	Parent Facility: Buffalo, NY Status: Fully Operations Telephone: (716) 882-0505 Opened: 2/7/80
106	Warren Nagel Vet Center 695 Park Ave., Box 472 Manhattan, New York 10021	Parent Facility: Montrose, NY Opening: 8/12/80 Time: 11:30 am-1:00 pm Telephone: (212) 570-5575 Telephone: (212) 570-5443 Congressional Liaison Notified
109	Nick Pascucci Vet Center 148-43 Hillside Avenue Queens, New York 11428	Parent Facility: Montrose, NY Status: On Site Telephone: (212) 263-2508 Telephone: (212) 544-1244
206	Michael M. Lydon Vet Center #4 Market Square Fayetteville, North Carolina	Parent Facility: Fayetteville, NC Status: Fully Operational 28301 Telephone: (919) 323-4908 Opened: 5/2/80
506	James McLean Vet Center 1300 S. 13 1/2 Street Fargo, North Dakota 58103	Parent Facility: Fargo, ND Status: Fully Operational Telephone: (701) 237-0942 Telephone: FTS 783-3328/3329 Opened: 3/26/80

LIST OF ALL OUTREACH PROGRAM VET CENTERS
CURRENT AS OF JULY 17, 1980

<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>
404	Robert J. Kean Vet Center 31 E. 12th Street, 4th Floor Cincinnati, Ohio 45202	Parent Facility: Cincinnati, OH Status: Fully Operational Telephone: 513/241-9420 Opened: 5/7/80
406	Terrence Washen Vet Center 11511 Lorain Avenue Cleveland, Ohio 44111	Parent Facility: Cleveland, OH Status: Fully Operational Telephone: (216) 671-8530/1/2 Opened: 5/23/80
408	John Sterba Vet Center 4959 N. High Street Columbus, Ohio 43214	Parent Facility: Columbus, OH Status: Fully Operational Telephone: FTS 943-6753 Opened: 6/20/80
416	Darrell J. Carter Vet Center 438 Wayne Avenue Dayton, Ohio 45410	Parent Facility: Dayton, OH Status: Fully Operational Telephone: (513) 461-9150 Telephone: FTS 774-2121/2313 Opened: 5/9/80
405	Robert Spencer Vet Center 14206 Euclid Avenue East Cleveland, Ohio 44112	Parent Facility: Cleveland, OH Status: Fully Operational Telephone: (216) 451-3200 Opened: 5/23/80
512	Peter Sharp Vet Center 4111 North Lincoln Blvd., #10 Oklahoma City, Oklahoma 73105	Parent Facility: Oklahoma City, OK Status: Fully Operational Telephone: FTS 736-4011 Telephone: (405) 521-9308 Opened: 4/2/80
617	Anthony Traweek, Ph.D. Vet Center 2450 S.E. Belmont Portland, Oregon 97214	Parent Facility: Portland, OR Status: Fully Operational Telephone: (503) 231-1586 Telephone: (503) 429-6110 Opened: 2/15/80
210	Martin Frick, M.S.W. Vet Center 1107 Arch Street Philadelphia, Pennsylvania 19107	Parent Facility: Philadelphia, PA Status: Fully Operational Telephone: (215) 627-0238 Telephone: FTS 597-0544 Opened: 2/7/80
211	Wayne Hartman, Ph.D. Vet Center 954 Penn Avenue Pittsburgh, Pennsylvania 15222	Parent Facility: Pittsburgh, PA Status: Fully Operational Telephone: (412) 765-1193 Opened: 4/1/80

**LIST OF ALL OUTREACH PROGRAM VET CENTERS
CURRENT AS OF JULY 17, 1980**

<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>	
114	Edwin Riviera Vet Center EPO Box 4867 San Juan, Puerto Rico 00936	Parent Facility: Status: Telephone:	San Juan, PR. Negotiating Lease (809) 765-4545, X:
113	James D. Lange, Ph.D. Vet Center 172 Pine Street Pawtucket, Rhode Island 02860	Parent Facility: Status: Telephone: Opened: 5/16/80	Providence, RI Fully Operational (401) 728-9501
516	Stanley Christopherson Vet Center 230 N. Phillips Avenue Sioux Falls, SD 57102	Parent Facility: Status: Telephone: Telephone: Opened: 2/1/80	Sioux Falls, SD Fully Operational FTS 782-4552 (316) 265-3260
303	C. J. Harris, M.A. Vet Center 3366 Rivers Avenue No. Charleston, South Carolina 29405	Parent Facility: Status: Telephone: Telephone: Opened: 5/30/80	Charleston, SC Fully Operational (803) 747-8387 FTS 677-7377
309	Edward Wallin Vet Center Sterick Building 8 North 3rd Street Memphis, Tennessee 38103	Parent Facility: Status: Telephone: Opened: 5/1/80	Memphis, TN Fully Operational (901) 521-3506
502	Peter B. Gregory Vet Center 500-A Lancaster-Kiest Center Dallas, Texas 75216	Parent Facility: Status: Telephone: Telephone: Opened: 3/11/80	Dallas, TX Fully Operational (214) 371-0490 FTS 729-0027
608	Gustavo R. Martinez Vet Center 2121 Wyoming Street El Paso, Texas 79903	Parent Facility: Status: Telephone: Opened: 2/29/80	El Paso, TX Fully Operational (915) 542-2851/2/3
507	Vastine Hightower Vet Center 3121 San Jacinto Street Suite 106 Houston, Texas 77004	Parent Facility: Status: Telephone: Opened: 2/12/80	Houston, TX Fully Operational (713) 522-5354 (713) 522-5376

**LIST OF ALL OUTREACH PROGRAM VET CENTERS
CURRENT AS OF JULY 17, 1980**

<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>	
518	Gregorio Pinu, III, Ph.D. Vet Center 717 Corpus Christi Laredo, Texas 78040	Parent Facility: Status: Telephone: Telephone: Opened: 4/22/80	San Antonio, TX Fully Operational (512) 723-4680 FTS 734-3011
515	Jack Gold, Ph.D. Vet Center 107 Lexington Ave. San Antonio, Texas 78205	Parent Facility: Status: Telephone: Telephone: Opened: 4/2/80	San Antonio, TX Fully Operational FTS 730-4025 (512) 229-4025
514	Lester Nielson, Ph.D. Vet Center 216 E. 5th Street, South Salt Lake City, Utah 84102	Parent Facility: Status: Telephone: Telephone: Opened: 2/6/80	Salt Lake City, UT Fully Operational (801) 584-1294 FTS 585-5500
118	Walter Ruthford, M.S.W. Vet Center RFD#2, Tafts Corners Williston, Vermont 05495	Parent Facility: Status: Telephone: Telephone: Opened: 1/3/80	White Rv. Junc., VT Fully Operational (802) 878-3371 FTS 951-1011
119	Alphonso Donastorg Vet Center P.O. Box 532 St. Thomas, Virgin Islands 00801	Parent Facility: Status:	San Juan, PR Virgin Islands
207	Dennis Patterson, M.S.W. Vet Center 7450 1/2 Tidewater Drive Norfolk, Virginia 23505	Parent Facility: Status: Telephone: Opened: 5/16/80	Hampton, VA Fully Operational (804) 583-5258
621	Emmett M. Early, Ph.D. Vet Center 1322 E. Pike Street Seattle, Washington 98122	Parent Facility Status: Telephone: Telephone: Opened: 3/7/80	Seattle, WA Fully Operational FTS 399-2706/7/8 (206) 442-2706
622	Donald Taylor, Ph.D. Vet Center 3591 South D Street Tacoma, Washington 98408	Parent Facility: Status: Telephone: Opened: 12/20/80	Tacoma, WA Fully Operational (206) 473-0731/2
208	Steven L. Giles, Ph.D. Vet Center 1014 6th Avenue Huntington, West Virginia 25701	Parent Facility: Status: Telephone: Opened: 5/23/80	Huntington, WV Fully Operational (304) 523-8387

**LIST OF ALL OUTREACH PROGRAM VET CENTERS
CURRENT AS OF JULY 17, 1980**

<u>CENTER NUMBER</u>	<u>TEAM LEADER & ADDRESS</u>	<u>STATUS & PHONE NUMBER</u>	
415	McDermott Walton Vet Center 1610 N. Water Street Milwaukee, Wisconsin 53202	Parent Facility: Status: Telephone:	Wood, WI Fully Operational (414) 271-6557/38
		Opened: 2/16/80	
501	James Dunton, M.S.W. Vet Center 1810 Pioneer Street Cheyenne, Wyoming 82001	Parent Facility: Status: Telephone: Telephone: Opened: 1/30/80	Cheyenne, WY Fully Operational (307) 778-2660 FTS 328-1110



THE VIETNAM VETERANS ADVISER

Besides the obvious, highly visible national problems that President Reagan has inherited from Jimmy Carter, those involving Vietnam veterans also deserve our new president's concern and attention. The need to do something about veterans' problems is not based simply on a notion of fairness or of making good on previously broken promises. Rather, it is necessary to our nation's self-interest.

There is an obvious linkage between veterans' problems and those of society at large. Consider, for example, the plight of Vietnam veterans who may have been exposed to the deadly effects of Agent Orange. The Reagan administration's response to these men will reveal the extent of its commitment to the protection of American citizens and the environment and perhaps indicate how President Reagan plans to regulate the actions and products of the chemical industry.

Similarly, the difficulties that continually beset Vietnam veterans in finding jobs, acquiring educational and vocational training, and overcoming physical and psychological disabilities are examples of what many conservatives consider the futility of government intervention in these areas. In fact, many people contend that government is part of the Vietnam veterans' problem rather than a help in its solution. But this really misses the point. Government has a definite role to play in these matters. But its

scope, direction, and level of effort must not be based on simpleminded, paternalistic considerations and the bureaucratic impulse to perpetuate federal programs for their own sake.

For example, the contrast between the GI Bill of World War II and that provided for Vietnam veterans is stark. The Vietnam veterans' program was underfunded and overregulated, and it met neither the educational and training needs of the veterans nor those of the nation. As a consequence, too many Vietnam veterans are out of work or are underemployed. This has led to the disastrous decline in the nation's productivity and to the double-digit inflation that has imposed a cruel tax on all Americans.

For years presidents, from Johnson through Carter, have mishandled and mismanaged Vietnam veteran issues. Instead of attacking these men's problems as a first step in solving some of our national problems, these presidents exacerbated the situation by creating new difficulties, which had no justi-

fiable cause. To be sure, none of these presidents can be blamed for the stereotyped view of Vietnam veterans that persisted in the sixties and seventies, but none of them did anything significant to counter the public's misperception. We are not talking here about the lack of "victory parades" for Vietnam veterans. Much more important is the presidential and congressional cold shoulder that veterans received upon returning home. Today, thankfully, the Vietnam War is no longer blamed on the men who were made to fight it. That responsibility has not been finally assessed, but it is no longer on the Vietnam veteran's back. Because the public has finally been educated to this fact, we hope that President Reagan will be able to tap and exploit the potential of Vietnam veterans in helping to solve our nation's difficulties.

What we are suggesting here is a changed approach to Vietnam veteran issues. It is necessary for President Reagan to look on those issues as opportunities to be pursued rather than as nettlesome political problems to be avoided. To adopt this approach requires the appointment of a Veterans Administration administrator who accepts as his first premise the idea that Vietnam veterans are a national resource.

For far too long, the appointment of the VA Administrator has been almost a presidential afterthought or a consolation prize to a campaign loyalist

failed politician. This practice must change. This is not to say that the new VA administrator must necessarily be a Vietnam veteran. But he should be the best-qualified individual, selected, of course, without regard to race, creed, or political affiliation. To do otherwise is to guarantee that veteran problems will continue to bedevil the Reagan administration as they have those of previous presidents.

A good leader at the VA can make a difference, and because the problems facing veterans are solvable, it makes no sense for President Reagan to add to his other considerable difficulties by placing a political hack in charge of the VA. Our advice to President Reagan is simple: give the Veterans Administration to someone who can run it competently; give him significant help with the new, conservative Congress; and, perhaps most important, give him adequate access to the Oval Office. If this is done, the legitimate needs of all veterans can be met and the nation will be better off for it.—William Corson O-

Government has a definite role to play in solving the difficulties of Vietnam veterans, but it must not be based on simpleminded, paternalistic considerations and the bureaucratic impulse to perpetuate programs for their own sake.

The Washington Post

Washington Post Co.

TUESDAY, MARCH 24, 1981

Vietnam Aftershocks

8-Year Study Finds Combat Vets Suffer More From Alcohol, Drug Abuse

By Thomas O'Toole
Washington Post Staff Writer

Veterans who bore the brunt of the battle in Vietnam abused alcohol and drugs more often in later civilian life and were arrested more often than their counterparts who were not in combat or who did not serve in Vietnam.

Those are the main conclusions of an eight-year study done for the Veterans Administration by the Center for Policy Research in New York, which followed and questioned 1,340 Vietnam veterans — 842 whites, 415 blacks and 83 Hispanics — in eight U.S. cities and two rural communities in the South and the Midwest.

The study found that whites who

experienced heavy combat had a higher arrest rate when they returned to civilian life than did blacks or Hispanics who were in heavy combat, mostly because of more drunk-driving arrests. The whites in the study also abused alcohol far more than the blacks and Hispanics did.

On the other hand, the blacks and Hispanics had a higher drug-abuse rate and were arrested more often than whites for possession and sale of dangerous drugs. The study said that black and Hispanic veterans tended to abuse a broad array of drugs, including marijuana, hashish, heroin, amphetamines, LSD and cocaine.

In its \$2 million study for the VA, the research center broke down its

sample into those who had experienced heavy combat, those who had served in Vietnam but did not see combat, and those who served in the armed services outside Vietnam. Of the total, 48 percent were classified in the first group, meaning they had been in firefights, been ambushed or were under steady sniper and patrol fire.

The study found that those in heavy combat were far more likely to suffer long-term stress than those who were not. Blacks in heavy combat suffered more long-term stress than did whites, it said, in part because they abused drugs more frequently and in part because they had fewer stable relationships.

See VIETNAM, A14, Col. 4

Aftershocks of Vietnam: Alcohol, Drug Abuse Found

VIETNAM, From A1
marriages and close friendships to support them.

A spokesman for the center identified long-term stress as suffering from dizziness, anxiety, tension, headaches, stomach trouble, loss of memory, depression, repeated nightmares and loss of control and interest.

The most striking figures were the arrest rates for those returning to civilian life after experiencing heavy combat. Twenty-four percent were arrested at least once, most for drunken driving or drug possession. Most of those arrested came from the large cities surveyed — New York, Chicago and Los Angeles. The other cities studied were Bridgeport, Conn.; South Bend, Ind.; Columbus, Ga., and Atlanta, as well as heavily populated regions of southern Westchester County, N.Y., and the rural areas around South Bend and Columbus.

effect on the drinking behavior of returning veterans. The study said that combat veterans tended to drink more with each point they had on a "Combat Scale" of 1 to 13. The sliding scale was based on the number of firefights a veteran had been in, how often he had been ambushed, how many combat patrols he had been on, and how exposed he had been to fire during combat.

The study found that the Vietnam war had a profound effect on most of the combat veterans. Many felt alienated when they returned to this country and found it hard to return to pre-war careers or to resume their education. Said the study: "Only one-quarter of Vietnam veterans believe the war had little or no effect on them. These men tend to have had little direct exposure to death and to have had remote relationships to the



LYNDA VAN DEVANTER
"For women, it's been worse"

Forgotten Women

Effects of War on Female Vietnam Veterans Are Only Now Emerging

By Pete Earley
Washington Post Staff Writer

Kathy Gunson could not talk about Vietnam, not for years. The former Army nurse from Eugene, Ore., felt guilty, tainted, frightened, alone. Flashbacks and nightmares of the war haunted her. One morning, she grabbed a pencil.

"I desperately want my childhood back with its innocence and ignorance," she scribbled. "I want to go back to Vietnam and make it different. I want to come home to a marching band and a red carpet. I want to hear a 'Thank you.' I want to hear 'I'm sorry.' Most of all, I want to feel at peace with myself."

She finished writing, and cried.

It has been six years since Saigon fell, but the effects of the war on the 7,484 women stationed in Vietnam,

6,250 as nurses, are only now beginning to surface. Volumes have been written about the problems of the 2.8 million male Vietnam veterans, but no comprehensive study of female veterans has ever been done. Even the eight-year Veterans Administration-sponsored study of the war's multiple impacts on 1,340 veterans released Monday failed to include a single woman.

"Women were forgotten," says Shad Meshad, a former Army psychologist in Vietnam and pioneer in Vietnam veterans' storefront counseling centers. "We are only now beginning to see the war through their eyes."

Most researchers have assumed that since women and men lived through the same war, their reactions to it have been the same. But Meshad and female vets

See WOMEN VETS, A13, Col. 1

WOMEN VETS, From A1

the woman's role was unique in Vietnam and still is an unexplored one today.

Although they weren't on the front lines, women saw the worst of the war. An endless procession of mangled bodies lies across the operating table. They lived in the swirl of wartime emergencies that often ended abruptly and painfully. They returned home to not only a hostile nation, but to frequent questions about why a decent man would want to be stationed in any way around the world with so many men. And once home, women often had to have blamed themselves for problems that male Vietnam veterans suffered on the war.

"Women had to be warm fuzzies," complains Meshad, who has counseled more than 200 female Vietnam veterans. "They had to be a wounded soldier's mother, wife, and girlfriend. They saw these beautiful young boys, 18- and 19-year-old kids, coming in every day with sucking chest wounds and ripped off flesh and they had to hold their hands and tell them everything was okay."

Their anger and frustration built up. Unlike the soldiers they treated, nurses could not shoot back.

"Nurses were officers," Meshad says. They were not supposed to date enlisted men. But most male officers were older and married. I don't know how many times a doctor would come in and tell me he couldn't bear to say goodbye to Jeanie, who was maybe 22 or 23 and deeply in love. They'd ask me to do it for them." Because women "are brought up to nurture and protect others," says Meshad, "many of the nurses felt like failures because, no matter what they did, the GIs kept dying."

"Every Vietnam vet was told he was a fool, a real sucker, for going overseas, but for women, it's been even worse," explains Lynda Van Devanter, 33-year-old former Army nurse in Vietnam who last year headed a task force studying women veterans for the VA. "People figure you were either a joker or a lesbian if you were a woman in the Army in Vietnam. Why would a woman want to be with 10,000 men unless she was servicing them?"

Van Devanter's task force learned that few women take advantage of GI benefits, most VA hospitals do not have obstetric/gynecologic services and that no studies have been done to discover how the Agent Orange defoliant has affected women soldiers.

sists that women veterans have not been ignored. VA hospitals may not have facilities for women, he says, but the VA will send women to private clinics and pay the tab.

"Only 23 percent of veterans are women," Morrison says. "They are entitled to the same benefits as the men, but it would be discriminatory to create programs just for them."

But Van Devanter, now head of the women's program of the Vietnam Veterans of America, says many women simply do not realize their problems might be war related, in part because the VA has failed to reach out to women.

"I'd cry for days, once for six months," she remembers. "I'd wake up crying and spend the entire day in tears."

"I kept losing jobs. I went on unemployment, food stamps and welfare. I couldn't sleep. I kept having the same nightmare over and over again so I'd stay awake drinking, afraid to go to bed."

Without knowing it, Van Devanter was suffering delayed shock syndrome — a delayed reaction to a stress common in male Vietnam vets. Van Devanter would feel guilty and have constant headaches. She'd explode at her husband and friends for no reason. She could not concentrate or remember what people had said. She wanted to be alone, yet she was lonely and afraid.

She went to a therapist, but never told him about Vietnam — or her recurring nightmare.

"We talked about marital problems and other pressures, but I kept telling myself that Vietnam was five, six, seven years ago," she says. "I was afraid my therapist would think I was crazy if I told him about Vietnam."

"I was ashamed of Vietnam," she says.

Van Devanter learned about delayed stress only after meeting Meshad by chance. He forced her to "walk through Vietnam day by day." The story she told him was similar to the stories he had heard from dozens of other women Vietnam veterans suffering from memories of the war.

"It is 3 a.m. in Pleiku, South Vietnam," says Van Devanter as she recalls the nightmare she told Meshad. It's been 10 years, but her hands still tremble.

"I had been sleeping under my cot because I was afraid of the rocket attack outside. It is only a few days until my hump point, when I will pass the half-way point of my tour.

flare he was handling exploded. A perfect set of straight, even, white teeth is swinging from a jaw that dangles loose.

"The anesthetist yells at me and the wall goes up. I become a robot, doing my job."

For eight hours, the medical team labors over the young soldier, pumping 120 units of blood through needles in his leg, neck and both arms.

"I always believed that you could stop bleeding. The lesson I learned that night was that we have developed the ability to destroy something beyond repair."

While changing a blood bag, Van Devanter kicked the soldier's clothes which were on the floor. A photograph fell out.

"It's a picture of him and a girl. He is gazing sweetly at her. Straight, blond and tall, he looks proud in his tuxedo. She, too, is tall with shining dark hair and a pastel gown. Suddenly, he is real again and the wall falls down. I gaze at the mass of blood vessels and burned skin in front of me and I feel sick."

Again, someone yells at her, and she becomes a robot. Finally, the team gives up.

"We wrap his face with layers of pressure dressings and send him to

post-op intensive-care to die. Her eyes fill with tears. I'm telling myself that a miracle will happen. He could stop bleeding, be all right. Picking up the linens and putting them in the hamper, I see the photograph and stare at it.

"This boy was real. He was a son who could love and think, plan and dream and now he is dead, there is nothing left."

"I must see him again. I touch his hand. Already the blood is seeping through the bandages. I ask him if he is in pain. He squeezes my hand. I ask him if he wants pain medicine. He squeezes again. I call a nurse to tell her to give him some. I know it will cause him to go faster."

What I want to do, for him to go home. I stand with him, 20 minutes. I want to say something to tell him it is okay that he will die and that I care.

"He stops breathing. He's dead. I am crying. I want my mother. I want to go home and see everything that is around me. I want death, the destruction that I am part of, but they are calling me to bring more wounded are coming in. I must put the wall up again. The wall."



May 28, 1981



Dear Concerned Veterans:

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 eliminations, 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 set out budget authority for fiscal year 1982 of \$24.2 billion. This was an increase of \$1.3 billion over the 22.9 billion budget authorization for current year 1981. In addition, \$597 million was added by the Reagan Bi-partisan Budget Resolution which 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 services.

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.

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.

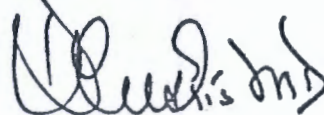
The Congress has authorized the President's spending levels but must now pass legislation specifically extending the life of the Outreach Centers. This has the overwhelming support of both parties in both the House and Senate. The President wants you to know that he is specifically committed to keeping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

A handwritten signature in black ink, appearing to read "Donald L. Custis". The signature is written in a cursive style with a large, stylized initial "D".

Donald L. Custis
Acting Administrator



Veterans
Administration

News Release

FOR IMMEDIATE RELEASE

The popular Vet Center counseling service for Vietnam Era veterans will be expanded by 50 percent, Veterans Administration chief Robert P. Nimmo announced today.

Nimmo, who took the oath of office July 15 as Administrator of Veterans Affairs, said 42 new counseling facilities will be added to the program under terms of the Reagan Bipartisan Budget Resolution.

The 42 new facilities will bring to 133 the number of "storefront" counseling facilities available to Vietnam Era veterans who may be suffering readjustment problems following military service during the Vietnam War.

As he had during his confirmation hearings before the Senate Veterans Affairs Committee July 9, Nimmo stressed the fact that "while the vast majority of our Vietnam veterans have successfully returned to our working society, a substantial number still suffer various degrees of readjustment difficulty."

It is those veterans, he said, "whom we will continue to reach out to through this expanded Vet Center program."

Nimmo said the centers typically have staffs of three to five persons who operate on an informal, person-to-person basis with Vietnam Era veterans experiencing emotional and other readjustment problems.

"We hope to have all of the new centers in operation within three to four months," Nimmo said. Some are almost ready to begin operations and others will be opened as suitable space can be arranged and personnel recruited.

Since the Vet Center program began operation early in 1980, approximately 72,000 Vietnam Era veterans have been counseled. Nimmo said VA officials believe the new centers will be much more efficient than the original ones because contacting and counseling efficiency have been improved.

The expectation, he said, is that the new center teams will be able to provide assistance to approximately 12,000 Vietnam Era veterans in their first year of operation.

The Vet Center program has a budget of \$29,580,000 for fiscal year 1982.

New facilities to be opened in the Northeast are: Nassau/Suffolk County, Albany, and Westchester County, N.Y.; Springfield, Mass.; Windsor, Vt.; Bangor, Me.; Trenton, N.J.; Philadelphia, Pittsburgh, and Harrisburg, Pa.

In the Southeast will be: Orlando, and Tampa, Fla.; Charlotte, N.C.; Greenville, S.C.; Atlanta, Ga.; Mobile, Ala.; Knoxville, Tenn.; Lexington, Ky.; Richmond, Va.; and Morgantown, W. Va.

New Vet Centers in the Central states will be located at Chicago Heights, and Peoria, Ill.; Evansville, Ind.; Sioux City, Ia.; Tulsa, Okla.; Lincoln, Neb.; Grand Rapids, Mich.; Minot, N.D.; Rapid City, S.D.; and Madison, Wisc.

In the West will be: Contra Costa County, Fresno, and Riverside, Calif.; Eugene, Ore.; Spokane, Wash.; Fort Worth, and San Antonio, Tex.; Colorado Springs, Colo.; Window Rock, N.M.; and Fairbanks, Alaska.

These are in addition to facilities in Reno, Nev., and Tucson, Ariz., which opened recently.

#

July 16, 1981

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20201

March 18, 1981

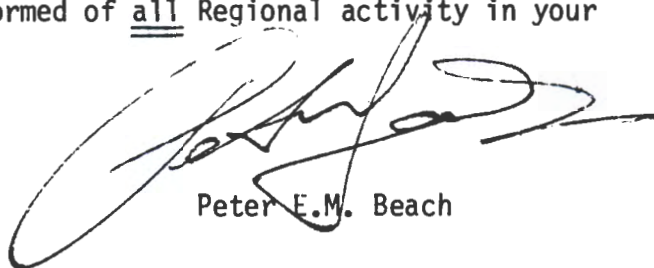
To: All Veterans Coordinators

From: Co-chair, Under Secretary's Task Force on Veterans
Director, Office of Veterans Affairs

Subject: Current Events

- The Washington Post, Stars and Stripes and American Legion articles show the extreme concern over proposed cuts in veterans programs, especially psychological readjustment, counseling and Operation Outreach.
- More than 50 Congressional Caucus of Vietnam era Veterans (Senators and Congressmen) may make the following their priorities to save or restore.
 - a) Operation Outreach
 - b) Agent Orange
 - c) DVOP (Disabled Veterans Outreach Programs) funded by Labor under CETA.
 - d) VCIP (Veterans-Cost-of-Instruction Program) due to end this summer.
- Leslie Platt Esq. Deputy General Counsel and acting chair, White House Interagency Work Group on Dioxins (Agent Orange), Harold Pincus, M.D. Veterans Coordinator for National Institute on Mental Health (NIMH) and myself made a presentation at the Region VIII meeting of over 200 community mental health providers. The day long session was jointly sponsored by the Disabled American Veterans, DHHS ADAMHA Division and the Denver Department of Health and Hospitals. (Dr. Edmund Casper) Mr. Joe Cover, Regional Veterans Coordinator, Ernie Ficco and Stan Mahoney, ADAMHA Division Regional office staff deserve particular praise for pulling this highly successful seminar on Post-traumatic stress disorders among Vietnam Veterans together.

- Mr. James Duffy is the new Region IX Veterans Affairs coordinator.
- Region II PRO Dr. Bernard Kilbourne has announced the appointment of Mr. Donald Burnstein as the new Regional Veterans Coordinator.
- Coming Events:
 - a) March 18 - Discussion with Deputy Director, White House Veterans Committee relative to impact of budget cuts in veterans programs.
 - b) National Association for Equal Opportunity in Higher Education (National Black Colleges) Panel on Vietnam Veterans, Washington Hilton - March 20-22.
 - c) White House Veterans Committee discussion on Veterans Conference on Aging - Winder Building, March 19, 1981.
- Veterans Conventions - I would suggest you subscribe to the Stars and Stripes newspaper for current events, convention calendar and newsworthy items.
- Please keep me informed of all Regional activity in your monthly reports.



Peter E.M. Beach

Attachments