

Resolution No. 601

PROTECTING HEALTH CARE AND BENEFITS

WHEREAS, for more than a century, the Veterans of Foreign Wars has been successful in achieving major legislative and policy changes to secure benefits and services for veterans, survivors, and families; and

WHEREAS, due to the complexities of federal law and regulation, the general public may not be aware of nor fully understand eligibility for veteran disability and medical benefits, in addition to benefits provided to service members, survivors, and families; and

WHEREAS, various news media outlets have published articles suggesting that veterans benefits are too generous; and

WHEREAS, Congressional Budget Office consistently makes unacceptable recommendations like means testing service-connected disability, cutting off temporary disability individual unemployability ratings for elderly veterans, or suspending paid ratings for minor disabilities; and

WHEREAS, the American public asked its all-volunteer force to prosecute two decades of conflict that has subjected Americans to repeated combat deployments and other hazardous conditions; and

WHEREAS, the standard enlistment contract, DD Form 4, commits our nation's leaders to furnishing benefits to those who complete their honorable service; now therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the President, Congress, the Department of Veterans Affairs, and the Department of Defense to "Honor the Contract" and protect the current suite of benefits and services for veterans, service members, survivors, and their families.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 602

TOXIC EXPOSURES

WHEREAS, the PACT Act has acknowledged that veterans who have been exposed to toxic substances suffer from an array of conditions and diseases, and should not continue to have to undergo a burdensome claims process; and

WHEREAS, for decades VA was reluctant to establish a clear procedure for establishing additional presumptive conditions related to toxic exposures in service. In compliance with the PACT Act, VA has created a process to research, review, and add presumptive conditions based on association with toxic exposures; and

WHEREAS, veterans of current and past conflicts were exposed to numerous environmental hazards, including open air burn pits, the anti-malaria drug mefloquine, radioactive substances, herbicides and other hazards; and

WHEREAS, the United States military has conducted testing, monitoring, and clean-up operations related to various chemical, biological, radiological, and nuclear weapons resulting in exposure both within the borders of the United States and abroad; and

WHEREAS, veterans and family members stationed at Camp Lejeune who consumed contaminated water and now suffer from associated conditions and have recently benefited from the passage of the PACT Act and while VA acknowledged this fact. There are differences in what conditions are compensable and those which only receive reimbursement for medical care. Additionally, the requirement to be stationed on the base for 30 days is arbitrary and ignores thousands who graduated from training in less time; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to invest adequate resources to study, diagnose, and treat conditions and illnesses associated with toxic exposures and provide oversight of VA's presumptive decision process; and

BE IT FURTHER RESOLVED, that we urge Congress and the Department of Veterans Affairs to grant a presumption of service connection for all conditions and illnesses that are deemed by scientific evidence to be at least as likely as not associated with or caused by exposure to a toxic substance or environmental hazard, to be transparent about the presumptive decision process, and to include input from veterans on what exposures and conditions will be reviewed; and

BE IT FURTHER RESOLVED, that we urge Congress and the Department of Defense to reduce or eliminate the use of known toxins on and around military installations and disclose known and potential toxic exposures during all military operations and at facilities within the United States and abroad; and

Resolution No. 602 - continued

BE IT FURTHER RESOLVED, that Congress ensures that the Department of Defense expedites declassification efforts related to exposure events and that the Department of Veterans Affairs extends presumptive service connection to veterans suffering from conditions or illnesses found to be associated with exposure to toxic substances.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 603

MENTAL HEALTH DISORDERS

WHEREAS, the Department of Veterans Affairs (VA) has indicated that treating Post Traumatic Stress Disorder (PTSD) and providing Mental Health Care among returning war veterans is one of its highest priorities, and the VA operates a nationwide network of nearly 200 specialized PTSD outpatient treatment programs; and

WHEREAS, the early and accurate screening, diagnosis and treatment for PTSD, depression, substance use, and other mental health disorders, yields optimal patient outcomes, and statistics have shown that these conditions, left untreated or poorly treated, can lead to increases in suicide attempts or death by suicide among a host of other negative consequences; and

WHEREAS, studies conducted by VA show that social determinants of health, like financial stability, access to housing, and pathways to a quality career serve as protective factors against suicide. Each time a veteran uses a VBA economic opportunity program or benefit is an opportunity to provide resources and treatment; and

WHEREAS, the National Center for PTSD found that there are nearly 1.5 million veterans compensated for PTSD since September 2023; and

WHEREAS, available research has not sufficiently evaluated the clinical effectiveness of treatment programs for veterans diagnosed with and/or suffering from the effects of traumatic brain injuries, PTSD, or other mental health conditions, and adequate research into the brain's response to internal and external influences that could result in mental illness has yet to be undertaken; and

WHEREAS, service members and veterans are increasingly prescribed psychiatric medications, but do not need to provide informed consent on the ever-growing side effects such as withdrawal, suicidal ideation, or sexual side effects, and recent research indicates that veterans prescribed such medications may actually be at greater risk of suicide; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we strongly urge the Department of Veterans Affairs to continue to adequately staff VA mental health treatment and research programs; and

BE IT FURTHER RESOLVED, that we urge Congress to dedicate adequate resources to address the alarming rate at which veterans die by suicide to include moving the Office of Suicide Prevention from Veterans Health Administration to the enterprise level of the Department of Veterans Affairs; and

BE IT FURTHER RESOLVED, that we urge the Department of Veterans Affairs to research different treatments or practices that are most effective in helping our veterans cope with their PTSD; and

Resolution No. 603 - continued

BE IT FURTHER RESOLVED, that VA institute strong signatory informed consent protocols on all mental health medications, implement proper and ethical deprescribing guidelines for veterans seeking to stop medication, train prescribers on the emerging reports on psychotropic and psychiatric drugs, and publicize all data to inform the growing concern of overprescription and harm in the veteran community related to psychiatric drugs.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 604

ENSURE VETERAN SUCCESS IN EDUCATION

WHEREAS, our nation has consistently supported the future success of our warfighters through robust veterans' education benefits, historically molding generations of proven leaders; and

WHEREAS, the Veterans of Foreign Wars of the United States has worked to secure and preserve quality education benefits for all generations of veterans; and

WHEREAS, Department of Veterans Affairs enrolled nearly one million veterans across all G.I. Bill programs in the past academic year; and

WHEREAS, despite an increase in activations domestically for natural disasters, border security, and other missions, and a greater reliance on National Guard and Reserve Component service members, many veterans do not qualify for the Post-9/11 GI Bill benefit; and

WHEREAS, certain schools and programs seek to circumvent benefit guidelines in order to reap significant financial benefit; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to ensure proper oversight of Department of Veterans Affairs educational benefit programs by developing quality metrics with which to demonstrate student veteran success in higher education, and close financial loopholes through which certain academic programs can exploit GI Bill reimbursement models; and

BE IT FURTHER RESOLVED, that Congress ensures veterans receive equitable access to benefits like housing payments and quality pre-enrollment educational information to ensure veterans are academically and financially prepared to succeed in higher education; and

BE IT FURTHER RESOLVED, that we urge Congress to increase stipends for books, electronic devices such as laptops and tablets, instructional support applications, provide cost of living adjustments, and provide appropriate housing benefits for in-person, online and hybrid programs to give student veterans the proper resources and tools to be successful in their pursuit of higher education; and

BE IT FURTHER RESOLVED, that we work to extend earning GI Bill benefits for every day in uniform served, including for those in the Reserve components, and preserve quality GI Bill benefits for veterans of all conflicts to ensure they have access to quality education assistance programs.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 605

VA NURSING HOME ANNUAL INSPECTIONS

WHEREAS, the Veterans of Foreign Wars of the United States views it essential to hold the Department of Veterans Affairs accountable to conduct annual inspections, per their regulations, allowing for proper oversight to ensure VA standards of care are being upheld within all VA, state veterans homes, and contracted long-term care facilities; and

WHEREAS, the Department of Veterans Affairs oversees all 153 state veterans homes, which provide care to about 14,500 veterans and represents the majority of veterans who receive care in nursing homes; and

WHEREAS, in FY 21, the Department of Veterans Affairs paid nearly \$1.5 billion for the care that was provided to nearly 14,500 veterans in state veterans homes; and

WHEREAS, veterans are increasing in age, as nearly 8 million veterans are over the age of 65, which represents close to half of the veteran population; and

WHEREAS, it is a requirement of the Veterans Health Administration, outlined in VHA Directive 1143.2 to undertake an annual inspection of VA Nursing Homes, and VA contracted nursing homes; and

WHEREAS, Federal law and VA policy prevent VA from making payment to state veterans homes until it determines that they meet applicable quality care and other standards; and

WHEREAS, Officials of the Department of Veterans Affairs report that they rely on the Centers for Medicare and Medicaid inspections to provide feedback on inspections results and any corrective actions needed; and

WHEREAS, the Department of Veterans Affairs only has one recourse to enforce standards, which is to withhold per diem payments to the nursing facility, which the VA has never done; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support VA's engagement to increase the quality of care and improve the physical environment provided in nursing homes and long-term care facilities, to include the creation of additional enforcement measures to require compliance with VA care standards when receiving funds for the care of a veteran; and

BE IT FURTHER RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to authorize the Department of Veterans Affairs to conduct annual onsite inspections of all VA and contracted long-term care facilities within VA's scope to promote compliance with standards.

Submitted by Commander-in-Chief

To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 606

DENTAL CARE ELIGIBILITY

WHEREAS, VA eligibility for no-cost dental care is only afforded to veterans who are service-connected with a dental disability or former prisoner of war or rated at 100 percent permanent disabled; and

WHEREAS, veterans enrolled in VA's Homeless Veterans Dental Program or Veteran Readiness and Employment Program may only receive limited VA dental care; and

WHEREAS, out of the 9.2 million veterans enrolled in VA health care, only 15%, or about 1.4 million are eligible for comprehensive dental care; and

WHEREAS, 42% of veterans eligible for VA healthcare report having gum disease, and 60% experience tooth decay; and

WHEREAS, it is reported that veterans pay 65% more in out-of-pocket dental costs, on average, compared to non-veterans; and

WHEREAS, studies have shown that poor oral health has shown to be linked to other general health conditions, and some medical conditions may affect an individual's dental health; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to authorize Department of Veterans Affairs to expand eligibility for dental coverage and care to all service-connected veterans enrolled in VA health care.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 607

MEDICARE

WHEREAS, the Veterans of Foreign Wars of the United States views the abolishment of penalties for delayed enrollment to Medicare for veterans as essential to the veteran population; and eliminate penalties, but ultimately to eliminate the mandate for veterans enrolled in Department of Veterans Affairs health care to register for Medicare; and

WHEREAS, veterans with limited income or complex health issues may struggle to pay fines associated with delayed Medicare enrollment and these fines accumulated over time making it harder for veterans to access needed care and afford the fines; and

WHEREAS, nearly 8 million veterans are 65 years and older, and eligible for Medicare; and

WHEREAS, there is a confusion around veteran enrollment to Medicare because many veterans utilize the VA Health Care and don't realize the need to enroll in Medicare; and

WHEREAS, these penalties of 10% for each 12-month period you were eligible but did not sign up may discourage veterans from enrolling in Medicare potentially leaving the veteran without necessary health options because these penalties stay with you the remainder of their life; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we support the abolishment of penalties for veterans for delayed Medicare enrollment; and

BE IT FURTHER RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge Congress to authorize veterans enrolled in Department of Veterans Affairs health care to be exempt from registering for Medicare if they so choose.

Submitted by Commander-in-Chief
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 608

FOREIGN MEDICAL PROGRAM MEDICAL RECORDS

WHEREAS, Foreign Medical Program (FMP) is an overseas community care program with nearly 6,500 active users more than 114,000 claims in FY 2023; and

WHEREAS, the Department of Veterans Affairs (VA) community care network providers in the United States are required to share medical records with VA for inclusion in the Veterans Health Administration's (VHA) medical records system; and

WHEREAS, VA does not integrate veterans FMP medical records into the Veterans Health Administration (VHA) medical records system nor the Veterans Benefits Management System (VBMS); and

WHEREAS, VA not integrating FMP medical records into the VHA system is detrimental to the health of the veteran, resulting in critical gaps in medical history, delaying proper medical care and earned benefits; and

WHEREAS, the lack of VA integrating FMP medical records into VA's VBMS significantly delays timely VA service connection claims for increase; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the Department of Veterans Affairs to fully integrate Foreign Medical Program medical records into the Veterans Health Administration medical system and Veterans Benefits Administration, Veterans Benefits Management System upon receiving medical reimbursement claims by veterans.

Resolution No. 609

THE IMPERATIVE OF THE VETERANS HEALTH ADMINISTRATION PROVIDING NEXUS STATEMENTS

WHEREAS, within the context of veterans' disability claims, a Nexus statement serves as a connection or link between a veteran's current disabilities and the events that caused or aggravated them during military service. Nexus statements must be based on medical evidence and are crucial in determining the eligibility for disability benefits. Under current policy, veterans who rely solely on the VA for healthcare may seek third-party assistance, such as claim sharks, for obtaining Nexus statements, leading to potential exploitation; and

WHEREAS, the involvement of claim sharks in the claims process not only harms veterans financially but also erodes trust in the VA's ability to provide reliable assistance. Advocating VHA healthcare teams to providing medically valid Nexus statements when appropriate to veterans, the need for veterans to seek external assistance from claim sharks would diminish significantly. Claim sharks would lose their exploitative foothold, thereby reducing the instances of fraudulent practices targeting vulnerable veterans; and

WHEREAS, the implementation of policies promoting evidence-based Nexus statements be provided by Veterans Health Administration (VHA) health care providers encourages consistency and accuracy across different healthcare providers within the VHA. These statements serve as a standardized method for evaluating claims, reducing the possibility of erroneous or subjective decisions. By ensuring consistency, the VHA can minimize the number of claims that require additional review or appeal, thus saving time and resources. The utilization of Nexus statements provided by the VHA providers, also helps alleviate the administrative burden placed on both veterans and the VHA. By the VHA Healthcare teams providing clear and medically valid evidence, veterans are less likely to face repeated examinations or appeals, streamlining the claims process. Additionally, VHA resources can be allocated more efficiently, reducing costs associated with unnecessary administrative procedures; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge VA to change all current policies preventing VHA Healthcare providers from producing Nexus statements that are appropriate and supported by medical evidence and/or military service. By doing this, VHA providers will alleviate the unnecessary burden placed on many veterans to prove the relationship between their current medical condition and their military service through a third party. This expedites the adjudication process, significantly reducing the time and effort required for veterans and the Department of Veterans Affairs (VA) to reach a fair resolution at the same time reducing the risk of the Nation's veterans falling prey to exploitation and abuse.

Submitted by Department of Europe
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 610

HEALTHCARE PROGRAM FOR OVERSEAS VETERANS (if 2023-2024 Resolution No.610 is not passed by congress)

WHEREAS, the United States Department of Veterans Affairs (VA) plays a pivotal role in providing healthcare services to the veteran population. However, the unique needs and challenges faced by the overseas veteran population necessitate the establishment of a specially tailored healthcare program; and

WHEREAS, one of the critical problems faced by overseas veterans is limited access to appropriate healthcare services. These veterans currently have no access to VA Medical Facilities, or any medical treatment options provided by the VA, rendering them geographically disadvantaged and medically vulnerable. The VA's current healthcare system caters to veterans residing within the United States, which creates delays, difficulties, and gaps in availability for this overseas population; and

WHEREAS, geographic location must not be used to justify ignoring those whose past service and continued service to our nation have earned the benefits awarded to all veterans, not just those residing in the U.S.; and

WHEREAS, veterans remain overseas for many reasons. Many wish to continue to serve as government employees and contractors, acting as combat multipliers, especially during high operational tempo and times of war. Some remain overseas because they have built a life and family. The VA must make every effort to incorporate the use of earned benefits and programs by all veterans, living in both in the U.S. and abroad. Excluding a significant portion of the veteran population from accessing critical resources and benefits based on their geographic location is inherently unjust; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the VA to commit to leveraging technological tools and resources to enroll all veterans, regardless of location into a VA Healthcare program.

Resolution No. 611

VA TO REIMBURSE ELIGIBLE OVERSEAS VETERANS FOR URGENT CARE AND EMERGENCY ROOM VISITS

WHEREAS, the VA aims to meet the medical needs of veterans, especially those who have served and are living overseas, a significant gap in coverage exists when it comes to reimbursing eligible veterans for urgent care and emergency room visits incurred abroad; and

WHEREAS, overseas United States Military Veterans, who have dutifully served their country, often face difficulties in accessing urgent medical care under the VA's current reimbursement policy. Under these regulations, veterans are not reimbursed for urgent care and emergency room visits incurred outside the United States, leaving them financially burdened and potentially compromised in their healthcare options. The eligibility criteria for reimbursement needs to be revised to ensure veterans receive proper financial assistance for urgent medical needs while abroad; and

WHEREAS, denying reimbursement for overseas veterans' emergency medical expenses places an undue financial burden on veterans. This policy hampers their ability to seek necessary medical treatment, potentially leading to delayed or inadequate care. This not only impacts the well-being of the veteran but also contradicts the fundamental mission of the VA, which is to provide high-quality healthcare services to all eligible veterans; and

WHEREAS, it is the moral responsibility of a nation to care for its veterans, regardless of their geographic location. By adequately reimbursing these expenses, the VA can honor its commitment to provide essential healthcare services to those who have put their lives at risk in service to their country; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we urge the VA to promptly amend this policy to include reimbursement for such services incurred abroad, the VA can alleviate financial burdens on eligible veterans, honor its commitment to their well-being, and ensure that they have access to adequate and timely medical care, regardless of their location.

Resolution No. 612

FEMALE REPRODUCTIVE CANCERS AND OTHER GYNECOLOGICAL CONDITIONS DUE TO TOXIC EXPOSURE

WHEREAS the Department of Veterans Affairs does not recognize as presumptive any reproductive issues to include cancers suffered by female veterans as attributed to exposure to either the class of tactical herbicides commonly known as “Agent Orange” in Southeast Asia or to the contaminated water at Camp Lejeune; and

WHEREAS female military personnel did serve in Vietnam and within the 12 mile off-shore limits of the Republic of Vietnam and at the Camp Lejeune Marine Corps base complex and the only thing the Department of Veterans Affairs currently recognizes as presumptive are birth defects but no other issues specific to females only to those females that served in the Vietnam Theater of Operations and not to those stationed at Camp Lejeune; and

WHEREAS under the PACT ACT for personnel who served in Southwest Asia are granted a presumption of service connection for reproductive cancers but does not recognize birth defects of children born to these veterans; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon the Department of Veterans Affairs to recognize as presumptive, any and all female reproductive cancers and other gynecological conditions after exposure in Southeast Asia and Camp Lejeune and to include, as presumptive, birth defects to the children of any veteran who has served in areas effected by chemical contamination both overseas and within the United States and its overseas territories.

Resolution No. 613

TOXIC EXPOSURE TO US NAVY SUBMARINERS

WHEREAS, the United States Navy's Submarine Force exposes military members to a unique form of duty which combines an enclosed working and living environment for extended periods of time. This "environment" has exposed veterans to toxic substances, gases, and ionizing radiation within the confines of submerged submarines, which has not been sufficiently studied; and

WHEREAS, in compliance with the PACT ACT, the VA has created a process to research, review, and add presumptive conditions based on association with toxic exposures; and

WHEREAS, this toxic and hazardous exposure has resulted in many submarine veterans developing chronic, and sometimes fatal, health conditions which could be directly, and exclusively, connected to submarine duty; and

WHEREAS, submarine veterans have identified approximately 130 chemicals that are known to possibly contaminate submarine atmospheres, and approximately 100 health issues which submarine veterans have been diagnosed with, and are receiving medical care for, which could, or should, be connected to submarine duty; and

WHEREAS, there is a critical need for increased research into the correlation between the known, and future, medical conditions, diagnosed in Submariners, which may be related to their service onboard submersible vehicles; now, therefore

BE IT RESOLVED, that the Veterans of Foreign Wars of the United States, urge Congress to direct the Department of Veterans Affairs to conduct comprehensive research on the correlation between environmental conditions aboard submarines and the medical conditions diagnosed and treated in Active-Duty and Veteran Submariners; and

BE IT FURTHER RESOLVED, that we urge Congress and the Department of Veterans Affairs to grant a presumption of service connection for all conditions and illnesses that are deemed by scientific evidence to be at least as likely as not associated with or caused by exposure to toxic substances, gases and ionizing radiation, and to be transparent about the presumptive decision process, and to include input from Submariners on what exposures and conditions will be reviewed; and

BE IT FURTHER RESOLVED, that we urge Congress and the Department of Defense to reduce or eliminate the use of known toxins aboard US Navy Submarines and disclose known and potential toxic exposures experienced aboard US Navy Submarines; and

BE IT FURTHER RESOLVED, that Congress ensures that the Department of Defense expedites declassification efforts related to exposure events aboard US Navy Submarines and that the Department of Veterans Affairs extends presumptive service connection to veterans suffering from conditions or illnesses found to be associated with exposure to toxic substances.

Submitted by Department of Wisconsin
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 614

VFW OPPOSES BUDGET CUTS THAT HARM VETERANS AND THEIR FAMILIES

WHEREAS, the United States of America has a sacred obligation to care for those who have borne the battle and burdens caused by military service as well as their families; and

WHEREAS, the Veterans of Foreign Wars of the United States has a similar sacred honor to honor the dead by helping the living; and

WHEREAS, the United States of America seeks ways to cut spending to address a national debt that has been described as a threat to the continued existence and security of our nation; and

WHEREAS, the Department of Government Efficiency (DOGE) was established to make cuts and suggestions for cuts to address said deficits; and

WHEREAS, recommended cuts include research for illnesses impacting veterans and their families such as Lou Gehrig's Disease, conditions related to Agent Orange and Burn Pits, funding for the Department of Veterans Affairs suicide prevention hotline, and more; and

WHEREAS, recommended and actual cuts can cause irreparable damage including increases in rates of suicide among veterans due to a lack of economic security; and

WHEREAS, balancing budgets on the backs of veterans and the military is something the Veterans of Foreign Wars of the United States has never supported; now, therefore

BE IT RESOLVED, that the Veterans of Foreign Wars of the United States, supports fiscal discipline that does not harm veterans, the military, or their families; and

BE IT FURTHER RESOLVED, that the Veterans of Foreign Wars of the United States calls upon Congress and the President of the United States to reject proposed cuts and reverse implemented cuts from DOGE that harm veterans, the military, and their families.

Submitted by Department of Virginia
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 615

SUPPORTING HARM REDUCTION AND OPPOSING PROHIBITION IN NICOTINE USE POLICY

WHEREAS, over 1 million veterans receiving care through the Veterans Health Administration report currently smoking cigarettes, and more than 52% of them have made recent, unsuccessful attempts to quit; and

WHEREAS, research shows that many veterans initiate tobacco use during military service, and those who have deployed are especially likely to develop long-term smoking habits due to the stress and culture of combat readiness; and

WHEREAS, as of 2018, 18.4% of active-duty service members reported smoking, with 47% of them having tried and failed to quit in the past year, highlighting the urgency for better solutions; and

WHEREAS, tobacco use imposes significant costs on the military and VA health systems — with the Department of Defense spending nearly \$1.8 billion in 2014 on tobacco-related medical and non-medical costs, and VHA spending an estimated \$2.7 billion in 2010 on smoking-related care, prescription drugs, hospitalizations, and home healthcare; and

WHEREAS, credible public health authorities, including the Royal College of Physicians and researchers published in the New England Journal of Medicine, have concluded that vapes and other non-combustible nicotine products are significantly less harmful than smoking and can play a powerful role in cessation for veterans who struggle to quit; and

WHEREAS, nicotine itself is not the primary cause of disease, and products that deliver nicotine without combustion — such as e-cigarettes, oral pouches, and heated tobacco — eliminate the inhalation of tar and other toxicants responsible for cancer, cardiovascular disease, and respiratory illness; and

WHEREAS, modern alternatives also more effectively mimic the behavioral elements of smoking (e.g., inhalation, hand-to-mouth action), making them more effective for some smokers than traditional nicotine replacement therapies like gum, patches, or lozenges; and

WHEREAS, the VA currently does not recommend or provide access to safer nicotine alternatives, and in some instances promotes misleading or incorrect information about their health risks — denying veterans accurate information and the full range of tools they may need to quit smoking; and

WHEREAS, several U.S. states and agencies have attempted to ban flavored nicotine products or limit access to vapes and oral products outright with a lack of compassion for the needs of veterans, denying veterans safer alternatives and eliminating their freedom of choice; and

Resolution No. 615 - continued

WHEREAS, countries like the United Kingdom, Sweden, and Japan have embraced harm reduction strategies — distributing free vapes, encouraging safer oral products, and legalizing heated tobacco — leading to significant declines in smoking and related disease; now, therefore

BE IT RESOLVED, that the Veterans of Foreign Wars of the United States, urges all government agencies, including the Department of Veterans Affairs, to adopt evidence-based, compassionate tobacco harm reduction policies, including offering veterans access to and education about significantly safer alternatives to cigarettes such as e-cigarettes, nicotine pouches, and heated tobacco products; and

BE IT FURTHER RESOLVED, that the Veterans of Foreign Wars will oppose prohibition-based policies at the federal, state, and local levels that ban or restrict access to legal nicotine alternatives — particularly those policies that unfairly restrict freedom of choice, misrepresent the science, and fail to recognize the legitimate role of harm reduction in improving the health and well-being of America's veterans; and

BE IT FURTHER RESOLVED, that the Veterans of Foreign Wars supports changes to VA healthcare policy that would ensure these reduced-risk nicotine products are included in cessation recommendations and made available to veterans who are unable or not ready to quit nicotine entirely.

Resolution No. 616

SUPPORTING CLINICAL PSYCHEDELIC DRUG TREATMENT

WHEREAS, the suicide rate in the Veteran community is maintaining a number of 22 a day; and

WHEREAS, the use of Psychedelic drugs in a clinical environment have been proven to significantly decrease the effect of Post Traumatic Stress; and

WHEREAS, the Psychedelic drugs should include natural remedies, such as Peyote, and Psilocybin mushrooms, to include manufactured drugs under clinical supervision; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we petition Congress to enact legislation to allow the use of Psychedelic drugs, in a clinical environment, to be used in the treatment of PTSD.

Submitted by Department of Colorado
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 617

SUPPORTING PHYSICIAN ASSISTANTS/ASSOCIATES (PAS)

WHEREAS, chronic health care staffing vacancies in the Veterans Health Administration (VHA) has been a major driver of longer wait times for veterans seeking VA care, veterans' demand for care is increasing since enactment of the Promise to Address Comprehensive Toxics (PACT) Act, the VHA reported in November 2024 over 780,000 new veterans enrolled across the department while in 2025 vacancies continue to grow, and the VFW has previously requested a VHA increase in clinical staffing; and

WHEREAS, over a million mental health integration visits take place annually in VA Medical Centers (VAMC), improving mental health and suicide prevention is a VFW priority, thus effective multidisciplinary clinical staffing recruitment programs to address persistent VHA staffing shortages are necessary to improve access to mental health services, women's health, geriatric, emergency medicine, and rural and primary care; and

WHEREAS, the VA released its National Veteran Suicide Prevention Annual Report of 2024, which stated in 2022 there were 271 suicides among female veterans, and 6,136 suicides among male veterans for an average daily rate of 17.6 lives lost; and

WHEREAS, in conjunction with P.L. 1991 Health Care Personnel Education and Training Programs Act, and after a five-year successful pilot program providing veteran PAs thirty-five Health Profession Scholarships (HPSP) university scholarships annually, the VHA reduced these PA veteran HPSP scholarships to twenty-five in 2024, and announced in February 2025, the elimination of the HPSP for veterans who want to become PAs, thus decreasing educational support for VHA employed veterans; and

WHEREAS, PAs are highly educated health care professionals licensed to diagnose, treat, and prescribe medications. The PA profession arose from returning Vietnam War combat medics and corpsmen in 1967, who have been treating veterans for over 58-years. Among their extensively broad medical and surgical curriculum is psychiatry with mental health clinical rotations; and

WHEREAS, PA training programs are nationally accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), and PA training is adopted from the Accreditation Council for Graduate Medical Education (ACGME); and

WHEREAS, four VAMC's established PA one-year mental health residencies in 2018, which offered only a total of ten residencies annually from 2021 to 2024 despite shortages of clinical mental health providers. Of the 29 post-graduate PA residents who graduated, the VAMC's only hired 12 (43%) of these highly trained PAs. The VHA will not expand these slots; now, therefore

Resolution No. 617 – continued

BE IT RESOLVED, that the Veterans of Foreign Wars of the United States, at its convention in August 2025, urges the United States Congress to enact legislation providing high quality access to rural primary care services, women's health, and mental health and suicide prevention; and

BE IT FURTHER RESOLVED, it is essential to recruit and hire the most qualified health care occupations, including PAs. Physician Assistants/Associates shall be included with dual postings for vacancies to strategically expand in critical areas of mental health, rural and primary care, women's health, emergency medicine, and geriatric care; and

BE IT FURTHER RESOLVED, these critical enhancements in the VHA system: (1) the inclusion of PAs as a Veterans Integrated Service Network (VISN) mental health discipline in VHA mental health policies and directives; and (2) the continuation of the HPSP scholarships for veterans employed by the VHA to become PAs, the continuation of PA residences in mental health, and an enhanced strategic national recruitment policy to support the utilization of veteran PAs in a multitude of aforementioned needed specialties.

Submitted by Department of Colorado
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 618

**FULLY SUPPORT PRESIDENT TRUMP'S EXECUTIVE ORDER HOLDING
THE DEPARTMENT OF VETERANS AFFAIRS ACCOUNTABLE TO
UTILIZING THE WEST LOS ANGELES CAMPUS AS INTENDED, AND
MORE, BY ESTABLISHING A NATIONAL CENTER FOR WARRIOR
INDEPENDENCE (NR 25-3)**

WHEREAS, the Department of Veterans Affairs' management, or lack thereof, of at the West Los Angeles Campus has resulted in the Department benefiting financially by leasing portions of the campus to businesses and organizations for purposes unrelated to providing medical care or treatment at the expense of the well-being of our nation's heroes since 2011; and

WHEREAS, the Department of Veterans Affairs continued to ignore the plight despite rulings by a District Court regarding their misuse of the property and were granted an emergency stay pending further adjudication; and

WHEREAS, for more than a decade, the Department of Veterans Affairs has proven itself unwilling or unable to restore the campus to its historical purpose as a National Home for Disabled Volunteer Soldiers; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we petition Congress to ensure that the Department of Veterans Affairs carries out the full intent of the President's Executive Order forthwith.

Submitted by Department of California
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 619

DESIGNATION AND PROTECTION OF MILITARY GRAVES AS SACRED GROUND

WHEREAS, the Veterans of Foreign Wars of the United States (VFW) is dedicated to honoring the memory of all veterans who have served our nation with valor, and recognizes the profound importance of preserving their final resting places with the utmost respect; and

WHEREAS, military graves represent the hallowed ground where the brave men and women who have defended our freedoms are laid to rest, and as such, these sites must be treated with the highest reverence and dignity; and

WHEREAS the conversion of cemeteries containing military graves into parks or other public spaces undermines the sanctity of these burial grounds and dishonors the memory of those who have made the ultimate sacrifice for our country; and

WHEREAS, the VFW believes that all military graves should be permanently recognized as sacred ground, protected from any alteration or repurposing that would detract from their intended use as places of remembrance and honor; and

WHEREAS, it is imperative that any cemeteries that have been converted into parks or other uses be restored to their original status as cemeteries and preserved exclusively for that purpose; now, therefore

BE IT RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon all levels of government—federal, state, and local—to recognize all military graves as sacred ground, ensuring that no changes are made to these locations that would convert them into parks or any other type of public space; and

BE IT FURTHER RESOLVED, that the VFW strongly urges the immediate restoration of all cemeteries containing military graves that have been converted into parks or other non-cemetery uses, and that these cemeteries be returned to their proper status by Veterans Day, November 11th, 2025, to honor the memory and sacrifice of our nation's veterans; and

BE IT FURTHER RESOLVED, that copies of this resolution be forwarded to the President of the United States, members of Congress, the Secretary of Veterans Affairs, state governors, and other relevant authorities, urging their support and action on this matter of national significance.

Submitted by Department of California
To Committee on VETERANS SERVICE RESOLUTIONS

Resolution No. 620

RECOGNITION OF MILITARY SEXUAL VIOLENCE

WHEREAS, 1.4 million post-9/11 service members have been affected by military sexual violence, as defined in the Uniform Code of Military Justice § Section 10 Article 120, indicating that one in three service members have experienced such violence; and

WHEREAS, this prevalence shows no significant gender difference, with statistical suicide rates reflecting higher incidences among males being raped in combat zones; and

WHEREAS, while Department of Defense official statistics report 30,000 incidents of sexual assault to service members annually, the actual prevalence was 75,569 in 2021 and 73,695 in 2023, demonstrating that the rates of military sexual violence are two to four times higher than reported; and

WHEREAS 35,000 service members each year, while on active duty, either attempt suicide or experience suicidal ideation, with a greater number attempting suicide; and

WHEREAS, of the 1.4 million service members in the 20 years post-9/11, 700,000 have attempted or completed suicide due to the infliction of military sexual violence; and

WHEREAS, a Day of Recognition for Military Sexual Violence should be established on October 11th each year to expose the great injustices inflicted on our bravest service members, whose courage to stand up to defend this Nation, while concurrently fighting to heal from criminal acts perpetrated against them while protecting the United States, is recognized; now, therefore

BE RESOLVED, by the Veterans of Foreign Wars of the United States, that we call upon the Department of Defense and all branches of the military to acknowledge the severity of military sexual violence and to implement comprehensive measures to prevent such incidents; and

BE FURTHER RESOLVED that the VFW supports the establishment of October 11th as the Day of Recognition for Military Sexual Violence to honor and support survivors, raise awareness, and promote necessary reforms within the military to address and prevent sexual violence.

Submitted by Department of California
To Committee on VETERANS SERVICE RESOLUTIONS