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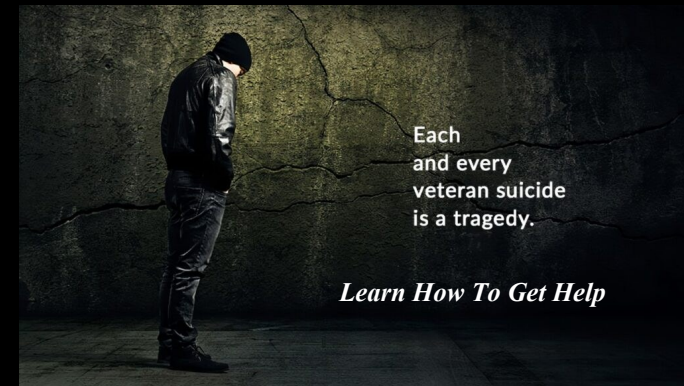
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A wooden house-shaped sign with the text "VA Loan" in white, set against a dark blue background. The sign is placed in front of an American flag.



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Editor and His Hero

Army Veteran Describes How He Learned To Love Himself Again

Amid severe issues with anger, survivor guilt, and the injury that prematurely ended his Army career, Zack was presented with a challenge during a nighttime conversation with a friend he had moved in with.

“I truly believe that, if you look at it, you probably don’t even love yourself anymore,” his friend, a Navy Veteran, told him. Then his friend challenged him to walk upstairs, look at himself in the mirror, and tell himself he loved himself.

“Too easy,” Zack thought. He stomped upstairs, looked in the mirror, and began to try to say the words.

“I lo—” was as far as he could get before collapsing and experiencing a panic attack.

“Leader’s guilt”

How did Zack reach this point? It might have started on his deployment as an infantry officer for a mission he helped plan. Six weeks into the mission, Zack was watching live drone footage when 6 Soldiers were killed in an ambush.

“Instead of the survivor’s guilt a lot of my guys were having trouble with, I also had another piece of, like, leader’s guilt,” Zack says. “For a long time, I blamed myself for getting the guys killed, for actually killing my guys, and that was a big piece that I struggled with, especially once we got back in the States. One of the guys, Joey, was 24 years old, 3 months from getting out, left a wife and three kids, and losing him was a really big hit for a lot of us.”

Zack also was injured during his deployment, with ulnar nerve damage that wasn’t discovered until 18 months later, when it started to cause atrophy in his entire left arm. His surgery did not go well, and he had to leave the service with a medical discharge.

“Mad at the world”

Zack left military service in a bad mental state.

“I was angry at everybody—angry at God, angry at family, angry at friends, very mad at the world,” he says. The loss of his Soldiers also continued to haunt him, especially the death of Joey.

“Every time I go to see family, it immediately goes back to Joey, who isn’t there anymore,” he says. “His kids don’t have a father, his wife doesn’t have him, the parents don’t have him as a son.”

In his feelings of despair, Zack contemplated suicide. He even sent a final text message to his ex-wife, assuring her that she and Zack’s goddaughter would be taken care of. She responded by telling him she was sending police to his home to stop him.

“Let me fix it”

Eventually, Zack moved in with his Navy Veteran friend, and the night of his panic attack in front of the mirror proved to be a turning point.

“It was the point that I realized that something was broken,” Zack explains. “That’s an empowering thought to me, ’cause I grew up fixing things. Something’s broken, let me fix it. And that first step was seeking therapy.”

Zack says his weekly sessions with a therapist have been a big help because his therapist understood his needs. “He did a great job of making me feel comfortable enough to do the thing all men hate and share feelings,” Zack says. He recalls the therapist’s words of encouragement: “Don’t run from the feelings. Sit in whatever you’re feeling, so that way you can actually start working through and analyzing what those feelings are coming from, and how to handle those.”

Motivated by his therapist, Zack tried different self-help techniques and found that keeping a journal, meditating, and reading more books helped him. He also began exercising early each day.

“Working out really sets a tone for my day with my mental health,” he says. “I can start with some endorphins, get a good endorphin release in the morning, and it keeps me on a high, essentially, throughout the day.”

“You can fix it”

Zack credits therapy with putting his life back on track.

“I’m in a good relationship now with my significant other,” he says. “That would’ve never happened, man. Having a partner at home, a battle buddy in a relationship, has been awesome.”

“Family’s back on the table again,” he continues. “I think one of the biggest shifts is really recognizing, like, I actually do deserve that, and not blame myself for all the families that don’t have that because of what we went through.”

Zack wants other Veterans to know they can find a new way forward, too. “If you can recognize that broken link, you can fix it,” he encourages them. “Just don’t avoid looking for that piece, no matter how uncomfortable it may be.”

(Source: <https://www.maketheconnection.net/read-stories/army-veteran-describes-how-he-learned-to-love-himself-again/>)



What Is Treatment?

Help is here

No matter where you are or what you’re feeling, VA’s mental health professionals, support services, and proven therapies can help. Keep reading to learn about the benefits of mental health care and when to seek professional treatment. Then, take the next step toward improving your well-being by connecting with care.

When and why to get professional help

Although Veterans and their loved ones can usually recognize when to treat physical injuries, it can be harder to identify mental health issues. But, just like staying in shape physically, maintaining your mental health is essential to your overall well-being at every stage of life.

Challenges to mental health can affect your relationships, physical condition, concentration, eating, sleeping, and other important facets of daily life.

If you’ve just started experiencing symptoms — even if you aren’t even sure if anything is really wrong — reach out now. Getting support or treatment as soon as possible can stop your symptoms from getting worse.

And, even if you left the military decades ago, it’s never too late to get treatment or support for whatever is troubling you. Even Veterans who didn’t realize they were dealing with a mental health condition for many years have improved their lives with support.

The benefits of getting help

Treatment can make a difference in your health and well-being. Connecting with care has far-reaching benefits — support can help you strengthen your relationships, reignite a sense of purpose, enjoy a brighter outlook, and more. Discover how treatment helped other Veterans thrive after service.

How treatment works

The word “therapy,” like “treatment,” refers to counseling, medication, or any number of approaches to mental health care. Many treatments can produce positive and meaningful changes in symptoms and quality of life after just a brief amount of time.

Proper mental health care can help you understand why things feel out of sorts and give you a new perspective. Therapy can also help improve responses to emotional triggers, stressful situations, and other challenges in your life.

Evidence-based treatments are those that have proved effective for a particular mental health condition. These scientifically tested courses of treatment include a range of therapies and medications. At VA, evidence-based treatments are tailored to each Veteran’s needs, priorities, values, preferences, and goals. Many may work quickly, sometimes within a few weeks or months,

depending on the nature or severity of symptoms. Talk with your VA health care provider to choose the treatment options that work best for you.

The most frequently used therapies at VA include counseling and medication:

Counseling

Talk therapy with a professional counselor may be one-on-one, with your family, or with another group, or it may be a combination of options. By working through your experiences, emotions, and reactions, you can learn new ways of thinking about them. You also learn how to practice positive behaviors and take active steps to move beyond your symptoms.

Finding the right therapist is an important part of the treatment process. Some Veterans feel their therapist is a good fit right away, but others try more than one before they find a comfortable match.

Medication

Often used in conjunction with counseling, medications work in different ways to manage the chemicals in your brain that may affect the way you feel. Not every medication is effective for everyone, so work with your VA provider to find the best medication therapy for your unique situation.

Self-help

Often used to support other treatments, self-help programs may include participating in 12-step meetings, using smartphone apps and other self-driven tools, completing workbooks, or doing other activities suggested by your treatment provider.

Self-help resources:

Try a [self-assessment screening](#) for common mental health conditions.

Learn about [self-help strategies](#).

Review VA’s useful [web-based training tools](#) for Veterans.

Explore VA’s [mental health apps](#), designed to help Veterans with a variety of concerns, such as PTSD, anger management, and smoking cessation.

Whole Health

Whole Health centers around *what matters to you*, not what is the matter with you. This means your health team will get to know you as a person, before working with you to develop a personalized health plan based on your values, needs, and goals. [Explore VA’s approach to Whole Health and learn how you get can started.](#)

Every day, Veterans from all military service branches and eras connect with proven resources and effective treatments through VA. Whether this is your first time considering mental health

support or you’ve had treatment before, let VA help make sure your next step is the right step for you.

Explore VA’s “[How to Apply for VA health care](#)” page and apply for health care benefits by creating a [free account online](#).

Read about [eligibility for VA health care](#) and [family and caregiver health benefits](#).

For guidance about finding the right resources to meet your needs, call 1-877-222-VETS (1-877-222-8387) Monday through Friday, 8 a.m. to 8 p.m. ET. If you have hearing loss, call TTY: 1-800-877-8339

The fastest way for enrollees to schedule appointments: Call the VA facility where you want to receive care.

With [VA Appointments tools](#), you can schedule some VA health care appointments online, view details about upcoming appointments, and organize your health care calendar.

There’s a whole community of support ready to help with whatever you’re going through. Use this tool to [find resources near you](#), then contact your nearest [VA medical center or Vet Center to talk about your needs](#).

[Vet Centers](#) are community-based counseling centers. If you are a Veteran or service member including members of the National Guard and Reserve, you may be [eligible](#) to receive individual and group counseling at no cost to you and your family. You can access these services even if you’re not enrolled in VA health care or have a service connection.

[Find a Vet Center near you](#) or call 1-877-927-8387, 24/7 to talk with a fellow Veteran about your experiences.

If you are having thoughts of harming yourself or wish you were dead, you should talk to someone right away. Your family and friends may already know that you’re having a tough time. You may want to turn to them and let them know what you’re feeling and thinking.


To reach the [Veterans Crisis Line, Dial 988 and Press 1](#), use the Veterans Crisis Line [online chat](#), or send a text message to the Veterans Crisis Line at [838255](#). The Veterans Crisis Line offers free, confidential support 24 hours a day, 7 days a week, 365 days a year.

(Source: An extraction in part from <https://www.maketheconnection.net/resources/what-is-treatment/>)

A lot of women say their husband never listens to them. I am proud to say I have never heard my wife say that.



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Today I saw a woman talking to her cat. She really thought the cat understood.

I told my dog when I got home... we both had a good laugh.

Medal of Honor

Staff Sergeant Marcario García, also known as Macario García (January 20, 1920 – December 24, 1972) was the first Mexican immigrant to receive the Medal of Honor, the United States' highest military decoration. He received the award for his heroic actions as a soldier during World War II.

Citation:

Staff Sergeant Marcario García, Company B, 22nd Infantry, in action involving actual conflict with the enemy in the vicinity of Grosshau, Germany, 27 November 1944. While an acting squad leader, he single-handedly assaulted two enemy machine gun emplacements. Attacking prepared positions on a wooded hill, which could be approached only through meager cover.



His company was pinned down by intense machine-gun fire and subjected to a concentrated artillery and mortar barrage. Although painfully wounded, he refused to be evacuated and on his own initiative crawled forward alone until he reached a position near an enemy emplacement. Hurling grenades, he boldly assaulted the position, destroyed the gun, and with his rifle killed three of the enemy who attempted to escape. When he rejoined his company, a second machine-gun opened fire and again the intrepid soldier went forward, utterly disregarding his own safety. He stormed the position and destroyed the gun, killed three more Germans, and captured four prisoners. He fought on with his unit until the objective was taken and only then did he permit himself to be removed for medical care. S/Sgt. (then Pvt.) Garcia's conspicuous heroism, his inspiring, courageous conduct, and his complete disregard for his personal safety wiped out two enemy emplacements and enabled his company to advance and secure its objective.

On August 23, 1945, the President of the United States, Harry S. Truman, presented Staff Sergeant Garcia with the Medal of Honor at a ceremony in the White House. A month after he was awarded the Medal of Honor, Garcia was denied service at a restaurant located in a town just a few miles south of Houston because he was Hispanic. Garcia was beaten with a bat by the owner. No one was arrested and no charges were initially filed. It was only after national columnist Walter Winchell reported the incident and labeled Sugar Land the most racist city in America that charges were filed—against Garcia. Then the incident was covered by the news media, and caused an uproar from the Hispanic community who rallied to his aid. The nation was made aware as to the discriminatory policies that Hispanics were subject to, as the case against Garcia was repeatedly postponed before being dropped.

Five out of six people agree that Russian Roulette is safe.

What did the duck say when he bought lipstick? A: "Put it on my bill."



Chris Follett

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About Home Loans

VA helps Veterans, Servicemembers, and eligible surviving spouses become homeowners. As part of our mission to serve you, we provide a home loan guaranty benefit and other housing-related programs to help you buy, build, repair, retain, or adapt a home for your own personal occupancy.

VA Home Loans are provided by private lenders, such as banks and mortgage companies. VA guarantees a portion of the loan, enabling the lender to provide you with more favorable terms.

[Read our guide for buying a home](#)

Before you buy, be sure to read the VA Home Loan Buyer's Guide. This guide can help you under the homebuying process and how to make the most of your VA loan benefit. [Download the Buyer's Guide here.](#)

[Main pillars of the VA home loan benefit](#)

No downpayment required (**Note: Lenders may require down-payments for some borrowers using the VA home loan guaranty, but VA does not require a downpayment*)

Competitively low interest rates

Limited closing costs

No need for Private Mortgage Insurance (PMI)

The VA home loan is a lifetime benefit: you can use the guaranty *multiple times*

[Benefits](#)

Purchase Loans Help you purchase a home at a competitive interest rate often without requiring a downpayment or private mortgage insurance. Cash Out Refinance loans allow you to take cash out of your home equity to take care of concerns like paying off debt, funding school, or making home improvements. [Learn More](#)

Interest Rate Reduction Refinance Loan (IRRRL): Also called the Streamline Refinance Loan can help you obtain a lower interest rate by refinancing your existing VA loan. [Learn More](#)

Native American Direct Loan (NADL) Program: Helps eligible Native American Veterans finance the purchase, construction, or improvement of homes on Federal Trust Land, or reduce the interest rate on a VA loan. [Learn More](#)

Adapted Housing Grants: Help Veterans with a permanent and total service-connected disability purchase or build an adapted home or to modify an existing home to account for their disability. [Learn More](#)

* * * * *

Foreclosure Avoidance Assistance: VA provides financial counseling to help Veterans avoid foreclosure during periods of financial difficulty. [Learn More](#)

State Resources: Many states offer resources to Veterans, including property tax reductions to certain Veterans. [Learn More](#)

[Eligibility Requirements](#)

Your length of service or service commitment, duty status and character of service determine your eligibility for specific home loan benefits.

*Eligibility now includes National Guard members with at least 90 days of active service including at least *30 consecutive days* under Title 32, Sections 316, 502, 503, 504 or 505.

Purchase Loans and Cash-Out Refinance: VA-guaranteed loans are available for homes for your occupancy or a spouse and/or dependent (for active duty service members). To be eligible, you must have satisfactory credit, sufficient income to meet the expected monthly obligations, and a valid Certificate of Eligibility (COE). [Learn More](#)

Interest Rate Reduction Refinance Loan (IRRRL): The IRRRL is a "VA to VA" loan, meaning it can only be done if you have an existing VA guaranteed loan on the property. The IRRRL is generally performed to lower the interest and reduce the monthly payment on the existing VA guaranteed loan. [Learn More](#)

Native American Direct Loan (NADL) Program: The NADL program helps Native American Veterans purchase, construct, improve, or re-finance a home on Native American trust lands. Your tribal organization must participate in the VA direct loan program. You must have a valid Certificate of Eligibility (COE). [Learn More](#)

Adapted Housing Grants: VA helps Veterans with certain total and permanent disabilities related to your military service obtain suitable housing with either a Specially Adapted Housing (SAH) or Special Housing Adaptation (SHA) grant. [Learn More](#)

[How to Apply](#)

Purchase Loan & Cash-Out Refinance: VA loans are obtained through a lender of your choice once you obtain a Certificate of Eligibility (COE). You can obtain a COE through your lender, VA.gov, or by mail. [Learn More](#)

Interest Rate Reduction Refinance Loan: A new Certificate of Eligibility (COE) is not required. You may take your Certificate of Eligibility to show the prior use of your entitlement or your lender may use our e-mail confirmation procedure in lieu of a COE. [Learn More](#)

Native American Direct Loan (NADL) Program: First, confirm that your tribal organization participates in the VA direct loan program. NADL loans are obtained through a lender of your choice once you obtain a Certificate of Eligibility (COE). You can obtain a COE through VA.gov, or by mail. [Learn more about the NADL Program](#)

Adapted Housing Grants: You can apply for an SAH or SHA

grant by either downloading and completing [VA Form 26-4555 \(PDF\)](#) and submitting it to your nearest Regional Loan Center, or completing the online application. [Learn more about adapted housing grants](#)

Spirit 03 – Battle of Khafji



During Operation Desert Storm, the AC-130H Spectre gunship, callsign “Spirit 03,” played a pivotal role in providing close air support to Coalition forces. On January 31, 1991, during the Battle of Khafji, Spirit 03 was shot down by an Iraqi surface-to-air missile, resulting in the tragic loss of all 14 crew members.

The Battle of Khafji marked the first major ground engagement of the Gulf War. Iraqi forces advanced into the Saudi Arabian town of Khafji, aiming to gain a strategic foothold. In response, Coalition forces, including U.S. Marines and Saudi Arabian units, launched a counteroffensive to reclaim the city. AC-130 gunships, renowned for their heavy firepower and close air support capabilities, were instrumental in this effort.

Spirit 03 was one of three AC-130s providing nighttime support during the battle. As dawn approached on January 31, the other two gunships departed due to increased risk from enemy air defenses. Despite the heightened danger, Spirit 03 remained on station to support Marines engaged in combat. Tragically, as daylight broke, the aircraft was struck by a shoulder-fired Strela-2 (SA-7) missile, leading to its crash into the Persian Gulf and the loss of all aboard. This incident represented the largest single loss of life for the U.S. Air Force during Operation Desert Storm.

The sacrifice of the Spirit 03 crew underscored the perils faced by aircrews in combat and highlighted the need for advancements in aircraft survivability. In the years following the incident, the U.S. Air Force implemented enhanced countermeasures and tactics to protect gunship crews from similar threats. No AC-130 has been lost to enemy fire since the downing of Spirit 03.

The heroism and dedication of the Spirit 03 crew continue to be honored within the Air Force Special Operations commu-

nity. Memorial ceremonies and flights are conducted annually to commemorate their sacrifice and to remind current and future Airmen of the profound cost of freedom.

During Operation Desert Storm, the United States Air Force lost 20 service members due to hostile action. The crew of Spirit 03 constituted the majority of those losses. Spirit 03 was part of the 16th Special Operations Squadron based at Hurlburt Field.

The tragic downing “Spirit 03,” resulted in the loss of 14 dedicated U.S. Air Force Special Operations Personnel. The crew members were:

Maj. Paul Weaver

Capt. Cliff Bland

Capt. Arthur Galvan

Capt. William Grimm

Capt. Dixon Walters

Senior Master Sgt. Paul Buege

Senior Master Sgt. James May

Tech. Sgt. Robert Hodges

Tech. Sgt. John Oelschlager

Staff Sgt. John Blessinger

Staff Sgt. Timothy Harrison

Staff Sgt. Damon Kanuha

Staff Sgt. Mark Schmauss

Sgt. Barry Clark

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For more information and how to donate to the children go to <https://specialops.org/>

Virginia

VETERAN SUICIDE DATA SHEET, 2022



The U.S. Department of Veterans Affairs (VA) is leading efforts to understand suicide risk factors, develop evidence-based prevention programs, and prevent Veteran suicide through a public health approach. As part of its work, VA analyzes data at the national and state levels to guide the design and execution of the most effective strategies to prevent Veteran suicide.

The 2022 state data sheets present the latest findings from VA’s ongoing analysis of suicide rates and include the most up-to-date state-level suicide information for the United States.^a This data sheet includes information about Virginia Veteran suicides by age, sex, and suicide method and compares this with regional and national data.

Southern Region

- Alabama
- Arkansas
- Delaware
- District of Columbia
- Florida
- Georgia
- Kentucky
- Louisiana
- Maryland
- Mississippi
- North Carolina
- Oklahoma
- South Carolina
- Tennessee
- Texas
- Virginia
- West Virginia

After accounting for age differences,^b the Veteran suicide rate in Virginia:

- Was significantly lower than the national Veteran suicide rate
- Was significantly higher than the national general population suicide rate

Virginia Veteran Suicide Deaths, 2022

Sex	Veteran Suicides
Male	173
Female	11
All	184

Virginia, Southern Region, and National Veteran Suicide Deaths and Rates by Age Group, 2022^c

Age Group	Virginia Veteran Suicides	Southern Region Veteran Suicides	National Veteran Suicides	Virginia Veteran Suicide Rate per 100,000	Southern Region Veteran Suicide Rate per 100,000	National Veteran Suicide Rate per 100,000
18–34	31	413	849	41.9	50.9	47.6
35–54	63	699	1,670	29.0	31.8	35.5
55–74	48	954	2,263	18.0	30.2	31.2
75+	41	672	1,597	30.6	36.0	33.8
All	184	2,752	6,407	26.6	34.3	34.7

Virginia Veteran and Total Virginia, Southern Region, and National Suicide Deaths and Rates by Age Group, 2022^c

Age Group	Virginia Veteran Suicides	Virginia Total Suicides	Southern Region Total Suicides	National Total Suicides	Virginia Veteran Suicide Rate per 100,000	Virginia Suicide Rate per 100,000	Southern Region Suicide Rate per 100,000	National Suicide Rate per 100,000
18–34	31	348	5,525	13,623	41.9	17.4	18.7	17.7
35–54	63	367	6,314	15,966	29.0	16.4	19.4	19.0
55–74	48	309	5,183	13,260	18.0	15.7	18.0	17.5
75+	41	130	2,049	5,042	30.6	21.4	22.5	21.0
All	184	1,154	19,071	47,891	26.6	16.9	19.1	18.4

Infectious Diseases and Gulf War Veterans

VA presumes the following infectious diseases are related to military service in the Southwest Asia theater of operations during the Gulf War August 2, 1990 to present and in Afghanistan on or after September 19, 2001.

Veterans must have the diseases within the time frames shown below **and** have a current disability as a result of that disease in order to receive disability compensation.

Malaria

An infectious disease caused by a parasite transmitted by mosquitoes. Symptoms include chills, fever, and sweats. It must be at least 10 percent disabling within **one year** from the date of military separation or at a time when standard or accepted treatises indicate that the incubation period began during a qualifying period of military service.

Brucellosis

A bacterial disease with symptoms such as profuse sweating and joint and muscle pain. The illness may be chronic and persist for years. It must be at least 10 percent disabling within **one year** from the date of military separation.

Campylobacter Jejuni

A disease with symptoms such as abdominal pain, diarrhea, and fever. It must be at least 10 percent disabling within **one year** from the date of military separation.

Coxiella Burnetii (Q Fever)

A bacterial disease with symptoms such as fever, severe headache, and gastrointestinal problems such as nausea and diarrhea. In chronic cases, the illness may cause inflammation of the heart. It must be at least 10 percent disabling within **one year** of the date of military separation.

Mycobacterium Tuberculosis

An illness that primarily affects the lungs and causes symptoms such as chest pain, persistent cough (sometimes bloody), weight loss and fever.

Nontyphoid Salmonella

A condition characterized by symptoms such as nausea, vomiting, and diarrhea. It must be at least 10 percent disabling within **one year** of the date of military separation.

Shigella

A condition characterized by symptoms such as fever, nausea, vomiting, and diarrhea. It must be at least 10 percent disabling within **one year** of the date of military separation.

Visceral Leishmaniasis

A parasitic disease characterized by symptoms such as fever, weight loss, enlargement of the spleen and liver, and anemia.

West Nile Virus

A disease spread by mosquitoes characterized by symptoms such as fever, headache, muscle pain or weakness, nausea, and vomiting. Symptoms may range from mild to severe. It must be at least 10 percent disabling within **one year** from the date of military separation.

VA benefits

Gulf War Veterans may be eligible for a variety of VA benefits, including a Gulf War Registry health exam, the redesigned Airborne Hazards and Open Burn Pit Registry (AHOBPR 2.0), health care, and disability compensation for diseases related to military service. Their dependents and survivors also may be eligible for benefits.

Gulf War Veterans are eligible for presumptive conditions due to exposure to airborne hazards. Find these conditions in the Health Care and Benefits section of the Airborne Hazards and Burn Pit Exposures web page.

Learn more about benefits related to Gulf War service.

Research on infectious diseases and Gulf War Veterans

VA contracts with the Health and Medicine Division (HMD) (formally known as the Institute of Medicine) of the National Academy of Sciences, Engineering, and Medicine to scientifically review evidence for possible connections between Gulf War Veterans’ illnesses and exposure to environmental agents or preventive medicine during military service.

Based on the HMD report, Gulf War and Health: Volume 5 Infectious Disease, the Secretary of VA established a presumption of service connection for nine infectious diseases related to qualifying military service in the Gulf War, Iraq and Afghanistan. The diseases are brucellosis, campylobacter jejuni, coxiella burnetii (Q fever), malaria, mycobacterium tuberculosis, nontyphoid salmonella, shigella, visceral leishmaniasis and West Nile virus. VA's final regulation took effect September 29, 2010.

View more research on health effects of Gulf War service.

(Source: https://www.publichealth.va.gov/exposures/gulfwar/infectious_diseases.asp)

A married couple are out one night at a dance club. There’s a guy on the dance floor giving it large: break dancing, moon walking, back flips, the works.

The wife turns to her husband and says, "See that guy? Twenty years ago he proposed to me and I turned him down."

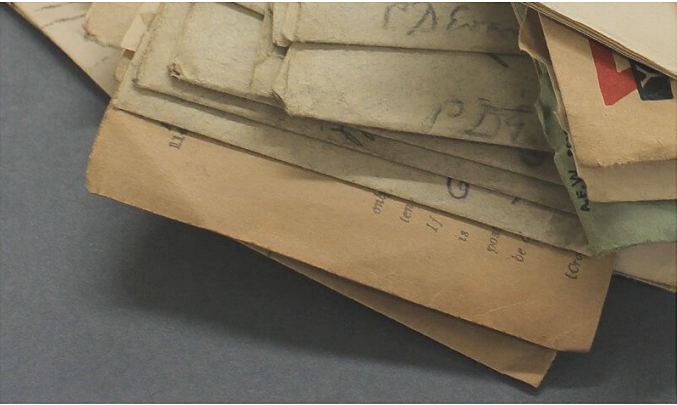
The husband says, "Looks like he’s still celebrating!"



Voices from Vietnam – A Marine’s Letter Home

Author: pdoggbiker

Paul Keaveney, of Smyrna Beach, Florida, served in Vietnam as a Lance Corporal with the 3rd Force Recon Company, First Marine Division. In February of 1970, during a patrol in the A Shau Valley, he and his fellow Marines ended up in a firefight with NVA. For his actions that day, he was awarded the Silver Star.



Written from his hospital bed, Keaveney’s letter to his parents is now part of the stage play Voices From Vietnam. A collection of interviews, letters, and stories from Vietnam Veterans, MIA families, Vietnamese refugees, and students, Voices From Vietnam is presented by Major Bruce H. “Doc” Norton, USMC (Ret), a decorated Vietnam War veteran, author, and former oral historian for the Marine Corps, and Dr. Harry Kantrovich, a retired Chief of Naval Operations Command Master Chief, playwright, and award-winning director. The play will have its world premiere at the Journey Theater in Warrenton, VA on November 8-24, 2024. A book of the same name is available from Academia Press and online booksellers.

Dear Mom & Dad,

I hope this letter will find you doing well and enjoying those sunny days in Florida. I am fine, but I am dictating this letter to a Navy nurse who has been kind enough to listen to my story and write it down for you.

I am in the Naval Hospital in Yokosuka, Japan, and being treated for some injuries that I received on the 7th of February. Our team, Snakey, was inserted by helicopter into the A Shau Valley that morning to conduct a reconnaissance of an area used by the NVA. We had only been on the ground for less than an hour when our point man began walking down a trail made by the NVA.



I told the Marine in front of me to tell Cpl. Bishop to stop this action and to get off the trail, but no sooner had he moved forward when the NVA sprung an ambush on us. I was the first one hit, in my right leg, just a few inches above my knee, and down I went. Then all hell broke loose. Sgt. Garcia, the point man, returned fire with his M-14, but he was killed, then Bishop was shot and killed. I told Lance Corporal Fuhrman to get the radio off of Bishop’s body so I could call for air cover and an emergency extraction. As Fuhrman moved to get the radio, he too, was killed. That left Lance Corporal Silva and Private First Class Murray and me to stay in the fight.

I had my M-79 grenade launcher with me and began to fire at a machine gun position, but then I was hit in the right arm, just above the elbow. I was still able to reload and continue to fire, but I was hit in my left arm, making me pretty useless. I was able to use secondary radio and got an immediate response from US Army helicopters still flying near our area. They came in with rocket and machine gun fire to suppress the NVA company that we had walked into.

While waiting for an Army “Blue Team” to arrive from Camp Eagle, I was hit again, and this time it was on my right side with the bullet exiting out near my spine. Last, but not least, I was hit for a fifth time, but that round hit my holstered .45 and set off two rounds in the pistol’s magazine.

The most incredible thing to happen was when three NVA soldiers ran up the hill to me, carrying AK-47 rifles. They stood in front of me, looked at me, and then ran back down the hill to wherever they had come from. It happened so fast that neither Silva or Murray fired at them. They certainly could have killed me.

The “Blue Team” arrived about two hours later, coming with a reinforced platoon of Army infantry from Delta Company. They made their way to our position and called in a Huey helicopter and lowered a jungle penetrator to hoist me up and into

the Med-evac bird. When I was about ten feet up, I fell off and landed in a heap on the ground. They tied me in a little better and the second attempt was successful. I was taken to the Army's 85 Evac Hospital in Phu Bai, and into surgery to remove two of the three bullets that had hit me. Two days later, I was able to attend a Company Memorial Service for eight Marines from 3rd Force Recon Company who had been killed within a week's time.

Today, I am fine. My wounds have been addressed and I'll be leaving here soon for a Naval Hospital in Florida.

Please do not worry. The tough part is over and I'll be home soon enough. Say a prayer to the guys who are still there, as they need all the help they can get.

I'll see you soon. Love,
Paul

(Source: <https://cherrieswriter.com/2025/01/04/voices-from-vietnam-a-marines-letter-home/>)

Silver Medal Citation
Paul Sproules Keaveney

Silver Star
AWARDED FOR ACTIONS
DURING Vietnam War
Service: Marine Corps
Rank: Lance Corporal
Division: 1st Marine Division



GENERAL ORDERS:
CITATION:

The President of the United States of America takes pleasure in presenting the Silver Star to Lance Corporal Paul Sproules Keaveney (MCSN: 2476234), United States Marine Corps, for conspicuous gallantry and intrepidity in action while serving as a Reconnaissance Man with the Third Force Reconnaissance Company, FIRST Marine Division in connection with military operations against the enemy in the Republic of Vietnam. On 7 February 1970, Lance Corporal Keaveney was a member of a reconnaissance team which was conducting a patrol in the A Shau Valley in Thua Thien Province when the Marines came under intense fire from a numerically superior North Vietnamese Army force, pinning down the team and wounding four Marines, including Lance Corporal Keaveney. Despite his painful wound, he moved to a vantage point along the trail from which he could more clearly observe the movements of the enemy and from which he could more accurately deliver fire with his grenade launcher. With complete disregard for his own safety, Lance Corporal Keaveney boldly stood in full view of the hostile force on three separate occasions, and fearlessly remained in his precarious position while the enemy concentrated their fire

on him, and delivered his grenade launcher fire with such devastating effectiveness that the North Vietnamese were prevented from advancing down the trail toward the Marines' position. Each time he stood, he was struck by hostile small arms fire, but, undeterred by his serious wounds, he would again resolutely stand to deliver fire. When the nature of his wounds finally rendered him unable to fire his weapon, Lance Corporal Keaveney obtained the radio from the operator, thereby freeing a fellow team member to more actively engage the enemy while he requested helicopter gunship support and medical evacuation helicopters. His aggressive fighting spirit and valiant actions inspired all who observed him and were instrumental in the defeat of a numerically superior North Vietnamese Army force. By his dauntless courage, bold initiative, and unwavering devotion to duty in the face of great personal danger, Lance Corporal Keaveney upheld the highest traditions of the Marine Corps and of the United States Naval Service.

(This article originally appeared in THE VETERANS BREAKFAST CLUB magazine on 11/6/24: <https://veteransbreakfastclub.org/voices-from-vietnam/>)



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A man and a woman are sleeping together when suddenly there is a noise in the house, and the woman rolls over and says, "It's my husband, you have to leave!"

The man jumps out of bed, jumps through the window, crawls through the bushes, and out on the street, when he realizes something.

He goes back to the house and says to the woman, "Wait, I'm your husband!"

She replies giving him a dirty look, "So why did you run?"

the
WAR HORSE

We Trudged Through an Unknown, Unexperienced Evil—Unaware How That Evil Took Hold in Us

By Joseph Simbol Jr.

The following essay was written by Joseph Simboli Jr., one of the members of the 89th Infantry Division who liberated Ohrdruf, the first Nazi concentration camp to be discovered by American forces in April 1945. For decades, Simboli struggled with the internal turmoil of what he saw and couldn't prevent on that sunny April morning in 1945, according to his family.

Simboli never shared his wartime story in detail, until he lost his wife Geraldine at age 84 in 2019. The day after her funeral, Simboli pulled out decades of personal writings and artifacts from WWII.

Before Simboli died in May of 2021, his family asked if he would like to see his work published. He smiled and waved his hand, his family said. "No one would want to read my musings," he said. "Well, unless you think so. Then, please!"



Joe Simboli sits next to a 40 mm cannon at Camp Davis, N.C., before he deployed. Photo courtesy of Michele DeMarco.

April 4, 1945.

It was a beautiful, sunny morning in Ohrdruf, Germany, and my unit, the 89th Infantry Division, was on patrol. We had just moved south to investigate conflicting reports that a Nazi concentration camp existed nearby. Rumors of such camps had circulated, but we had found none. German fighter planes had

been strafing overhead—no doubt a last-ditch attempt to keep their genocide secret from the world.

We had stayed in our covered positions, biding time until the attack ended. The deluge of mortar no longer made my legs vibrate uncontrollably, the way they did the initial many times a shell burst inches from my body. When the thunder ceased and the clouds of smoke cleared, and we resumed our movements deeper into the country, my legs buckled again. This time it wasn't because of mortar. It was from the waves of the most putrid smell I could never possibly imagine.



Joe Simboli. Photo courtesy of Michele DeMarco.

Rotting flesh, burned feces, stale urine, and dirty laundry all conspired to burn my nostrils and throat like an inferno. My stomach felt as though I was on an elevator that couldn't find its desired floor. It took everything I could do not to throw up.

Then again, maybe the reason I didn't throw up was because, as we approached the unimpressive-looking camp, and then crossed through the surrounding 15-foot-high wire fence into its grounds, I struggled to feel anything at all. My mind had frozen: I simply couldn't process what I was seeing.

Bloodied and wet, half-naked, and emaciated bodies, some still warm, in tattered striped clothing, frozen in unnatural positions, were piled haphazardly on the ground in what appeared to be the main assembly area of a camp. Whether they were men or women wasn't clear. The hand of an older individual with a gaping head wound fought its way through the mound to be seen. Railroad ties, like a makeshift pyre, were strewn with hastily half-burned and decomposing victims. There were more skeletal dead bodies buried in common pits, with hands, torsos, limbs all sticking out.

I don't know that you can know a life-changing moment when it's happening. It seems as if it would be impossible, because most kinds of impactful moments have some level of disbelief—or else because overwhelming feelings, like sheer horror and revulsion, don't allow your mind to process everything that's happening. I know the profundity of what I saw in Ohrdruf that morning was completely lost on me right then,

#wedothattoo

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and, in truth, in the days and weeks, even months, that followed. None of us there had any prior idea of the atrocities being inflicted. We had no reliable reports; no photos or videos had been splashed all over the media to document it, as we have today. No history books had laid them out in photographic accounts, as my children and their children have now seen. We trudged through an unknown, unexperienced evil—unaware, with every step, how that evil took hold in *us* and shaped our attitude, beliefs, and future actions.



Family friend Michele DeMarco sits in Joe Simboli’s family home in Cheyney, Penn., surrounded by the stories Simboli pulled out the day after his wife passed away. Photo by Andrew Simboli, courtesy of Michele DeMarco.

A week after we found the camp, people still vomited at the sight and stench of the “[beating shed](#),” as prisoners later said that small building was called: 115 strokes as punishment with a sharp-bladed shovel for a minor infraction. Gen. George Patton was among those [throwing up](#) when [he visited with President Dwight Eisenhower](#) and other generals soon after we arrived. We learned much from the surviving prisoners about Ohrdruf and the terror that had occurred in the days leading up to our arrival.

Ohrdruf was a forced labor camp and a subcamp of [Buchenwald](#), which would later be recognized as one of the largest Nazi concentration camps. At one time, Ohrdruf had around 12,000 prisoners, but when news of our approach came in late spring of 1945, the Nazis began a systematic evacuation of the camp—as barbarically systematic as the slaughter in camps themselves.

A few days before our arrival, [nearly 10,000](#) prisoners were marched to Buchenwald, 30-something miles from Ohrdruf—I should say those who were capable of walking. The SS guards machine-gunned those too ill or disabled to make the trip. Some prisoners escaped along the way, hiding in the woods for days, only to reappear at the camp after we arrived. Others were gunned down during the march. The SS guards must have been told to “cover up” their atrocities, hence the lye on the bodies in the beating shed and the makeshift pyre of railroad ties with heaps of half-burned bodies. Apparently, prisoners had been forced to exhume decomposing bodies and cremate them.

But the SS guards gave up the effort and left the grisly remains for all to see.

Gen. Patton commanded the burgermeister—similar to a town mayor—his wife, and the surrounding townsfolk to come to Ohrdruf to see what their fellow countrymen had done to their other innocent countrymen, and to dig graves for the dead. The idea that these and other townspeople might have prevented the mass slaughter by not turning a blind eye to what, by most accounts, was whispered throughout the countryside, left a burning fury inside me for decades. We learned the [burgermeister and his wife killed themselves](#) that night, a small justice.

Looking back, I’m not sure if something died in me that night as well, or if something new was born. I was numb after Ohrdruf. We all were. It’s hard to figure something like that out, especially when you can’t feel much at all.



Joe Simboli holds a picture of himself in a tank. Photo by Andrew Simboli, courtesy of Michele DeMarco.

Then again, we didn’t have much time to consider it. After Ohrdruf, we expected to head to Japan. But with the bombings of Hiroshima and Nagasaki, and the country’s formal surrender to the Allies, our unit and others were rotated to the French coast, awaiting ships to be transported back to the United States. The thought of home was surreal. Going back to “normal life” was what so many of us talked about for so long, and yet after everything we experienced, how do you ever just “go back”?

When I joined the service, I was just a 20-year-old boy from Pennsylvania who had been wide-eyed about life, looking for adventure, caught up in the swell of patriotism of the war raging in Europe and Japan. I had spent a year dodging bullets and bombs, detonating mines, and setting up booby traps, road-blocks, and [pillboxes](#). I’d lost my best friend on the first day of combat and hundreds more in one night while crossing the Rhine River during [Operation Varsity](#). I’d hidden in cellars along the Moselle River bank and listened to church bells toll as our battalion climbed into small, unreliable boats, paddling for our lives as the sky lit up with fire.

I saw everything that war does to people: fear, rage, guilt, barbarism. By the grace of God, I made it through, for the most

part physically unscathed. But what I encountered that first day at Ohrdruf, I still, at 94 years old, can’t wrap my head around; it caused an invisible wound unlike anything I’ve known, one that I struggle to put words to even now.

We didn’t go home as planned, at least not then. Our company was diverted back to Ohrdruf. *Back to that hellscape?* The thought brought back the queasiness, which was made worse when we arrived: The stench was still there, months later. Memories of those heaps of bodies and body parts, the beating shed, the brass knuckles, the indignity of it all and utter disregard for human life came flooding back, as did the burning inside.

Our mission this time was to rebuild the fence around the camp that had been destroyed by an attack. As we began, groups of German women, who had worked in the concentration camps for the Nazis, were brought in to be held. Looking back through the journals I kept of the war after I returned home, I see that I described these women as “unusually tough.” In hindsight, that was a very polite way to describe what these individuals were. As we worked to rebuild the fence, they lobbed the most despicable verbal assaults at us with the force their male compatriots did earlier from the skies. Profanity—I won’t recall it here—unlike anything I’d heard.



A clipping from Yankee Magazine shows Joe, kneeling, and a fellow soldier removing a landmine. Photo courtesy of Michele DeMarco.



Joe Simboli’s World War II memorabilia. Photo by Andrew Simboli, courtesy of Michele DeMarco.

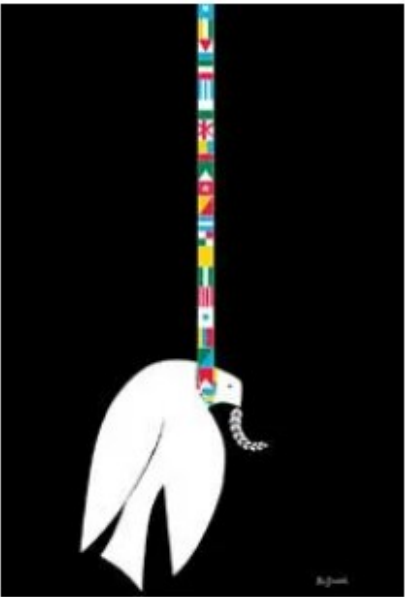
They taunted us, ruining our work, undermining our efforts, even throwing pieces of the poles we had just trimmed and cleaned up, back over the fence. There was no remorse for

what the Nazis had done and what these women oversaw the Nazis do and facilitated their being able to do, no humility in their country’s fall from power and respect on the world stage. As far as I could see, there was not a stitch of humanity left in them. Again, that burning inside took hold. I wanted to strike out at them, silence their vile spewing, make them pay, hold their hands to the pyre of accountability, not just for their petty insults thrown at us, but for the holocaust they and others wrought.

It’s an animalistic urge that makes you want to take this kind of action, and as a man, especially, to take it against women. It certainly went against all my beliefs and codes of honor. A bunch of us griped repeatedly to our officers to be allowed to do *something*, but we were shut down and told not to react. But for the previous year, all we had done was “react” against the enemy—that’s what we were trained to do. And now, even with the enemy in our sight, still “threatening” us, with full knowledge of the worst that they had done, we still couldn’t do anything but swallow our anger, disgust, and contempt and continue reconstructing their pen.

I will never comprehend the manifestations of the Holocaust. And the memories of Ohrdruf’s liberation have never gone away; in fact, they are the ones that have remained with me most clearly and intensely and, as I’ve come to see, shaped many of my most ardent beliefs and actions. The nightmares have lessened and faded, but the existential nausea that I felt that first day has returned over and over, sparked by sights, sounds, smells, and events. These memories have been, and will always be, with me, like the spiked brass knuckles I found that they used in the beating shed.

I mentioned that I wasn’t sure if something died in me during my time at Ohrdruf, or if something new was born. After I got home, back to Pennsylvania, and tried to create a new “normal” life (I married an amazing woman, had five children, and worked as an artist and craftsman alongside my wife), I realized that it was both. My innocence died with the Nazis’ slaughter of the innocent lives I saw in the camp, and the millions of other innocent lives slaughtered in the Holocaust. They couldn’t prevent it from happening, nor could they do anything to help themselves when it was happening.



The U.S. National Commission for UNESCO awarded this poster by Joseph Simboli first place in an international poster contest. Photo courtesy of Michele DeMarco.

And I couldn’t have prevented it from happening. That raw, burning outrage that I had swallowed in Ohrdruf could either consume me or help me and others to live.

When faced with the impossible or the unthinkable, you have two choices: You can lose faith—in yourself, others, life, and God—or you can turn to faith to find meaning and purpose. There have been times when I’ve felt the former taking over. But when I got home from the war, I made a vow to myself that if ever I saw anything like this again, the widespread defilement of human dignity and life, I would have to do something about it.

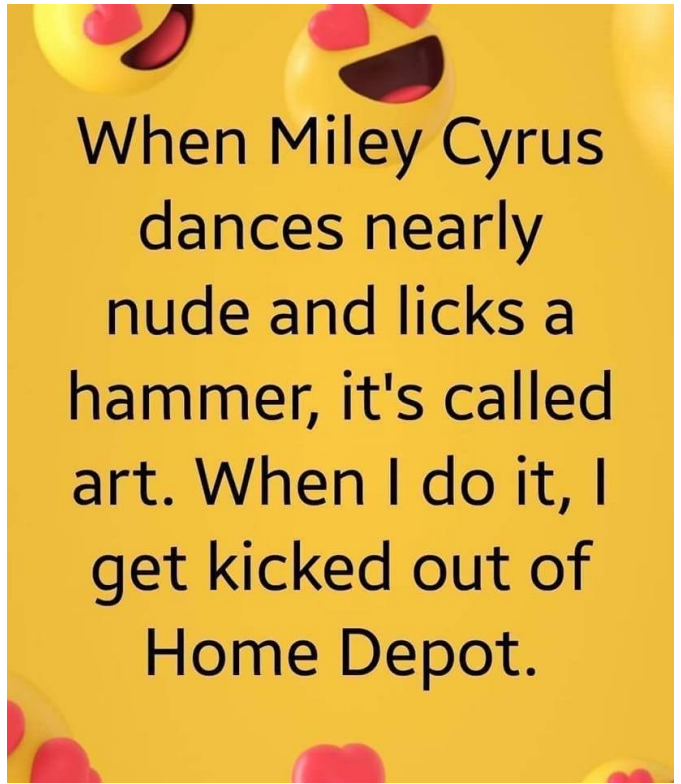
I couldn’t prevent the horrific mass slaughter by the Nazis, but my memories of it and that burning outrage I still feel about it could serve as an inspiration to protect life, in all its various forms, especially the innocent. This is what I’ve done, whether that is in my art or community and political advocacy, along with my wife, for the last seven and a half decades.

A small honor to the lives that were lost. A great reminder to everyone that life is always worth living.

Joseph Simbol Jr.

Joseph Simboli, 1925-2021, enlisted in the U.S. Army at age 17, and then served in World War II with the 89th Infantry Division. He attended and taught at the Philadelphia Museum School of Art, and then established, with his wife Gerry, their art studio, Simboli Design. He also enjoyed running and racing sports cars.

(Source: <https://thewarhorse.org/nazi-concentration-camp-liberation-soldier-recalls-ohrdruf/>)



Marine Corps program will allow senior enlisted to keep serving without reenlistment paperwork

By LYDIA GORDON STARS AND STRIPES

Senior enlisted Marines will soon be able to apply for reenlistments that extend their service to the end of their rank’s time limitations, eliminating the need for periodic extensions.

The Enlisted Career Designation Program for career Marines will begin accepting applications on June 1.

Though it’s designated a pilot program, it appears to be structured as a permanent change.

Under the new policy, master sergeants and first sergeants may serve up to 27 years on active duty, while master gunnery sergeants and sergeants major may remain on active duty for 30 years, without having to ask for periodic extensions.

To be eligible, Marines in those ranks must have at least 15 years of service or have spent two years in their current grade, with a contract set to expire before Sept. 30, 2026, according to an administrative message issued Saturday.

“The program offers career Marines a more streamlined retention process, reducing uncertainty and administrative burdens by allowing them to voluntarily commit to long-term service,” Sgt. Maj. of the Marine Corps Carlos Ruiz said in a Feb. 21 service statement.

All ranks will still be able to request resignation or retirement six to 18 months in advance provided they fulfill their obligated service requirements, the statement said.

Ruiz added that the initiative supports the Marine Corps’ talent management strategy, which prioritizes retaining experienced, highly skilled Marines.

A deadline for the first round of applications has not yet been announced.

Marine Corps Manpower and Reserve Affairs officials did not respond to questions this week about the duration of the pilot period, the application deadlines and any associated incentives to apply.

Other services have implemented similar programs in recent years to eliminate periodic reenlistments. The Army’s Career Status Program allows soldiers E-6 and above with 10 years of service to apply for an indefinite extension.

(Source: https://www.stripes.com/branches/marine_corps/2025-02-27/marines-launch-reenlistment-pilot-program-16971179.html)

Used with permission from Stars and Stripes. Visit their website at www.stripes.com

A man approached a very beautiful woman in a large supermarket and said, "I've lost my wife here in the supermarket. Can you talk to me for a couple of minutes?"

"Why do you want to talk to me?" she asked puzzled.

"Because every time I talk to a beautiful woman, my wife appears out of nowhere."

Request your military service records (including DD214)

You can request a copy of your DD214 and other military service records from the National Archives.

Types of information you can get

You can request your military service records to get information like this:

- Your character of discharge (from your DD214 or other separation documents)
- Your duty stations and assignments
- Your medals and decorations (awards)
- Your qualifications, licenses, and certificates

How to request your records from the National Archives

You can request records from the National Archives online, by mail, or by fax.

Note: If you’re submitting an application for VA benefits, we’ll request your DD214 for you when we receive your application. You don’t need to do this yourself through the National Archives.

Option 1: Request your records online

You can request your military service records online using the National Archives’ eVetRecs tool. When you get to eVetRecs, select Make a new request. Go to this website:

<https://vetrecs.archives.gov/VeteranRequest/home.html>

Option 2: Fill out the National Archive’s request form (to mail or fax)

Fill out a Request Pertaining to Military Records (Standard Form 180). Go to this website to get the form:

<https://www.va.gov/find-forms/about-form-sf180>

Mail or fax your completed form to the appropriate address or fax number listed on the last page of the form. To find the right address or fax number for you, you’ll need to use the first chart on that page to find your branch of service, separation date, and type of record.

If you were discharged after any of these dates, you can request your records from the DOD through the milConnect website:

- If you were in the Air Force and discharged after October 1, 2004, or
- If you were in the Army and discharged after October 1, 2002, or
- If you were in the Marines and discharged after January 1, 1999, or
- If you were in the Navy and discharged after January 1, 1995

Go to this website <https://milconnect.dmdc.osd.mil/milconnect/>

Note: You’ll need a Premium DS Logon account to request your records through milConnect. If you don’t have a Premi-

um DS Logon account, you can learn more about creating DS Logon accounts on the DS Logon website at:

<https://www.dmdc.osd.mil/identitymanagement/app/login>

How do I request records if I served in the Marines from 1998 to the present or the Coast Guard from 2008 to the present?

Contact your personnel command for your records. You can also request your records from the National Archives and they’ll send your request to your personnel command.

How do I request someone else’s records?

If you’re a family member planning a burial for a Veteran in a VA national cemetery

If you don’t have the Veteran’s records to provide to the National Cemetery Scheduling Office, they will try to locate the records they need to determine eligibility for burial benefits. You don’t need to request the Veteran’s military service records yourself.

Call our National Cemetery Scheduling Office at 800-535-1117 (TTY: 711). We’re here Monday through Friday, 8:00 a.m. to 7:30 p.m. ET, and Saturday, 9:00 a.m. to 5:30 p.m. ET.

You can get more information about planning a burial at this website:

<https://www.va.gov/burials-memorials/schedule-a-burial>

If you’re the next of kin of a Veteran who has died

You may be considered the next of kin if you’re related to the Veteran in any of these ways:

- You’re the Veteran’s surviving spouse and you haven’t remarried, or
- You’re the Veteran’s parent, or
- You’re the Veteran’s child, or
- You’re the Veteran’s sibling
- You can request a copy of the Veteran’s military records from the National Archives online, by mail, or fax.

Learn more about how to request military service records from the National Archives at this website:

<https://www.va.gov/records/get-military-service-records#how-to-request-your-records-fr>

You can also request their military records in any of these ways:

- Visit the NPRC in person
- Contact your state or county Veterans agency
- Hire an independent researcher

When you request the Veteran’s records, you’ll need to provide a copy of one of these documents:

- Death certificate or other public record of the Veteran’s death, or
- A letter from a funeral home

Navy secretary nominee says he can fix shipbuilding, recruiting problems despite no military experience

By SVETLANA SHKOLNIKOVA STARS AND STRIPES

WASHINGTON — John Phelan, a businessman with no military experience, said Thursday that he would use his background in the private sector to “step outside the status quo” if he is confirmed as the next secretary of the Navy.

Phelan, 61, told the Senate Armed Services Committee that he understood why some might question why a businessman who never wore a military uniform would want to lead the Navy and he respected those concerns.

But he said he wanted to apply his management and leadership experience in investment firms to solve systemic failures that had long plagued the Navy and Marine Corps.

“The Navy and the Marine Corps already possess extraordinary operational expertise within their ranks,” he said during his confirmation hearing. “My role is to utilize that expertise and strengthen it, to step outside the status quo, to take decisive action with a results-oriented approach.”

If confirmed, Phelan would be the first person in more than 15 years to lead the Navy without having served in any branch of the military. The most recent Navy secretary, Carlos Del Toro, was a retired Navy officer who served for more than 20 years.

Phelan is the founder of several investment firms and serves on the board of Spirit of America, a nonprofit that works with troops and diplomats. He was also a major donor to the 2024 re-election campaign of President Donald Trump, who said Phelan would “put the business of the U.S. Navy above all else.”

Phelan said he intended to focus his efforts as Navy secretary on shipbuilding, recruiting and passing a department-wide audit. The position is responsible for overseeing more than 900,000 people and an annual budget of more than \$200 billion.

Senators on Thursday focused much of their questioning on the Navy’s troubled shipbuilding programs, nearly all of which have been wracked by delays for years and are consistently over budget.

Phelan said he believed the Navy was not acting urgently enough to address the issue and appeared to suffer from a culture of complacency.

China, considered America’s top military competitor, is rapidly growing its fleet and is on pace to surpass 400 ships this year. The U.S. Navy was supposed to have a fleet of 315 ships by 2025 but only has 287.

“It’s almost as if we’re waiting for a crisis to happen to ignite things and I think in the business of warfare, that’s a dangerous place to be,” Phelan said. “I would bring a sense of urgency to this. I would bring a sense of accountability to this.”

Phelan said he could not comment on the Pentagon’s plans to drastically reduce its civilian workforce, potentially by more than 70,000 people, but committed to sitting down with Defense Secretary Pete Hegseth to ensure shipyards would not be negatively impacted.

When pressed by several Democratic senators about the planned firings, Phelan said he did not know enough about them to say if he supported the cuts or not.

He expressed interest in growing the Navy’s enlisted ranks, however, and said he would use the service’s 250th anniversary this year to showcase the benefits of service.

The Navy is on track to meet its recruiting goals for a second straight year but has also loosened requirements, accepting recruits with lower test scores and those who did not have high school diplomas or a GED diploma or certificate.

Phelan said it was “critical” to have high standards. He said he wanted to learn from the Marine Corps, which has not struggled with recruiting like the Navy and has built a recognizable brand by working with the same advertising agency for 30 years.

“The Marines put some of their best leadership in the recruiting role and that’s one of the reasons why they do so well with it,” he said. “So I’m going to try to adapt some of the best practices we get from other services and from my business experience in how to attract and retain talent.”

Sen. Roger Wicker of Mississippi, the Republican chairman of the committee, said Phelan’s nontraditional background was sorely needed in the Navy.

“I’m pleased with the nominee’s track record,” Wicker said. “He has rescued companies in distress. Our Navy is certainly in distress and we need that same kind of leadership.”

(Source: <https://www.stripes.com/branches/navy/2025-02-27/navy-secretary-trump-senate-16974147.html>)

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Suicide Deaths in Special Operations Forces (SOF)

By Dr. Ramya Sundararaman Deputy, Director Defense Suicide Prevention Office

Service Members | 2022

492 Total Service members

331 Active | 64 Reserve | 97 Guard

Suicide rates per 100,000

25.1 **Active Component**
Service members

19.1 **Reserve**
Service members

22.2 **National Guard**
Service members

Key Takeaways

Active Component suicide rates gradually increased between 2011-2021. Since 2011, rates are similar to the U.S. Population in most years

Firearms are the most common method used in 67% of Active Component suicide deaths.

Demographic factors largely reflect the Total Force:
68% Under 30
91% Enlisted
93% Male

Family Members | 2021

168 Total Family Members

114 Spouses | 54 Dependents

Suicide rates per 100,000

6.5 **Family Members**
spouses and dependents

11.2 **Spouses**

3.4 **Dependents**

Key Takeaways

Suicide rates for Family members appear slightly lower than in previous years.

Male spouses accounted for about 48% of spouse suicides but made up about 14% of all military spouses.

Firearms are the most common method used in 61% of Spouse suicide deaths and 56% of dependent Suicide deaths.

About 48% of Spouses had any service history and less than 5% of dependents had any service history.

According to SOCOM records, there were 117 suicides among Special Operations Forces (SOF) from 2007 to 2015, peaking at 23 in 2012 — a rate of 39.3 per 100,000, compared with 22.9 per 100,000 for the armed forces as a whole.

- Suicide deaths have increased over the past five years among the elite troops of Army’s Special Operations Command, or USASOC. In 2022, USASOC reported 18 suicide deaths, up from six in 2017 and 12 in 2018.

- Despite researchers' consistent assertions that SOF are highly resilient and at low risk for suicide, granular analysis of pertinent research and escalating suicide in SOF reveals no empirical basis for those beliefs.

Why Suicide?

58.7% had financial problems within 6 months of death. The most common reason for financial problems was because of relationship

issues.

72.5% were in a relationship at the time of death. Of those 51.7% were having relationship issues at the time of death.

48.2% SOF members felt a strained connection to the military within 6 months prior to their deaths. Some reasons were: problems with supervisor and colleagues, disciplinary actions, duty reassignments.

44.8% were diagnosed with a mental illness. Of those 36.4% were diagnosed with depression. Fear of being separated from their unit, being singled out as a problem, and of losing a security clearance were common barriers to seeking care.

(Source: <https://www.socom.mil/care-coalition/SiteAssets/Conference-2024/Suicide%20Prevention%20Dr.%20Sundrararaman.pdf>)

When a Veteran passes away, it can be a difficult time. VA understands and is here to help with navigating through challenges.

VA honors the sacrifices of service members’ and Veterans’ dependents and survivors through many benefit programs, which may be available to a surviving spouse, dependent children and/or parents.

Surviving family members may be eligible for certain VA [benefits](#) and programs, such as financial assistance, home loans, [education assistance](#), [VA Dependency and Indemnity Compensation \(DIC\)](#), or survivors [pension](#).

Summary of Survivors Benefits

Dependency and Indemnity Compensation

Monthly payment for the eligible surviving spouse, dependent children or parent(s) of the Veteran or service member IF the Veteran or service member died in the line of duty or due to a service-related injury or illness.

Accrued Benefits

A one-time payment to a surviving spouse, dependent children or dependent parents of a deceased Veteran based on relationship when the record shows additional benefits (such as VA compensation or pension) may have been due to the Veteran prior to passing.

Burials and Burial Allowance

Burial benefits available include a gravesite in any of our National cemeteries with available space, opening and closing of the grave, perpetual care; a government headstone, marker, or medallion; a burial flag, and a Presidential Memorial Certificate, at no cost. Some survivors may also be eligible for a plot allowance, transportation allowance, and burial allowances based on the service-connected disability status of the deceased Veteran.

Final Monthly Payment

If a Veteran who is receiving VA compensation or pension benefits passes away, their last month of benefits can be paid to their surviving spouse.

Education and Training

Chapter 35 benefits and the Fry Scholarship are the two main G.I. Bill programs offering educational assistance to survivors and dependents of Veterans who died in the line of duty or as a result of service-related disabilities.

Home Loan Guaranty

Home loan benefits are available for surviving spouses receiving DIC. Spouses of deceased Veterans who were on the VA-guaranteed loan can refinance their VA loan to obtain a lower

interest rate through VA’s Interest Rate Reduction Refinancing Loan (IRRRL).

If a surviving spouse is having trouble making their mortgage payments, VA can provide counseling to help avoid foreclosure—even if the loan isn’t a VA-guaranteed loan. Surviving spouses can contact a VA loan technician at 877-827-3702 anytime to discuss their loan. They can also send a message online through the [home loan guaranty support portal](#).

Health Care

Survivors and dependents of Veterans may qualify for health care benefits, such as VA’s Civilian Health and Medical Program, which shares the cost of most health care services and supplies with unmarried surviving spouses and children.

VA Caregiver Support Program

Advance care planning allows the caregiver and the Veteran to make important health care wishes known in advance, including assigning a trustworthy individual to make medical decisions for the Veteran if they are not able to. An advance directive is crucial for ensuring that the wishes and preferences of both caregivers and the individuals they care for are respected, particularly in times of medical crisis or incapacity.

Timely reporting and posthumous scams

VA is committed to protecting the legacy of Veterans and their loved ones. Spreading awareness of the need for the timely reporting of a Veteran’s death and posthumous scams are two more of the many ways VA supports survivors.

Timely reporting to VA helps family members avoid posthumous scams, which can cause additional financial and emotional stress during an already difficult time.

To learn more, please visit: [How To Report The Death Of A Veteran To VA | Veterans Affairs](#).

Best practices to avoid survivors benefits scams:

Save important files such as the Veteran’s military service/treatment records, discharge papers, and copies of their VA claims.

Go to [the VA website](#) for guidance on creating an account and obtaining a VA security Personal Identification Number (PIN) to securely access benefit information. A VA Security PIN is an additional way to secure direct deposit accounts from theft and protect Personally Identifiable Information (PII).

If a survivor is missing a VA benefits payment, identifies a discrepancy in payments, or finds suspicious activity with a direct deposit account, contact VA immediately at 800-827-1000.

For other scams predators use, visit www.VA.GOV/VSAFE.

VA mental health services

How to access VA mental health services for posttraumatic stress disorder (PTSD), psychological effects of military sexual trauma (MST), depression, grief, anxiety, and other needs. You can use some services even if you’re not enrolled in VA health care.

How do I talk to someone right now?

If you’re a Veteran in crisis or concerned about one, connect with our caring, qualified Veterans Crisis Line responders for confidential help. Many of them are Veterans themselves. This service is private, free, and available 24/7.

To connect with a Veterans Crisis Line responder anytime day or night:

- Call 988 and select 1.
- Start a confidential chat.
- Text 838255.
- For TTY, call 711 then 988.

You can also:

- Call 911.
- Go to the nearest emergency room.
- Go directly to your nearest VA medical center. It

doesn’t matter what your discharge status is or if you’re enrolled in VA health care.

Get connected with mental health care—no matter your discharge status, service history, or eligibility for VA health care.

If you need support for a specific mental health problem—or if you’re having problems sleeping, controlling your anger, or readjusting to civilian life—you are not alone. And we can help.

To access free VA mental health services right away:

- Call or walk in to any VA medical center—anytime, day or night.
- Call or walk in to any Vet Center during clinic hours.
- Call us at 877-222-8387. We’re here Monday through Friday, 8:00 a.m. to 8:00 p.m. ET. If you have hearing loss, call TTY: 800-877-8339.

You don’t need to be enrolled in VA health care to get care. Find out more at this website:

<https://www.va.gov/health-care/health-needs-conditions/mental-health/>

To connect with other resources for Veterans and transitioning service members go to these websites:

<https://www.militaryonesource.mil/>
<https://www.mentalhealth.va.gov/transitioning-service-resources.asp>

Getting Started

If you need support for a specific mental health problem—or if you’re having problems sleeping, controlling your anger, or readjusting to civilian life—you are not alone. And we can

help.

Over 1.7 million Veterans received mental health services at VA last year. Our services range from peer support with other Veterans to counseling, therapy, medication, or a combination of these options. Our goal is to help you take charge of your treatment and live a full and meaningful life.

How do I schedule my first appointment?

If you’re already using VA medical services, ask your primary care provider to help you make an appointment with a VA mental health provider.

If you’re not already using VA medical services, contact your nearest VA medical center or Vet Center to talk about your needs.

What if I’m not sure what kind of help I need?

You can call 877-222-8387 to find the right resources for your needs. If you have hearing loss, call TTY: 800-877-8339. We’re here Monday through Friday, 8:00 a.m. to 8:00 p.m. ET.

It’s hard for me to get to a VA facility in person. Can I get mental health services online?

Yes. You may be able to use one or more of the care options listed below.

- The Veteran Training online self-help portal for overcoming everyday challenges: You can use this portal’s tools to help manage your anger, develop parenting and problem-solving skills, and more. The tools are based on proven mental health practices that have successfully helped other Veterans and families. The portal is free, and you don’t have to sign in or provide any personal information to use the tools. Go to this website:

<http://www.veterantraining.va.gov/>

- Smartphone apps for Veterans: There are more tools than ever before to support your mental health. Complement your care with mental health apps. These resources can help you manage posttraumatic stress disorder-related symptoms and stress, learn to practice mindfulness, manage depression symptoms and more.

- The VA telemental health program: You can connect with a VA mental health provider through a computer or mobile device in your home or at your nearest VA health facility. If you’re enrolled in VA health care, ask any of your providers to help connect you with our telemental health program.

Can I speak to a fellow Veteran who’s been through this before?

Yes. The BeThere peer assistance program, in partnership with Military OneSource, offers support to service members (including National Guard soldiers and Reservists), their families, and transitioning Veterans up to 365 days after separation or retirement. Through this program, you can talk privately with peer coaches who are Veterans, service members, or military spouses.

To talk with a peer coach, call Military OneSource’s free, confidential peer support services at 800-342-9647. This service is

available 24 hours a day, 365 days a year.

What other options do I have?

Eligible service members, Veterans, and family members can visit one of our Vet Centers to get free individual and group counseling. You don’t have to be enrolled in VA health care or receive disability compensation to use these services.

Vet Centers offer these types of services:

- Individual and group counseling
- Couples and family counseling
- Military sexual trauma (MST) counseling
- Readjustment counseling, like mental health services, and educational and employment counseling
- Bereavement (grief) counseling
- Substance use assessment and referral
- Help applying for VA benefits

You can also call 877-927-8387 (TTY: 711) to talk with a fellow combat Veteran about your experiences, 24 hours a day, 7 days a week, 365 days a year.

If you’d like to connect with other Veterans, families, and local services, you can visit our Make the Connection website. This site connects millions of Veterans, and their family members and friends, to local VA and community mental health resources. Visit the site to access these referral resources and hear Veteran testimonials of strength and recovery. Go to this website:

<https://maketheconnection.net/>

Being diagnosed with a mental health condition or seeking mental health care doesn’t automatically put work-related credentials, such as security clearances, at risk. Most employers recognize that healthy employees who get help when they need it are more productive and effective in their jobs than those who aren’t performing at their best because they’re not feeling well.

Do I need to be enrolled in VA health care to access mental health care? No. If you don’t qualify for VA health care, you may still be able to get certain health care services, like care for needs linked to military sexual trauma.

Call our health benefits hotline at 877-222-8387 to find out what your care options may be. We’re here Monday through Friday, 8:00 a.m. to 9:00 p.m. ET.

Depending on your needs and situation, you can also:

- ◆ Get free private counseling, alcohol and drug assessment, and other support for combat Veterans and families at one of our 300 community Vet Centers.
- ◆ Contact the National Call Center for Homeless Veterans at 877-424-3838 for help 24 hours a day, 7 days a week. A trained VA counselor will offer information about VA homelessness programs, health care, and other services in your area. The call is free and confidential.
- ◆ Call or visit your local VA Community Resource and Referral Center. Even if you don’t qualify for VA health care, our staff can help you find non-VA resources you may qualify for in your community.

You’ll start receiving help the day you reach out to us. We

offer same-day services to make sure we can either address your mental health needs or schedule the right follow-up care right away. The specific care you receive will depend on how urgent your needs are and the level of treatment you’re looking for.

Same-day services may include care such as:

- Meeting face-to-face with a VA health care provider (including walk-in appointments at a clinic or urgent care center)
- Having a telehealth or video care appointment with a VA provider
- Talking by phone with a VA nurse who can offer medical advice (called “nurse triage”)
- Communicating with a VA provider through Secure Messaging
- Scheduling a future appointment
- Getting a prescription filled

We offer treatment and support for a range of mental health problems, including:

- Posttraumatic stress disorder (PTSD)
- Depression
- Thoughts of suicide
- Issues related to military sexual trauma (MST)
- Substance use problems
- Bipolar disorder
- Schizophrenia
- We also treat anxiety-related conditions, like:
- Generalized anxiety disorder
- Panic disorder
- Social anxiety
- Specific phobias

Resources and support outside VA

You can also get support from resources offered by other government departments and community organizations outside of VA.

Military OneSource

This free service provides expert support to connect military personnel and their families with the best available resources to fit their needs. For support, visit the Military OneSource website or call 800-342-9647 anytime, day or night. Go to this website:

<https://www.militaryonesource.mil/mental-health>

The National Suicide Prevention Lifeline

This 24/7, 365-day-a-year emergency mental health hotline offers support for people experiencing a mental health crisis.

To reach the hotline:

Start an online chat at <https://suicidepreventionlifeline.org/chat/> Or call 800-273-8255

The American Foundation for Suicide Prevention

The foundation provides mental health resources for people struggling with thoughts of suicide. They also offer supportive educational tools for concerned family, friends and peers. Go to this website: <https://afsp.org/>

(Source <https://www.va.gov/health-care/health-needs-conditions/mental-health/>)

Buying a home with a VA-backed loan	Shop for a home
Get step-by-step instructions for buying a home through the VA home loan program.	Look at houses in your price range until you find one that works for you. When comparing homes, be sure to consider what factors are most important to you and your family. These may include factors like how far you’ll need to commute to work and the quality of local schools.
You’ll need a VA-backed purchase loan	Steps to buying your home
You’ll go through a private lender, like a bank or mortgage company, to get this loan. We’ll guarantee part of the loan against loss, which will allow your lender to give you better loan terms, like the option to pay no down payment.	Once you’ve found the house you want to buy:
How can I buy a home with a VA-backed loan?	Work with your agent to put together and sign a purchase agreement
Buying a home is a complex process, and getting a VA-backed loan is only one piece of the puzzle. Stay on track by following the steps below.	Be sure the sales contract includes the “VA escape clause” or “VA option clause.” This provides an option to void the contract if the property doesn’t appraise for the contract price.Ask your real estate agent for advice on other options for voiding the contract you may want to include, such as if the property fails a home inspection. These options are called contingencies.To learn more, watch this helpful video: Using your VA home loan benefit: working with a Realtor and lender
Steps to starting the process and finding a home	Have the house inspected and appraised
Apply for your VA-backed home loan Certificate of Eligibility (COE)	We strongly recommend that you get an inspection to check for any major defects before you purchase your home. A VA-approved appraiser will also appraise the house to make sure it meets basic property condition requirements (called minimum property requirements, or MPRs), and will provide an opinion of value on the house. Please note that an appraisal isn’t the same as an inspection.If the property doesn’t appraise at a value that’s high enough to get the loan, you have a few options. You can:
You’ll need to show your COE to your lender as proof that you qualify for the home loan benefit. Find out if you qualify for a COE Apply for your COE now	Request a Reconsideration of Value (ROV). You can ask your real estate agent to provide the lender with valid sales data showing the property is worth more than its appraised price. The lender will ask the appraiser to reconsider based on this information.
Look at your current finances	Renegotiate the sales price. Ask the seller to lower the price to match the appraised value.
Go over your credit profile, income, expenses, and monthly budget to make sure you’re ready to buy a home. Decide how much you want to spend on a mortgage—and be sure to include closing costs in the overall price.To learn more: Find out current VA home loan limits Read about the VA funding fee and other loan closing costs Get more advice from the Consumer Financial Protection Bureau (CFPB) Use CFPB’s mortgage calculator	Pay the difference between the appraised price and the sales price. To do this, you’ll need to pay this cost at closing.To learn more, watch these helpful videos: VA home loans: What are MPRs? What’s the difference between VA’s appraisal process and a home inspection?
Choose a lender	Review pre-closing paperwork and give your lender any other needed information
Remember, you’ll go through a private bank, mortgage company, or credit union—not through us—to get your loan. Lenders offer different loan interest rates and fees, so shop around for the loan that best meets your needs.Be prepared to pay lender fees. Many lenders charge Veterans using VA-backed home loans a 1% flat fee (sometimes called a “loan origination fee”). Lenders may also charge you additional fees. If you don’t know what a fee is for, ask the lender. In some cases, lender fees are negotiable.To learn more: Read about the VA funding fee and other closing costs	Your lender must give you a Closing Disclosure at least 3 business days before closing. Be sure to read it carefully. It includes loan terms, fees, closing costs, and your estimated monthly mortgage payments. Your lender may also ask you to provide more information or documents at this time.
Choose a real estate agent	Close on your new home
Get recommendations for potential real estate agents online or from relatives, friends, and neighbors. Then meet with several agents to find one you like.Read all agreements before signing with an agent. Make sure you understand any charges, fees, and commissions as well as your rights and obligations in the buyer-agent relationship.	Your closing may be held at a title company, escrow office, or

attorney’s office. Be prepared to sign a lot of documents—and be sure to take the time to read everything before you sign.

To learn more:
[Go to Fannie Mae’s website](#)

Move in

After closing, you’re ready to move into your new home. Congratulations!

What if I need help or more information?

Call us at [877-827-3702](#) to find the nearest VA regional loan center. We’re here Monday through Friday, 8:00 a.m. to 6:00 p.m. ET.

You can also use the resources below to learn more about the VA home loan program and the home-buying process.

Call us at [877-827-3702](#) to find the nearest VA regional loan center. We’re here Monday through Friday, 8:00 a.m. to 6:00 p.m. ET.

You can also use the resources below to learn more about the VA home loan program and the home-buying process.

Visit these online resources

[Find housing counseling agency workshops](#) approved by the Department of Housing and Urban Development

[Download a home loan toolkit \(PDF\)](#) from the Consumer Financial Protection Bureau

[Get tools and resources for homebuyers](#) from the Consumer Financial Protection Bureau

Protecting Veterans from Romance Scams



VA Office of Information and Technology

In 2024, [53% of men and 47% of women](#) reportedly experienced some form of romance scam in an online dating environment. [Romance scams](#) targeting Veterans often begin innocently on dating apps or websites, social media platforms or even through email. Scammers create convincing personas and may pose as fellow Veterans, active duty military personnel, or indi-

viduals with shared interests and experiences. A con artist will invest time and effort into building rapport with a Veteran, gradually earning their trust and affection.

Examples of romance scams as [detailed by the Federal Bureau of Investigation \(FBI\)](#) could include a scammer impersonating a deployed member of the military or a celebrity, gaining the Veteran’s trust before eventually taking advantage of the romantic connection that has been created to request money. Some scammers will make plans to meet the Veteran or even propose marriage through messages. But the reality is they will likely never meet. The connection the Veteran believed in will be forever broken once the fraud is exposed.

If something feels off or too good to be true, Veterans must trust their instincts and use these tips to stay safe:

Exercise caution with unsolicited contacts: Be skeptical of unexpected messages or friend requests, particularly from those claiming to be military personnel or Veterans. Relationships that escalate rapidly warrant extra scrutiny. Always verify the identity of new online acquaintances, especially if they request money or personal information.

Protect your information: Refrain from sharing sensitive personal or financial details online, especially with individuals you haven’t met in person. [Learn how to spot and avoid scammers](#) on dating sites and social media who build trust, fabricate emergencies and request money. Be mindful about disclosing information related to your military service, family or finances.

Be cautious of financial requests: Approach requests for money or financial help with caution, especially if they come unexpectedly or seem excessive. A genuine romantic interest should not pressure you for financial assistance early in an online relationship.

Trust your instincts: If something seems too good to be true or raises red flags, trust your gut feeling. It’s wise to step back and assess the situation critically. Don’t hesitate to consult with trusted friends or family when in doubt.

Report suspicious activity: If you encounter any suspicious behavior or believe you might be targeted by a scam, it’s crucial to report it immediately. This includes notifying the platform where the interaction occurred and submitting a report to the FTC at [ReportFraud.ftc.gov](#). For suspected VA benefits fraud, call the VA benefits hotline at 1-800-827-1000. For all non-Veteran Affairs related fraud, reach out to the [Federal Trade Commission \(FTC\)](#).

More than 64,000 romance scams were [reported in 2023](#), according to the FTC, totaling \$1.14 billion in losses. By remaining vigilant and following these tips, Veterans can protect themselves and others from romance scams that can lead to heartbreak and breaking the bank.

(Source: <https://news.va.gov/138505/protecting-veterans-from-romance-scams/>)



Things Are Going to Get Hot Before Long. I Hope and Pray I Come Out of It All Right.

By Christy Stephens Martin

My dad was a World War II vet. Like many others, he was traumatized by combat, and by a nine-month imprisonment in a German POW camp. He came home to a country that expected him to forget the horror he saw, the starvation and brutality he experienced, and the losses he incurred. There was no such thing as post-traumatic stress disorder and no treatment. As a result, he struggled his entire life to be “normal.”

It has taken decades for me to process my dad’s losses, his post-trauma behavior, and his memories. My family lost Dad from Parkinson’s disease in 2002. He was almost 80 years old and lived as full a life as possible, but the effects of the physical abuse from his imprisonment, as well as the strain of combat, finally took him. As we lose this special generation, the sacrifice and the triumphs of their World War II experience should never leave us. Many of the stories are personal.



The author’s father, Charles Stephens, just after U.S. troops liberated him from a German POW camp in 1945. Photo courtesy of the author.

Such is the story of Pvt. Ernest Charles Pugh.

My first memories of Ernest, now six decades old, are from the Pugh family home in Mayland, Tennessee, in the early 1960s. They were a loud, gregarious, seemingly fun-loving family. When Dad was with them, they engulfed him with their larger-than-life personalities and their love. The anger from his war memories, which he often exhibited at home, dissipated in their presence. They were a family of seven remaining brothers and sisters, and their matriarch, Mrs. Maud Pugh, emanated a love and affection toward my dad that was palpable. Dad seemed to fill a hole in her heart, and

she and her family seemed to heal a part of his. The connection between them, while unspoken, was strong. Being a youngster, I wasn’t sure why.

Our visits to the Pughs from our home in Maryville, Tennessee, always included a visit to the cemetery. Dad would stop at one grave, eyes misted and visibly choking. Mrs. Pugh would comfort him. My parents continued to visit the Pughs over the years and the Pughs visited us. Eventually, Mrs. Pugh passed, and her children as well. The remaining family were post-World War II children and the memory of their uncle, Ernest, faded. As I got older, I remembered his name, the visits, and one other thing, a place that was etched in my dad’s memory: Saint-Lô, France.

My dad, Charles Stephens, and Ernest met in 1943. They were both infantry soldiers and were well aware that their future would likely include combat in some faraway country. The two had a lot in common. They were children of the Great Depression—both born in 1922. Both were from rural mountainous areas in Tennessee: Ernie from the Cumberland Plateau, Charles from the foothills of the Great Smoky Mountains. They were both from large families and were poor but knew how to live off the land. Firearms, hard work, and survival were something they knew well. They thrived in the Army. For the first time, they got regular medical and dental care, unlimited food, new clothing and shoes, haircuts, and a paycheck—most of which was sent home to their cash-strapped families.

During 1943 and 1944, Charles and Ernest traveled. As part of the 137th Infantry, they trained at Camp Rucker, Alabama, and guarded what the military considered the vulnerable coast of California at San Luis Obispo. While in training on Tennessee maneuvers in Murfreesboro, Tennessee, 90 miles from Ernie’s home, Dad went on leave with him to the Pugh home. Ernie was married and spent most of his time with his young wife, while Charles bonded with Ernest’s large family. Several months later, after completing advanced infantry training, the two men scaled cliffs in North Carolina, then traveled to New York, where they embarked on a two-week ocean voyage to England.



Ernest Pugh. Photo courtesy of the author.

Crossing the English Channel, they entered combat through Omaha Beach, on the coast of France. They traveled inland through a weary, war-torn country. They saw some combat in the beginning days, but their biggest challenge was ahead. They would relieve stressed and depleted soldiers to take a town the Germans had held since 1940 and where they were solidly entrenched. It was to be one of the bloodiest battles of the Normandy campaign: the battle for Saint-Lô.

The 137th found itself in France just north of and outside Saint-Lô, in a small village called La Meauffe. Saint-Lô had been devastated by repeated bombings by the Allies on D-Day in a failed attempt to remove the entrenched German army. Soldiers and the devastation of war filled the area. The American GIs fought for their lives against stubborn, better-trained, and experienced German soldiers.

“It’s OK To Talk About These Experiences”

Arafat looked out at the audience at the Veterans Day breakfast where he was a guest speaker. The Marine Corps Veteran recalls seeing his wife, then his mother and his sisters. “I look at the therapy and what I had gone through to get to that step—to where I’m talking about my own story,” he says, reflecting on his path to healing from PTSD. “I know that I wouldn’t have been able to do that if I hadn’t taken the steps.”

A tragic start to a deployment

Arafat’s journey to that Veterans Day stage began with his military service in the late 1990s and early 2000s. He was serving on a Navy ship. After 9/11, as Arafat and his crewmates were getting ready to deploy, they needed to step up training for special operations. “We were on the flight deck watching—I think it was the Marine Raiders,” he recalls. “They were doing their training operation, and we watched as the helo [helicopter] landed on the ship. But as it went to take off, the legging got caught around a netting, and the helo ended up backwards.” Submariners and sailors lost their lives.

Despite that traumatic event, Arafat and his crewmates had to move on and continue with their mission. Arafat served several more years after that event, leaving the Marine Corps in 2005.

“This is just who I am now.”

When he ended his service, Arafat was dealing with PTSD but wasn’t aware of it. “I couldn’t deal with fireworks anymore,” he says. He was also avoiding people and activities and was drinking heavily. “I think at one point, I was drinking maybe a liter of something a day,” he says. His relationships with his family and his ex deteriorated. He bought a motorcycle and was driving it recklessly. “I was doing a lot of things that I didn’t notice was related to PTSD,” he says.

Arafat pushed forward, just as he had on that Navy ship in 2001. “I just was like, OK, this is just who I am now,” he says. He completed a medical assistant program and then got a job at Massachusetts General Hospital. That was where he was first urged to seek help after an incident at work. “I had a co-worker who—me and her were very thick-headed, stubborn. She had spoken to me in a manner that I didn’t like, and I actually went off on her in the clinic.”

At this point, Arafat’s nurse manager intervened. Arafat says, “Peg grabbed me by my earlobe, put me in her office, and told me that I need to seek help and therapy because the short temper wasn’t going to work in the medical field.”

Family, therapy and a new path forward.

Arafat listened to his nurse manager and sought therapy from VA. He recalls one approach his therapist used. “One

of the things she had me do is do a recording. So I would see her, go home, and relisten to the recording that we did,” he says. “And then she would have me replay something and talk about it—kind of relive it at my own pace to where I was more comfortable with it.”

Arafat credits therapy with helping him begin to heal from the trauma he had experienced. “Even though you never fully recover from what you experience, you can still take those steps forward to start the healing process.”

Also, where PTSD and its consequences had once damaged his relationships with family members, Arafat now sees his family—especially his wife and teenage son—as a primary source of support and motivation.

Reflecting on his mental health journey and experience in treatment, Arafat says, “Being a minority, we’ve always looked down on therapy. Therapy is not a bad thing, and it can be helpful. It’s OK to seek help. It’s OK to let go. It’s OK to talk about these experiences.”

(Source: <https://www.maketheconnection.net/read-stories/its-ok-to-talk-about-these-experiences/>)

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What did the horse say after it tripped?

Help! I’ve fallen and I can’t giddy-up!

How do you make an egg roll?

You push it!

How to request a VA home loan Certificate of Eligibility (COE)

Learn how to request a VA home loan Certificate of Eligibility (COE). This is the first step in getting a VA-backed home loan or Native American Direct Loan. It confirms for your lender that you qualify for the VA home loan benefit. Then, choose your loan type and learn about the rest of the loan application process.

How do I prepare before I start a COE request?

Gather the information you’ll need to request a COE. Select the description here that matches you best to find out what you’ll need.

If you’re a Veteran, you’ll need a copy of your discharge or separation papers (DD214).

If you’re an active-duty service member, you’ll need a statement of service—signed by your commander, adjutant, or personnel officer—showing this information:

Your full name

Your Social Security number

Your date of birth

The date you entered duty

The duration of any lost time

The name of the command providing the information

If you’re a current or former activated National Guard member, you’ll need a copy of your DD214 or other discharge documents.

If you’re a current or former activated National Guard member with at least 90 days of active-duty service including at least 30 consecutive days, you’ll need a copy of 1 of these documents that shows your activation date:

Your DD214 that shows 32 USC sections 316, 502, 503, 504, or 505 activation, or

An annual point statement, or

Your DD220 with accompanying orders

If you’re a current or former activated Reserve member, you’ll need a copy of your DD214 or other discharge documents.

If you’re a current member of the National Guard or Reserve and have never been activated, you’ll need a statement of service—signed by your commander, adjutant, or personnel officer—showing this information:

Your full name

Your Social Security number

Your date of birth

The date you entered duty

Your total number of creditable years of service

The duration of any lost time

The name of the command providing the information

If you’re a discharged member of the National Guard and were never activated, you’ll need this information:

Your Report of Separation and Record of Service (NGB Form 22) for each period of National Guard service, and

Your Retirement Points Statement (NGB Form 23) and proof of the character of service

If you’re a discharged member of the Reserve and were never activated, you’ll need:

A copy of your latest annual retirement points, and

Proof of your honorable service

If you’re a surviving spouse who qualifies for home loan benefits, you’ll need the Veteran’s discharge documents (DD214)—if available—and:

If you’re receiving Dependency & Indemnity Compensation (DIC), you’ll need to fill out and send us a Request for Determination of Loan Guaranty Eligibility—Unmarried Surviving Spouses (VA Form 26-1817).

Get VA Form 26-1817 to download

Or

If you’re not receiving DIC benefits, you’ll need to send us all of these:

A completed Application for DIC, Death Pension and/or Accrued Benefits (VA Form 21P-534EZ), and

A copy of your marriage license, and

The Veteran’s death certificate

Get VA Form 21P-534EZ to download

Find out if you qualify for home loan benefits

Get military service records online

(Source: https://www.va.gov/housing-assistance/home-loans/how-to-request-coe/)

On July 12, 1944, two platoons were trapped in La Meauffe on a sunken road—and surrounded by Germans. A small squad went to provide cover fire for the platoons so they could escape the German onslaught. Charles Stephens and Ernest Pugh were members of that squad. With the others, Charles, a light machine gunner, and Ernest, a rifleman, provided cover gunfire. But as the two platoons escaped, the squad became trapped. They were low on ammunition. Ernest volunteered to provide cover fire so the others on his squad could escape. As he repeatedly fired toward the Germans, the infantry soldiers escaped to safety. The enemy surrounded Ernest. He had no way out. He continued to fire his weapon, fighting for time for his fellow soldiers to retreat.

“After the platoons had successfully withdrawn, Private Pugh volunteered to cover the withdrawal of his own squad,” Ernest’s Silver Star citation reads. “As the last elements of his squad withdrew, enemy infantrymen rushed his positions. He succeeded in killing three of the enemy before he himself was killed.” Dad was one of the last to withdraw, and he left knowing he could not save his best friend. Survivor’s guilt would follow him for the rest of his life.



Ernest Pugh and his wife, Lela Pugh, in the winter of 1944. Photo courtesy of the author.

Dad never told us the details of Ernest’s death, but over the course of the 60 years since I first heard his name, I found his history. I realized what Dad had lost and gained that day. Dad lost a best friend, a piece of home, and his innocence. He gained his life, the will to live and to survive under horrific conditions, and a love of freedom. He understood the gift of life. Ernest was one of many in our military who willingly sacrifice, then and now creating a legacy that lives on.

Dad once spoke tearfully of going back the next morning to see Ernest’s body. He said Ernest looked peaceful with the dew on his face.

Dad, however, had no time for grief. The coming months were difficult as the infantry made its way through France, retaking town after town.

“Mom I can now tell you some of the places I’ve been in and fought in,” Dad wrote home from the front on Sept. 28, 1944. “I was in the battle of St. Lo [Saint-Lô], Martain [Mortain], Jesse Vire [Tessy-sur-Vire], Orleans, and Chateau Brienne [Châteaubriant]. I can’t tell you the other places or where I’m at now, but things are going to get hot before long. I hope and pray I come out of it all right.”

Two days later, on Sept. 30, the German army took Dad prisoner. Nine months later, after being starved and severely beaten to unconsciousness, he was liberated from Stalag VII A near Moosburg, Germany, in April of 1945, weighing fewer than 100 pounds. He was discharged from the military in October 1945. He had survived, but at a cost.

Shortly after, he spent weeks with the Pugh family finding some healing for his own body, soul, and mind; shedding many tears, but also sharing memories, love, and laughter.

In researching my dad’s journey through World War II, I have gained an understanding of him. He walked the fields of his home, gazed in wonder at the mountains, and loved large. He had known starvation; he fed those less fortunate than he. After surviving in a POW camp in one of the coldest winters in living memory, he wanted warmth. He valued his freedom, he loved life, he believed in the United States, and he never failed to vote. He revered those like Ernest who gave him all those things by giving up their own lives.



Charles Stephens (left), Bonnie Stephens Erwin (back center), Lennie Headrick Stephens (right), and Christy Stephens Martin (center front) in about 1960. This was when Martin first learned about Ernest Pugh. Photo courtesy of the author.

During World War II, more than 100,000 Silver Stars were awarded. The Silver Star is a commendation for gallantry and self-sacrifice in the line of duty. Ernest didn’t just save my dad’s life; he enabled me to have life. Heroism of this kind is felt generationally and so should be honored that way. I know I am forever grateful for what he has given me, and he will live in my heart as he did in Dad’s.

After I read what Ernest did, I knew his story needed to be told. I attempted to reconnect with the Pughs. I finally found them—nieces and nephews still in Cumberland County, Tennessee, who remembered Ernest through their grandmother, Mrs. Pugh, and through my dad. They said she spoke of Dad often, and that she treasured the memory of her son. The Pugh family and I shared memories, pictures, and tears for heroes long gone, but not forgotten.

Ernest Pugh’s Silver Star citation ends with, “The gallant actions of Private Pugh, whose self-sacrifice enabled his comrades to withdraw from a precarious position, reflect the highest credit upon his character as a soldier and upon the military service.”

Rest in peace, Ernest Charles Pugh. We will remember.

Christy Stephens Martin

Christy Martin is a retired public school and college and university teacher and administrator, and social services provider for children aging out of foster care. She writes book reviews and does freelance writing about education and other areas of interest, including World War II history.

(Source: https://thewarhorse.org/wwii-heroism-uncovered-in-daughters-journey-into-dads-past/)

Request your military service records (including DD214)

You can request a copy of your DD214 and other military service records from the National Archives.

Types of information you can get

You can request your military service records to get information like this:

- Your character of discharge (from your DD214 or other separation documents)
- Your duty stations and assignments
- Your medals and decorations (awards)
- Your qualifications, licenses, and certificates

How to request your records from the National Archives

You can request records from the National Archives online, by mail, or by fax.

Note: If you’re submitting an application for VA benefits, we’ll request your DD214 for you when we receive your application. You don’t need to do this yourself through the National Archives.

Option 1: Request your records online

You can request your military service records online using the National Archives’ eVetRecs tool. When you get to eVetRecs, select Make a new request. Go to this website:

https://vetrecs.archives.gov/VeteranRequest/home.html

Option 2: Fill out the National Archive’s request form (to mail or fax)

Fill out a Request Pertaining to Military Records (Standard Form 180). Go to this website to get the form:

https://www.va.gov/find-forms/about-form-sf180

Mail or fax your completed form to the appropriate address or fax number listed on the last page of the form. To find the right address or fax number for you, you’ll need to use the first chart on that page to find your branch of service, separation date, and type of record.

If you were discharged after any of these dates, you can request your records from the DOD through the milConnect website:

- If you were in the Air Force and discharged after October 1, 2004, or
- If you were in the Army and discharged after October 1, 2002, or
- If you were in the Marines and discharged after January 1, 1999, or
- If you were in the Navy and discharged after January 1, 1995

Go to this website https://milconnect.dmdc.osd.mil/milconnect/

Note: You’ll need a Premium DS Logon account to request your records through milConnect. If you don’t have a Premi-

um DS Logon account, you can learn more about creating DS Logon accounts on the DS Logon website at:

https://www.dmdc.osd.mil/identitymanagement/app/login

How do I request records if I served in the Marines from 1998 to the present or the Coast Guard from 2008 to the present?

Contact your personnel command for your records. You can also request your records from the National Archives and they’ll send your request to your personnel command.

How do I request someone else’s records?

If you’re a family member planning a burial for a Veteran in a VA national cemetery

If you don’t have the Veteran’s records to provide to the National Cemetery Scheduling Office, they will try to locate the records they need to determine eligibility for burial benefits. You don’t need to request the Veteran’s military service records yourself.

Call our National Cemetery Scheduling Office at 800-535-1117 (TTY: 711). We’re here Monday through Friday, 8:00 a.m. to 7:30 p.m. ET, and Saturday, 9:00 a.m. to 5:30 p.m. ET.

You can get more information about planning a burial at this website:

https://www.va.gov/burials-memorials/schedule-a-burial

If you’re the next of kin of a Veteran who has died

You may be considered the next of kin if you’re related to the Veteran in any of these ways:

- You’re the Veteran’s surviving spouse and you haven’t remarried, or
- You’re the Veteran’s parent, or
- You’re the Veteran’s child, or
- You’re the Veteran’s sibling
- You can request a copy of the Veteran’s military records from the National Archives online, by mail, or fax.

Learn more about how to request military service records from the National Archives at this website:

https://www.va.gov/records/get-military-service-records#how-to-request-your-records-fr

You can also request their military records in any of these ways:

- Visit the NPRC in person
- Contact your state or county Veterans agency
- Hire an independent researcher

When you request the Veteran’s records, you’ll need to provide a copy of one of these documents:

- Death certificate or other public record of the Veteran’s death, or
- A letter from a funeral home

If you’re not the Veteran’s next of kin

If the Veteran was discharged more than 62 years ago, you can order a copy of their military records. The National Archives opens all records to the public 62 years after discharge.

Learn how to access archived records at this website

https://www.archives.gov/personnel-records-center/military-personnel/ompf-archival-requests

If the Veteran was discharged less than 62 years ago, you may be able to request limited information from their Military Personnel File. You’ll need authorization from the Veteran’s next of kin to request their full military service record.

Find out about general public access to military records at this website:

https://www.archives.gov/personnel-records-center/ompf-access-public

Find out if your records may have been destroyed in the 1973 fire at the National Personnel Records Center (NPRC) in St. Louis and how to reconstruct your records to support a VA disability compensation claim. Go to this website:

https://www.va.gov/records/get-military-service-records/reconstruct-records

Set up your personal health record, and download medical records, reports, and images to share with your VA and non-VA doctors at this website:

https://www.va.gov/health-care/get-medical-records

Find out how to change your address and other contact information in your VA.gov profile. This will update your information across several benefits and services at this website:

https://www.va.gov/change-address

Find out which Veteran ID cards you may need, and how to request them at this website:

https://www.va.gov/records/get-veteran-id-cards

Download copies of letters, like your award letter, for certain benefits at this website:

https://www.va.gov/records/download-va-letters

Answer a series of questions to get step-by-step instructions on how to apply for a discharge upgrade or correction. If your discharge gets upgraded, you’ll be eligible for the VA benefits you earned during your period of service at this website


https://www.va.gov/discharge-upgrade-instructions/

(Source: https://www.va.gov/records/get-military-service-records/)

A man goes to see a wizard and says, "Can you lift a curse that a priest put on me years ago?"

"Maybe," says the wizard, "Can remember the exact words of the curse?"

The man replies, "I pronounce you man and wife."



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(800) 827-1000

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VA life Insurance (800) 669-8477

A wife asked her husband, "Honey, will you still love me when I am old and overweight?" The man replied, "Yes, I do."

Self-Help

Small steps can lead to big strides in your overall well-being.

Many people benefit from professional counseling, but there are also things you can do to help manage symptoms as you progress toward recovery.

Self-Help Strategies

When addressing a mental health challenge, you can take several practical steps to begin feeling better. There are [many resources](#) available to support you in your recovery, including a variety of brief [self-assessments](#).

[Taking care of your mental and physical health is essential to your well-being.](#)

These self-care practices can improve both body and mind health. Try to work them into your daily routine:

Walk, jog, or work out within your physical limits.

Eat nutritious meals regularly.

Sleep well.

Practice relaxation and stress management techniques (like meditation, prayer, or a stress-free hobby) to help focus your mind.

"My PTSD was discovered by therapists at the VA medical center. My avenue of tranquility vacation is art. I have found that art touches everyone. It speaks in volume beyond words. It touched the very core of self-healing."

[Some coping behaviors may actually make your situation worse.](#)

Try to avoid unhealthy ways of managing your emotions, including drinking alcohol, taking drugs either recreationally or against dosage instructions, or engaging in risky behavior like gambling or driving recklessly.

[When faced with challenging situations, practice healthier ways of coping.](#)

Many find these methods helpful:

Use grounding and relaxation techniques. A shower, deep breathing, or time in a quiet place to collect your thoughts can help relieve stress and get you through difficult moments.

Learn what triggers your bad feelings and make a plan for how to handle them before they bubble up again.

Take advantage of [online tools](#) to guide you through immediate steps to manage what you're experiencing.

Explore [mental health apps for Veterans](#), which cover a variety of topics, including PTSD, anger management, quitting smoking, and more.

If you feel lonely or isolated, reach out to your family, your friends, or other Veterans to help boost your overall well-being.

Participate in clubs or hobbies focused on things you enjoy.

Connect with Veteran groups or other social organizations.

Recognize that your valuable experiences and abilities can make a difference in the lives of others and volunteer in your community.

Talk with other Veterans whose experiences are similar to yours.

[Be willing to let others know how your feel and to ask for support.](#)

Seeking information, advice, or options for tackling the challenges that affect your health, daily activities, or relationships can be a good first step. Consider connecting with:

Your doctor. Ask if they have experience treating Veterans or can refer you to someone who does.

A mental health professional, such as a therapist.

Your local VA medical center or Vet Center. VA specializes in the care and treatment of Veterans.

A spiritual or religious adviser.

Self-Assessments

There are many resources available to support you in your recovery, but many Veterans like to start by completing one of a variety of brief self-assessments.

Find out whether your feelings and behaviors are related to a treatable condition. <https://www.maketheconnection.net/resources/self-assessments/>.

Important TRICARE Communication Update

TRICARE is moving to a new email platform. In the coming weeks, we'll start sending emails from tricare@news.dha.mil.

Your existing TRICARE GovDelivery subscription may not transfer automatically to the new platform. Here's how to keep receiving important TRICARE news and information from us:

Add tricare@news.dha.mil to your address book or safe sender list. Resubscribe through our new email platform. A link to re-subscribe will be available on tricare.mil/subscriptions soon.

We look forward to staying in touch with you!



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Then, in articles having blue text, click on it and the link will take you to much more information on that particular subject.



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We are an information and referral source only. We are not medically trained. All decisions concerning your health should be discussed with your physician.

The Editor

In the first year of marriage, the man speaks and the woman listens.

In the second year, the woman speaks and the man listens.

In the third year, they both speak and the neighbors listen.



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Ex-administrator of leading POW/MIA advocate faces prison for devastating theft

By MATTHEW M. BURKE STARS AND STRIPES



A Virginia woman whose scheming almost liquidated a prominent advocacy organization for American prisoners of war now awaits punishment for embezzling hundreds of thousands of dollars.

Jennifer Giorffino, a former administrator for the National League of Families of American Prisoners and Missing in Southeast Asia, pleaded guilty Thursday in federal court in Alexandria to a single count of wire fraud, according to the Justice Department.

She could receive a prison term of up to 20 years when she is sentenced next year, a DOJ statement said Thursday.

Between October 2022 and April this year, the 53-year-old Giorffino stole \$257,259 from the nonprofit, also known as the National League of POW/MIA Families, court records state.

The organization was nearly out of money at the time of the embezzlement. It was slated to be dissolved after a Jan. 31, 2023, vote by its board of directors, according to a series of League statements between January and June 2023.

But less than two weeks later, an anonymous benefactor stepped in and pledged \$400,000 annually over five years to fund the group, according to a February 2023 statement.

Ann Mills-Griffiths, who has led the organization since 1978, was listed as board chairwoman on League statements during the period in which the fraud took place. Mills-Griffiths did not reply Monday to an email seeking comment.

Giorffino's job included processing donations. Instead, she used the money for personal retail purchases, according to the Justice Department.

She also stole Mills-Griffiths' identity and fraudulently applied for at least 30 credit cards and lines of credit for additional spending, authorities said.

She made over \$36,000 worth of purchases on one card alone and paid off the cards every month until April using League funds, the Justice Department statement said.

In February, Giorffino opened a checking account in the League's name and began diverting checks and online donations into the account, accumulating \$29,746, the Justice statement said.

The organization's funds were largely drained by March, but she forged bank statements and wrote checks she knew would bounce, according to prosecutors.

The chairwoman's credit card was declined at a restaurant around the same time the theft was discovered, the statement said. Giorffino gave the board falsified bank statements at an April meeting and she stopped working at the League on April 27, according to court records.

It is unclear what Giorffino was charged with before the plea deal was negotiated. A spokesman for the Eastern District of Virginia on Monday declined to comment further.

In 1971, the League created the iconic black-and-white POW/MIA flag that currently flies over government and military institutions.

(Source: <https://www.stripes.com/veterans/2024-11-05/pow-mia-administrator-embezzles-funds-15742859.html>)

*Used with permission from Stars and Stripes.
Visit their website at www.stripes.com*

Travel Pay Reimbursement

As a Veteran, you may be eligible for reimbursement if you meet the requirements listed here.

This must be true:

You're traveling for care at a VA health facility or for VA-approved care at a non-VA health facility in your community.

And at least one of these must also be true:

You have a VA disability rating of 30% or higher, **or**

You're traveling for treatment of a service-connected condition, even if your VA disability rating is less than 30%, **or**

You receive a VA pension, **or**

You have an income that's below the maximum annual VA pension rate, **or**

You can't afford to pay for your travel, as defined by our guidelines, **or**

You're traveling for one of these reasons: A scheduled VA claim exam (also called a compensation and pension, or C&P, exam), to get a service dog, or for VA-approved transplant care

(Source: <https://www.va.gov/health-care/get-reimbursed-for-travel-pay/>)

What does it take to become the most decorated enlisted Airman in U.S. Air Force history?

On Feb. 6, 1967, while on a rescue mission over Vietnam, pararescuer A2C Duane Hackney's unarmed HH-3E was hit by enemy fire. With the aircraft burning, he gave his parachute to the rescued pilot, choosing to save a life over his own. Moments later, a second 37mm round struck, and the helicopter exploded. Blown from the aircraft, Hackney deployed an unbuckled parachute at treetop level—becoming the sole survivor and the first living enlisted recipient of the Air Force Cross.



This was just one of five helicopter crashes he survived in 200+ combat missions. His bravery earned him 70+ awards and decorations during his Air Force career, making him the most decorated enlisted Airman in USAF history.



He retired as a Chief Master Sergeant in 1991 but passed away in 1993, leaving behind a legacy of selflessness, valor, and sacrifice.

So, what does it take to become the most decorated enlisted Airman in Air Force history? It takes selflessness, courage, and the heart of a warrior—willing to risk everything “That Others May Live.”



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| 3 Year Trustee | – Allen Hill |
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The Million Veteran Program (MVP) is a national, voluntary research program designed to better understand how genes affect health and illness.



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Vietnam Veterans Share Their Mental Health Journeys

Doug, who says he waited more than 30 years to seek help after completing his U.S. Army service in 1972. “I didn’t talk about it to anyone—about anything. All I wanted to do was forget,” he says. But the Veteran felt adrift until he found a new path through group therapy and other mental health supports.

Leon, a U.S. Marine Corps Veteran who tried to put his entire Vietnam experience behind him after his return from service in 1968: “It was just like it had never happened, but it did, of course.” Leon says he lived in fear until he accessed and dealt with his feelings through therapy for posttraumatic stress disorder (PTSD).

Michael, a U.S. Army Veteran who tried to cope with his PTSD symptoms by drinking until he found treatment that provided “all the tools that you could possibly need to get yourself out of whatever addiction you’re in.”

All of them encourage other Vietnam Veterans to reach out for treatment if needed.

“All I can say is go, because these people are trained in what they’re doing, and they have the heart to help,” Leon says.

(Source: <https://www.maketheconnection.net/read-stories/vietnam-veterans-share-their-mental-health-journeys/>)





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**JOHN DEERE**

An old man goes into the Social Security Office and fills out an application. Too old to have a birth certificate, he is asked to prove he is old enough. He opens his shirt and shows them the gray hair on his chest and they accept that as proof.

He goes home to his wife, shows her the check, and explains to her what has happened.

She replies, "Well get back down there, pull down your pants, and see if you can get disability!"

Gulf War Veterans’ Medically Unexplained Illnesses

Read about [presumptive conditions for Gulf War Veterans](#).

A prominent condition affecting Gulf War Veterans is a cluster of medically unexplained chronic symptoms that can include fatigue, headaches, joint pain, indigestion, insomnia, dizziness, respiratory disorders, and memory problems.

VA refers to these illnesses as "chronic multisymptom illness" and "undiagnosed illnesses." We prefer not to use the term “Gulf War Syndrome” when referring to medically unexplained symptoms reported by Gulf War Veterans. Why? Because symptoms vary widely.

Presumptive conditions for Gulf War Veterans

Gulf War Veterans who meet the criteria below do not need to prove a connection between their military service and illnesses in order to receive VA disability compensation.



VA presumes certain chronic, unexplained symptoms existing for 6 months or more are related to Gulf War service without regard to cause. These "presumptive" illnesses must have begun, or been exacerbated after active duty in the [Southwest Asia theater of military operations](#).

These illnesses include:

[Myalgic Encephalomyelitis/Chronic Fatigue Syndrome \(ME/CFS\)](#), a condition of long-term and severe fatigue that is not relieved by rest and is not directly caused by other conditions.

[Fibromyalgia](#), a condition characterized by widespread muscle pain. Other symptoms may include insomnia, morning stiffness, headache, and memory problems.

[Functional gastrointestinal disorders](#), a group of conditions marked by chronic or recurrent symptoms related to any part of the gastrointestinal tract. Functional condition refers to an abnormal function of an organ, without a structural alteration in the tissues. Examples include irritable bowel syndrome (IBS), functional dyspepsia, and functional abdominal pain syndrome.

[Undiagnosed illnesses](#) with symptoms that may include but are not limited to: abnormal weight loss, fatigue, cardiovascular disease, muscle and joint pain, headache, menstrual disorders, neurological and psychological problems, skin conditions, respiratory disorders, and sleep disturbances.

[VA benefits](#)

Gulf War Veterans may be eligible for a variety of VA benefits, including a [Gulf War Registry health exam](#), the [Airborne Hazards and Open Burn Pit Registry](#), health care, and disability compensation for diseases related to military service. Their dependents and survivors also may be eligible for benefits.

Gulf War Veterans are eligible for presumptive conditions due to exposure to airborne hazards. Find these conditions in the Health Care and Benefits section of the [Airborne Hazards and Burn Pit Exposures web page](#).

Learn more about [benefits related to Gulf War service](#).

Research on Gulf War Veterans' illnesses

VA and other researchers [continue to conduct research](#) to investigate how service in the Gulf War is linked to illnesses Gulf War Veterans have experienced. Research includes:

[Multiyear health survey of Gulf War-era Veterans](#) to find out how their health has changed over time

[Studies by VA's War Related Illness and Injury Study Center](#)

VA [contracts with the Health and Medicine Division \(HMD\)](#) (formally known as the Institute of Medicine) of the National Academy of Sciences, Engineering, and Medicine to scientifically review the evidence for possible connections between Gulf War Veterans' illnesses and exposure to environmental agents or preventive medicine during service, and the best treatments for these illnesses.

VA is currently reviewing HMD's latest Gulf War and Health report, [Gulf War and Health: Volume 10: Update of Health Effects of Serving in the Gulf War, 2016](#).



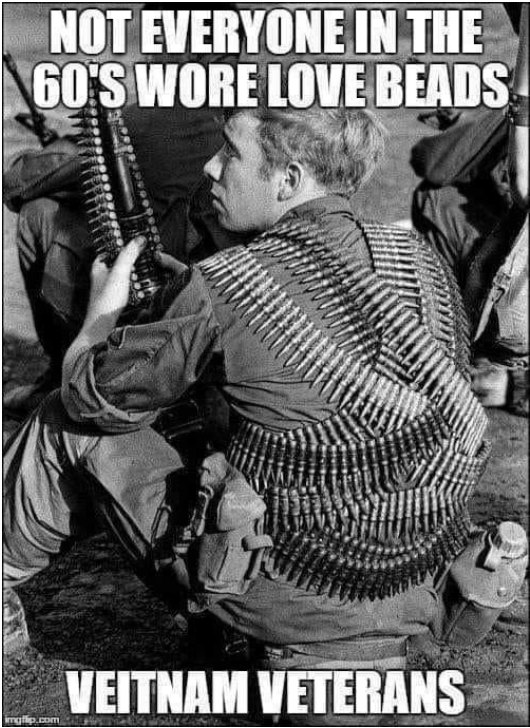
Gulf War Service

For VA benefit purposes, Gulf War service is active military duty in any of the following areas in the **Southwest Asia theater of military operations** at any time August 2, 1990 to present. This includes Veterans who served in Operation Iraqi Freedom (2003-2010) and Operation New Dawn (2010-2011).

- Iraq
- Kuwait
- Saudi Arabia
- The neutral zone between Iraq and Saudi Arabia
- Bahrain
- Qatar
- The United Arab Emirates (U.A.E.)
- Oman
- Afghanistan
- Israel
- Egypt
- Turkey
- Syria
- Jordan
- Gulf of Aden
- Gulf of Oman
- Waters of the Persian Gulf, the Arabian Sea, and the Red Sea
- The airspace above these locations

VA offers eligible Veterans a free [Gulf War Registry health exam](#) to find possible long-term health problems related to Gulf War service. Veterans who served in the Gulf War may also be eligible for the updated [Airborne Hazards and Open Burn Pit Registry\(AHOBPR 2.0\)](#).

(Source: <https://www.publichealth.va.gov/exposures/gulfwar/military-service.asp>)



VA epidemiology studies on Gulf War Veterans

VA's Epidemiology Program conducted a [multiyear survey study of Gulf War-era Veterans](#) who served in 1990-1991 to find out how their health changed over time. Researchers conducted an initial survey in 1995, a second survey in 2005, and a third survey in 2012.

Past findings show deployed Veterans reported a [higher prevalence of unexplained multisymptom illness](#) and [poorer health](#) than non-deployed Veterans.

View [more research](#) from the Epidemiology Program.

VA War Related Illness and Injury Study Center research

VA's War Related Illness and Injury Study Center (WRIISC) offers services to combat Veterans, families, and health care providers on deployment-related health concerns. Also, the [WRIISC conducts research](#) that looks at post-deployment health issues and medically unexplained symptoms.

Health and Medicine Division

The Health and Medicine Division (HMD) (formally known as the Institute of Medicine) of the National Academy of Sciences, Engineering, and Medicine is a non-government organization that evaluates scientific literature and provides advice. By law, VA contracts with the HMD to scientifically review evidence for possible connections between Gulf War Veterans' illnesses and exposure to toxic agents, environmental or wartime hazards, or preventive medicine during military service.

Find out more about [HMD reports and VA findings](#).

Research Advisory Committee on Gulf War Veterans' Illnesses

Congress created the Research Advisory Committee (RAC) on Gulf War Veterans’ Illnesses in 1998 to make recommendations to the Secretary of Veterans Affairs about government research on health effects of military service during the Gulf War. View [recently funded research studies](#) and [recently published research articles](#).

Read more about the [Research Advisory Committee on Gulf War Veterans' Illnesses](#).

Department of Defense

The Department of Defense funds research on Gulf War illness through the Gulf War Illness Research Program (GWIRP). The GWIRP has compiled a [list of research resources](#) produced from their funding.

(Source: <https://www.publichealth.va.gov/exposures/gulfwar/research.asp>)

Helium walks into a bar and asks for a drink. The bartender says, "Sorry, we don't serve noble gases here."

Helium doesn't react.

Anxiety and PTSD among mental health diagnoses on the rise, military researchers say

By REBECCA HOLLAND STARS AND STRIPES



Airmen take the enlistment oath at the end of basic training at Joint Base San Antonio-Lackland, Texas on Dec. 19, 2024. (Kate Anderson/U.S. Air Force)

Diagnoses for mental disorders among U.S. service members increased nearly 40% in a five-year period that partly overlapped with the COVID-19 pandemic, according to a new report that military researchers say demonstrates a growing need for health services.

From the beginning of 2019 through the end of 2023, more than 541,000 active service members were diagnosed with at least one mental health disorder and about half that number were diagnosed with at least two, the report said.

More than half of the diagnoses, nearly 283,000 cases, were for adjustment disorder, according to the latest edition of Medical Surveillance Monthly Report, a peer-reviewed journal of the Armed Forces Health Surveillance Division.

The disorder is time-limited and characterized by impaired function due to stress. It can be serious and is a risk for suicide, according to the Mayo Clinic website, but can also be mild, and in most cases, is manageable within a few months.

A 2022 study published in the journal Military Medicine found that 57% of service members with attachment disorder received the diagnosis within their first three years of service.

Meanwhile, anxiety diagnoses rose 77% from the beginning of the five-year period to 48,940 last year. Depression cases also showed a substantial increase, with nearly 40,000 last year.

Post-traumatic stress disorder, while far below figures at the height of the wars in Iraq and Afghanistan, nearly doubled during the time period to 22,386 cases. The diagnoses included rising numbers of women.

“Congruent with prior reports, service members in health care occupations continued to represent high rates of PTSD, potentially reflecting the psychological stresses inherent to many health care roles in both peace and wartime operations,” the researchers said.

The report looked at all active-duty members of the Army, Navy, Air Force, Marine Corps, Coast Guard and Space Force through records in the Defense Medical Surveillance System.

It excluded those who either didn’t seek care or went to a private practitioner or counselor, so the true numbers could be higher, the researchers said.

“Efforts to assist and treat service members should continue to promote help-seeking behavior to improve their psychological and emotional well-being and reduce the burden of mental health disorders, especially as rates have been increasing since the COVID-19 pandemic,” the report said.

In 2023, mental health disorders accounted for 54.8% of hospital bed days among active-duty service members, researchers found.

The Army had the highest rate of mental health disorders. The Navy had the highest rate of depressive disorders, bipolar disorder and personality disorders, while the Coast Guard had the highest rates of acute stress disorders, the report said.

Overall rates of anxiety, PTSD and acute stress were higher among service members who had deployed to a U.S. Central Command area of responsibility, which includes the Middle East.

Mental health has been a lingering issue for the Pentagon. In February 2024, the Government Accountability Office found a shortage of mental health workers and long wait times for care in the military health care system.

In September, the Defense Department established a policy to promote health-seeking behaviors and emphasized the need for non-stigmatizing access to health services.

That followed the 2023 passage of the Brandon Act, which allows service members to seek confidential help at any time for any reason. It was named after Petty Officer 3rd Class Brandon Caserta, who died by suicide in 2018.

The Army has also developed a training program to equip medics without behavioral health experience to address some mental health issues in remote areas.

(Source: <https://www.stripes.com/theaters/us/2024-12-30/mental-health-issues-increase-us-military-16321943.html>)

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Q: Why are Helium, Curium, and Barium the medical elements?

A: Because if you can't heal-ium or cure-ium, you bury-um.

Veteran suicides often follow complaints of chronic pain, insomnia and physical problems, report finds

By LINDA F. HERSEY STARS AND STRIPES



WASHINGTON — Chronic pain, sleep disorders and increasing health challenges were identified as risk factors that veterans most frequently reported to doctors at the Department of Veterans Affairs prior to their deaths by suicide from 2020-2022, according to a new VA report.

The analysis conducted by the VA’s Behavioral Health Autopsy Program identified leading suicide risk factors in the health records of 2,654 veterans who had taken their own lives in those two years. The veterans were enrolled in VA care.

Four of the five most frequently documented problems were about physical well-being, according to the 2024 National Veteran Suicide Prevention Annual Report. Information was gathered on clinical diagnoses, health conditions, personal life circumstances and psychosocial factors. Findings showed nearly 55% of 2,654 veterans who took their own lives had reported pain problems in the year before they died.

“The pain I have is constant — there is pain in my hand, my neck [and] my head,” said Esteban Blis, a 55-year-old retired Army staff sergeant who served from 1993 to 2011 with deployments to Iraq and Afghanistan.

He said he sustained a traumatic brain injury and other physical injuries when the military aircraft that he was flying in made a hard landing in Afghanistan in 2010.

“The chronic pain causes a lot of complications for me today like insomnia and high blood pressure,” said Blis, who was hospitalized with a traumatic brain injury and honorably discharged a year later.

But Blis, who now lives in Panama, said he thinks the VA does not adequately address chronic pain in veterans because it is so common.

“They just hand you painkillers,” he said.

The prevalence of pain was the most frequently documented complaint among the veterans who committed suicide between 2020-2022.

More than half reported persistent sleep problems that affected their well-being. More than 40% had an increase in physical health problems in the year prior to their deaths. One-third experienced a recent decline in physical activity, according to the report.

About 1/3 of the veterans also disclosed they were having relationship problems, which was the fifth most frequently documented risk factor by veterans, according to the report.

The VA conducts an analysis of veteran suicide rates each year. Veteran suicides rose to 6,407 for calendar year 2022, up by three from the previous year, according to the VA’s most recent report. Veteran suicide was about 1.5 times higher than the general population. Though veterans compose 7.6% of the general population, nearly 14% of adult suicides are among veterans, the National Institutes of Health said in an April 2022 report.

The autopsy program identified a total of two dozen risk factors for veterans.

Sources for health information included VA health records, coroner and medical examiner reports, death certificate records, reports from law enforcement agencies, media and news outlets and information shared by family members.

The findings provide a “unique resource for understanding the characteristics and context” of veteran suicides for the two years studied, according to the report.

Suicide ranked as the 12th highest cause of death among veterans for each of the three years studied by the autopsy program.

The VA launched a 988+1 crisis line in 2022 to provide immediate help to at-risk veterans. Nearly one million veterans contacted the crisis line during its first year of operation, which included phone calls, texts and chats. The VA also provides free emergency care at VA and non-VA health facilities for veterans at imminent risk of suicide, according to the agency.

Firearm deaths contributed to most veteran suicides from 2021 to 2022, according to the VA’s annual report on veteran suicides. Guns were also used more often by veterans to kill themselves than people in the general population. The report found 27% of the veterans had “unsecure firearms in the home” prior to their death.

Other relevant factors identified in health records of veterans who had committed suicide between 2020 and 2022 were problems with self-control and acting impulsive, financial losses, feelings of alienation, and evidence the veteran made plans to commit suicide.

Blis, who is 100% disabled, said the VA continues to prescribe him painkillers and other medication to address the chronic pain, insomnia and irritability that he experiences. He serves as an advocate for veterans in Panama.

“Helping others is what keeps me going,” said Blis, who formed the You Served, We Care Foundation, a nonprofit that connects veterans living overseas with resources for their health care. “The VA needs to care more for the veterans who served this country. There needs to be a greater focus on rehabilitating veterans with chronic pain and not just give us pills. They just make us addicted. The problems get worse.”

(Source: <https://www.stripes.com/veterans/2025-01-02/veterans-suicides-chronic-pain-sleep-disorders-16353382.html>)

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Visit their website at www.stripes.com

Office of Survivors Assistance

FAQs

During this difficult time, we know that you will have questions about survivor benefits and how to obtain them. The Office of Survivors Assistance (OSA) has prepared a list of the most Frequently Asked Questions (FAQs) to assist you. Please review this FAQ list to see if your question has already been addressed, or visit [NCA's helpful FAQ list here](#).

1. How do I apply for benefits?

The application for VA Survivors Benefits is a straight-forward process that involves the claimant completing the appropriate forms and supplying the necessary documentation. Applications are then sent to the appropriate VA Regional Office or Pension Management Center for processing.

It is strongly recommended that claimants make duplicate copies of their application for their own records.

To review the programs available, please visit: <https://www.va.gov/family-and-caregiver-benefits/>

2. How do I reinstate my previous benefit?

If your DIC benefit as a surviving spouse was terminated because you remarried, but the subsequent marriage has since ended due to death, divorce, or annulment, you may file to have your previous Survivor's benefit reinstated. ([Federal Benefits for Veterans, Dependents Survivors and Caregivers](#))

To do so, you will be asked to complete [VA form 21-534EZ](#) and submit it to your local VA Regional Office along with documentation supporting the claim that your subsequent marriage has ended (i.e., divorce decree or death certificate). After doing so, call the Veterans Benefits Administration directly at 800-827-1000 to confirm that your materials have been received and to find out the status of your reinstatement.

3. If I remarried, is there an impact on my DIC eligibility?

If you remarried, you can receive or continue to receive compensation if one of these describes you:

You remarried on or after December 16, 2003, and were 57 years of age or older at the time you remarried, OR

You remarried on or after January 5, 2021, and you were 55 years of age or older at the time you remarried.

If neither of the two conditions listed above apply to you, then upon remarriage your DIC will be suspended. However, you may reinstate your DIC in the event your subsequent marriage were to end due to death, divorce, or annulment.

More information about DIC eligibility [may be found here](#).

4. Is there someone that can help me file my claim?

Yes. You have several options available. You may seek assistance at your local VA regional office ([locate your office by clicking here](#)).

Additionally the Veteran community has a strong tradition of assisting fellow service members and their families. This service is exemplified in the work done by Veteran Service Organizations (VSO) and County Veteran Service Officers (CVSO) throughout the United States. Many VSOs offer to surviving families’ benefits counseling and assistance with the application process, and often have local chapters located right in the community.

It is strongly recommended that surviving family members consult with the VSO of their choice when applying for VA Survivor Benefits. Visit this site to learn more: <https://www.va.gov/get-help-from-accredited-representative/>

5. How do I check the status of my claim?

The Veterans Benefits Administration operates a National Call Center (NCC) that you may utilize to check on the status of your claim. The NCC may be reached by calling **1-800-827-1000**.

***Did you know that by calling the NCC you may also:

Obtain tax documentation.

Notify VBA of the death of a veteran or a benefit recipient.

Request information on burial and mortuary benefits.

Learn about benefits available to surviving family members.

Much, much more.

6. How do I know if I am eligible for a benefit?

The men and women that serve our nation in the Armed Forces are a unique and diversified group of individuals. So too are their families, and the circumstances they face.

Currently, the Veterans Benefits Administration (VBA) has detailed the available benefits offered to surviving family members on the [VBA website](#), selecting what group you are inquiring about (Spouse, Parent, or Child).

After you have selected who you are inquiring about, you will see a listing of the available benefits as well as the eligibility criteria. Simply review the criteria to determine if you or your family will be eligible for any particular benefit.

Link available here: <https://www.va.gov/family-and-caregiver-benefits/>

7. As survivor, am I eligible for my loved one's month of death compensation?

The Department of Veterans Affairs (VA) announced immediate actions to quickly identify and pay surviving spouses who

are eligible to receive the deceased Veteran’s VA compensation or pension benefit for the month of the Veteran’s death.

This benefit is only payable to surviving spouses of Veterans who were receiving VA compensation or pension benefits at the time of their death.

Because VA does not always know if a Veteran is survived by a spouse, some surviving spouses have not received the month -of-death benefit to which they are entitled.

If you are a surviving spouse of a Veteran who was receiving VA benefits at the time of death and believe you may be eligible for the month-of-death benefit.

8. What is the difference between DIC and SBP?

Dependents Indemnity Compensation (DIC) is an entitlement benefit paid to eligible survivors (Spouse, unmarried child) of certain deceased service members and Veterans. The DIC benefit is managed by the Department of Veterans Affairs (VA) and is dispersed to surviving family members that meet specific criteria. For further details about DIC, please visit <https://www.va.gov/family-and-caregiver-benefits/survivor-compensation/dependency-indemnity-compensation/>

The Survivor Benefit Program (SBP) is voluntary annuity program offered for purchase to service members as a retirement benefit for family members. This program is managed by the Department of Defense (DoD) (not the Department of Veterans Affairs). As noted, participation in this program is voluntary and not all service members opt to participate. To learn more about SBP, please visit: <https://www.dfas.mil/RetiredMilitary/survivors/Understanding-SBP-DIC-SSIA/>

9. What is the difference between DIC and Survivor's Death Pension?

Dependents Indemnity Compensation (DIC) is an entitlement benefit paid to eligible survivors (Spouse, unmarried child) of certain deceased service members and Veterans. The DIC benefit is managed by the Department of Veterans Affairs and is dispersed to surviving family members that meet specific criteria.

Survivor’s Pension is a needs-based financial benefit payable to the un-remarried surviving spouse or unmarried child of a deceased wartime Veteran. As noted, eligibility for this benefit is based upon the financial need of the applicant.

For further details, please visit: <https://www.va.gov/family-and-caregiver-benefits/survivor-compensation/survivors-pension/>.

10. Is DIC taxable income?

No, it is not. Dependents Indemnity Compensation (DIC) is exempt, and is not considered to be taxable income.

For more information, please visit: www.IRS.gov

11. What is CHAMPVA?

The Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) is a comprehensive health care program in which the VA shares the cost of covered health care services and supplies with eligible beneficiaries. The program is administered by Health Administration Center and our offices are located in Denver, Colorado.

To be eligible for CHAMPVA, you cannot be eligible for TRICARE/CHAMPUS and you must be in one of these categories:

The spouse or child of a veteran who has been rated permanently and totally disabled for a service-connected disability by a VA regional office, or

The surviving spouse or child of a veteran who died from a VA-rated service connected disability, or

The surviving spouse or child of a veteran who was at the time death rated permanently and totally disabled from a service connected disability, or

The surviving spouse or child of a military member who died in the line of duty, not due to misconduct (in most of these cases, these family members are eligible for TRICARE, not CHAMPVA).

To learn more about CHAMPVA, please visit: <https://www.va.gov/family-and-caregiver-benefits/health-and-disability/champva/>

12. As a surviving spouse, am I eligible for VA medical care?

The Department of Veterans Affairs (VA) offers CHAMPVA healthcare coverage to family members that meet specific eligibility criteria. The Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) is a comprehensive health care program in which the VA shares the cost of covered health care services and supplies with eligible beneficiaries. The program is administered by Health Administration Center and our offices are located in Denver, Colorado.

Due to the similarity between CHAMPVA and the Department of Defense (DoD) TRICARE program (sometimes referred to by its old name, CHAMPUS) the two are often mistaken for each other. CHAMPVA is a VA program whereas TRICARE is a regionally managed healthcare program for active duty and retired members of the uniformed services, their families, and survivors. In some cases, a Veteran or survivor may look to be eligible for both/ either program on paper. However, if you are a military retiree, or the spouse of a Veteran who was killed in action, you are and will always be a TRICARE beneficiary, you cannot choose between the two.

13. How do I update my contact information?

Simple! To update your contact information, just call the National Call Center (NCC) at **800-827-1000**.

14. What education benefits are available and what is the Sgt. Fry Scholarship?

Dependents' Educational Assistance (DEA) provides education and training opportunities to eligible dependents of certain Veterans. The program offers up to 45 months of education benefits. These benefits may be used for degree and certificate programs, apprenticeship, and on-the-job training. If you are a spouse, you may take a correspondence course. Remedial, deficiency, and refresher courses may be approved under certain circumstances

The [Fry Scholarship](#) offers additional education choices to the surviving children of military personnel that have been killed in action. Marine Gunnery Sergeant John D. Fry, 28, of Lorena, Texas, only had a week left in his Iraq tour in 2006 when he injured his hand. He was given the option of leaving Iraq after the injury and going home with a Bronze Star. He declined and volunteered to go on one last run to defuse bombs. After working seven more hours, Gunnery Sgt. Fry was killed March 8, 2006, by an improvised explosive device in Anbar province, Iraq. He left behind his widow and three small children.

Public Law 111-32, The Marine Gunnery Sergeant John David Fry Scholarship, amends the Post-9/11 GI Bill to expand the benefit to children of fallen U.S. soldiers who died in the line of duty after September 10, 2001.

For more information, visit: <https://www.va.gov/family-and-caregiver-benefits/education-and-careers/fry-scholarship/>

15. How can I access information about VA Education Benefits for myself or for my children?

The Department of Veterans Affairs offers multiple education benefits for surviving family members of deceased Veterans and service members. For additional information regarding Education Benefits, please visit: <https://www.va.gov/education/about-gi-bill-benefits/>

16. What are VGLI/SGLI and how do I file a claim?

The Veterans Group Life Insurance & Service members Group Life Insurance (VGLI/SGLI) are life insurance products offered to Veterans and active-duty personnel. Both programs are voluntary and may be opted out of by the service member or Veteran. As such, not all surviving family members may file a claim on this benefit.

To learn more about these programs or file a claim, please visit: <https://www.va.gov/life-insurance/options-eligibility/>

17. How do I get a copy of my loved one’s DD-214 or DD-1300?

The DD-214 and DD-1300 are important service records for your loved one and are often required when applying for VA Survivor Benefits. Unfortunately, the Department of Veterans Affairs does not maintain copies of these service records.

To obtain a copy of these records, you will need to request them from the National Archives. More information can be found on

their website at www.archives.gov/veterans/military-service-records.

18. Who is eligible for Veteran Center grief counseling, and how can I locate a center?

The Department of Veteran Affairs (VA) offers bereavement counseling to parents, spouses, and children of Armed Forces personnel who died in the service of their country. Also eligible are family members of reservists and National Guardsmen who die while on duty.

To locate a VA Vet Center near you, [please click here](#).

19. Am I eligible for a VA Home Loan as a widow/ widower?

The unmarried surviving spouse of a veteran who died on active duty or as the result of a service-connected disability is eligible for the VA home loan benefit.

In addition, a surviving spouse who obtained a VA home loan with the veteran prior to his or her death (regardless of the cause of death), may obtain a VA guaranteed interest rate reduction refinance loan.

To learn more, please visit: <https://www.va.gov/housing-assistance/home-loans/loan-types/>

20. How can I find information about homeless shelters within my community?

The National Coalition for Homeless Veterans provides a listing of Non-Government Organizations (NGO's) that provide services to Veterans and Survivors. Visit <http://www.nchv.org/network.cfm> to get more information about services in your community.

21. My question is not covered above, is there another source of information I can check?

Of course! To search additional VA FAQ’s or ask your own question, please visit Ask VA (AVA): <https://ask.va.gov/>

(Source: <https://www.va.gov/SURVIVORS/FAQs.asp#FAQ1>)



Q: Why can't you trust an atom?
A: Because they make up everything.

What's a Vietnam Vet?

Just before Veterans' Day, a college student named Adam was working on a school assignment in which he was supposed to obtain original narratives from "people old enough to have actually been in Vietnam."

Having been there, L. Daniel Mouer asked how he could help. Adam asked him to respond to the question "What is a Vietnam Veteran?" This is what Mr. Mouer wrote:

"Vietnam veterans are men and women, dead or alive, whole or maimed, sane or haunted. We grew from our experiences, or were destroyed by them, or we struggle to find some place in between. We lived through hell or we had a pleasant, if scary, adventure. We were Army, Navy, Marines, Air Force, Red Cross, and civilians of all sorts. Some of us enlisted to fight for God and Country, and some were drafted. Some were gung-ho, and some went kicking and screaming.

Like veterans of all wars, we lived a tad bit--or a great bit--closer to death than most people like to think about. If Vietnam vets differ from other vets, it is primarily because many of us never saw the enemy or recognized him or her. We heard gunfire and mortar fire but rarely looked into enemy eyes. Those who did, are often haunted for life by those eyes, those sounds, those electric fears that ran between ourselves and our enemies, and the likelihood of death for one of us. Or we get hard, calloused, tough. All in a day's work. Life's a bitch then you die. But most of us remember and get twitchy, worried, sad. We are crazies dressed in cammo, wide-eyed, wary, homeless, and drunk. We wear Brooks Brothers suits doing deals downtown; we are housewives, grandmothers, and church deacons; we are college professors engaged in rational pursuit of the truth about the history, politics or culture of the Vietnam experience; and we are sleepless. We are often sleepless.

We pushed paper, pushed shovels. We drove jeeps, operated bulldozers, built bridges; we toted machine guns through dense brush, deep paddy, and thorn scrub. We lived on buffalo milk, fish heads and rice. Or C-rations. Or steaks and Budweiser. We did our time in high mountains drenched by endless monsoon rains or on the dry plains or on muddy rivers or at the most beautiful beaches in the world.

We wore berets, bandanas, flop hats, and steel pots. Flak jackets, canvas, rash and rot. We ate cloroquine and got malaria anyway. We got shots constantly but have diseases nobody can diagnose.

We spent our nights on cots or shivering in foxholes filled with waist-high water or lying still on cold wet ground, our eyes imagining Charlie behind every bamboo blade. Or we slept in hotel beds in Saigon or barracks in Thailand or in cramped ship berths at sea.

We feared we would die or we feared we would kill. We simply feared, and often we still do. We hate the war or believe it was the best thing that ever happened to us. We blame Uncle Sam or Uncle Ho and their minions and secretaries and apologists for every wart or cough or tic of an eye. We wonder if Agent Orange got us.

Mostly, we wish we had not been so alone. Some of us went with units, but many, probably most of us, were civilians one day, jerked up out of "the world," shaved, barked at, insulted,

humiliated, de-egoized and taught to kill, fix radios, and drive trucks. We went, we put in our time, and then were equally, ungraciously plucked out of the morass and placed back into the real world. But now we smoked dope or drank heavily. Our wives or husbands seemed distant and strange. Our friends wanted to know if we shot anybody.

And life went on. It had already been going on, as if we hadn't been there, as if Vietnam was a topic of political conversation, a college protest, or just news copy, and not a matter of life and death for tens of thousands. Vietnam vets are people just like you. We served our country proudly, reluctantly, or ambivalently. What makes us different - what makes us Vietnam vets -- is something we understand, but we are afraid nobody else will understand. But we do appreciate your asking.

Vietnam veterans are white, black, beige and shades of gray. Our ancestors came from Africa, Europe, Asia, or crossed the Bering Sea land bridge in the last Ice Age and formed the nations of American Indians, built pyramids in Mexico, or farmed acres of corn on the banks of Chesapeake Bay. We had names like Rodriguez, Stein, Smith and Kowalski. We were Americans, Australians, Canadians, and Koreans ... but most Vietnam veterans are Vietnamese.

We were farmers, students, mechanics, steelworkers, nurses, and priests when the call came that changed us all forever. We had dreams and plans, and they all had to change...or wait. We were daughters and sons, lovers and poets, beatniks and philosophers, convicts and lawyers. We were rich and poor -- mostly poor. We were educated or not -- mostly not. We grew up in slums, in shacks, in duplexes, in bungalows and houseboats, hooches and ranches. We were cowards and heroes -- sometimes we were even cowards one moment and heroes the next.

Many of us have never seen Vietnam. We waited at home for those we loved. For some of us, our worst fears were realized. For others, our loved ones came back but never would they be the same.

We came home, marched in protest marches, sucked in tear gas, and shrieked our anger and horror for all to hear. Or we sat alone in small rooms, in VA hospital wards, in places where only the crazy ever go. We are Republicans, Democrats, Socialists, Confucians, Buddhists and Atheists -- though as usually is the case, even the atheists among us sometimes prayed to get out of there alive.

We are hungry, or sated, full of life or clinging to death. We are the injured, or we are healers, despairing or hopeful, loved or lost. We got too old too quickly, but some of us have never grown up. We want desperately to go back to heal wounds and revisit the sites of our horror. Or we want never to see that place again, to bury it, its memories, its meaning. We want to forget, and we wish we could remember.

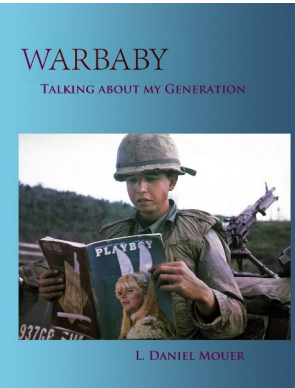
Despite our differences, we have so much in common. There are few of us who don't know how to cry, though we often do it alone when nobody will ask "what's wrong?" See, we're afraid we might have to answer.

Adam, if you want to know what a Vietnam veteran is, get in your car or cage a friend with a car to drive you. Go to Washington. Go to the Wall on Veterans Day weekend. There will be hundreds there ... no, thousands. Watch them. Listen to them. I'll

be there. Come touch the Wall with us. Rejoice a bit. Cry a bit. No, cry a lot. I will. I'm a Vietnam Veteran and, after all these years, I think I am just beginning to understand what that means ...

(Editors note: I found this on the internet and it apparently was written by L. Daniel Mouer who has written a number of books including Warbaby: Talking About My Generation that can be found with his other books on Amazon. Use this link:

https://www.amazon.com/Warbaby-Talking-About-My-Generation-ebook/dp/B0091GZFPY/ref=sr_1_1)





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Does anyone remember the Swatch, a watch made in Switzerland?

Thank god Croatia didn't come up with the idea first. Just imagine if someone were to ask you what time is it?

"Oh pardon me while I look at my crotch."

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The Man - The Legend

Chuck Norris' roundhouse kick is so powerful, it can be seen from outer space by the naked eye.

If you want a list of Chuck Norris' enemies, just check the extinct species list.

Chuck Norris has never blinked in his entire life. Never.

Chuck Norris once shot an enemy plane down with his finger, by yelling, "Bang!"

Chuck Norris does not use spell check. If he happens to misspell a word, Oxford will change the spelling.

Some kids pee their name in the snow. Chuck Norris can pee his name into concrete.

Chuck Norris' calendar goes straight from March 31st to April 2nd, because no one fools Chuck Norris.

Chuck Norris counted to infinity... twice.

Chuck Norris can speak Braille.

Chuck Norris can have both feet on the ground and kick butt at the same time.

Chuck Norris can do a wheelie on a unicycle.

Chuck Norris stands faster than anyone can run.

Once a cobra bit Chuck Norris' leg. After five days of excruciating pain, the cobra died.

Chuck Norris once won a game of Connect Four in three moves.

When the Boogeyman goes to sleep every night he checks his closet for Chuck Norris.

Chuck Norris can slam revolving doors.

Chuck Norris does not hunt because the word hunting implies the possibility of failure. Chuck Norris goes killing.

The dark is afraid of Chuck Norris.

Chuck Norris can kill two stones with one bird.

Chuck Norris can play the violin with a piano.

The MEDAL OF Honor United States Marine Corps



The Medal of Honor is the highest award for bravery that can be given to any individual in the United States. In judging men for receipt of the medal, each service has established its own regulations. The deed must be proved by incontrovertible evidence of at least two eyewitnesses; it must be so outstanding that it clearly distinguishes the recipient's gallantry beyond the call of duty from lesser forms of bravery; it must involve the risk of his life; and it must

be the type of deed which, if he had not done it, would not subject him to any justified criticism.

The idea for the Medal of Honor was born during the Civil War as men fought gallantly and oftentimes displayed great heroism. George Washington originated the Purple Heart in 1782 to honor brave soldiers, sailors and Marines. From that time until the Civil War, Certificates of Merit and a "brevet" system of promotions were used as military awards. The first military decoration formally authorized by the American Government as a badge of valor was the Medal of Honor for enlisted men of the Navy and Marine Corps. It was authorized by Congress and approved by President Abraham Lincoln on 21 December 1861. The medal for the Army and Voluntary Forces was authorized on 12 July 1862.

The medal is awarded "in the name of the Congress of the United States" and for this reason, it is often called the Congressional Medal of Honor. It is only on rare occasions, however, that Congress awards special Medals of Honor. An Executive Order, signed by President Theodore Roosevelt on 20 September 1905, directed that ceremonies of award "will always be made with formal and impressive ceremonial" and that the recipient "will, when practicable, be ordered to Washington, D.C., and the presentation will be made by the President, as Commander in Chief, or by such representative as the President may designate."

Since 1862, 297 Marines have been awarded the Medal of Honor. The first recipient was Corporal John F. Mackie, who during the attack on Fort Darling at Drewry's Bluff, Virginia, "fearlessly maintained his musket fire against the rifle pits on shore, and when ordered to fill vacancies at guns caused by men wounded and killed in action, manned the weapon with skill and courage." Sixteen other enlisted Marines were awarded the medal during the Civil War. Another 63 Marines would

receive the Medal of Honor in the 1871 Korean Campaign, the Spanish-American War, the Philippine Insurrection and the Boxer Rebellion. Marine and Navy officers were first declared eligible for the award in 1915, and later that year, nine medals were awarded to officers for the landing at Vera Cruz, Mexico, in 1914. The "Banana Wars" saw a total of another 13 medals conferred on enlisted Marines and officers. Only two Marines, Major General Smedley D. Butler and Sergeant Major Daniel Daly were awarded Medals of Honor for two separate actions: Vera Cruz (1914) and Haiti (1915) for Butler, and Peking (1900) and Haiti (1915) for Daly. Although only 8 Marines received the medal for actions during World War I, 82 medals were given to Marines during World War II, 42 were awarded for the Korean War, and another 57 for the Vietnam War. The most recent Medal of Honor awarded to a Marine was for gallantry in action during the war in Vietnam.

There have been four major variations in the Navy Medal of Honor since its inception, the most distinctive change being the "Tiffany Cross" which was instituted in early 1919 and used until the current medal was re-established in 1942. The Navy Medal of Honor is made of bronze, suspended by an anchor from a bright blue ribbon, and is worn about the neck. The ribbon is spangled with a cluster of 13 white stars representing the original States. Each ray of the five pointed star contains sprays of laurel and oak and is tipped with a trefoil. Standing in bas-relief, circled by 34 stars representing the 34 states in 1861, is Minerva who personifies the Union. She holds in her left hand the fasces, an ax bound in staves of wood, which is the ancient Roman symbol of authority. With the shield in her right hand, she repulses the serpents held by the crouching figure of Discord. The reverse of the medal is left blank, allowing for the engraving of the recipient's name and the date and place of his deed.

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A Marine Corps weapons company section sets up their mortar to take communist positions under fire near Chosin Reservoir. Photo by Katie Lange, courtesy of the U.S. Marine Corps.

“War Never Changes”—a Marine, a “Hardcore Warrior,” and a Connection Across Generations in Uniform

By Andrew van Wey

I was the only one sitting at the bar, my back to the entrance and a beer in my hand. But I saw him walk in, through the mirror that hung on the wall behind the rows of liquid courage and bottled vice.

He sat to the left of me, with one chair between us, and ordered a Chivas on the rocks. I looked at him, and he at me, through our reflected images on the glass. I had no clue who he was, but there was something palpably familiar about him, and it didn’t stem from the fact that he looked like Sam Elliot portraying Virgil Earp.



Andrew van Wey, left, with Jack Sutherland in Husaybah, Iraq. Photo courtesy of the author.

Despite the wide-brimmed Stetson and the anachronistic, flowing mustache, the familiarity came from the realization that he was not just looking at me: He was sizing me up. He discreetly watched my every move, and when my eyes happened upon his, we both glanced away. And I realized that I was sizing up this old man, too.

He was calm, in complete control of himself and the entire room. Yet underneath the stoic visage and the aquiline eyes

was an echo of circumspection: a wariness, from a wayworn soul.

Almost imperceptibly, his eyes moved constantly. He looked over his shoulder in the mirror at whoever walked through the door. And those sun-beaten slits shot from side to side as he lit his cigarette.

He would not break the silence of his own volition, in part because of pride, but mostly out of caution. So, I decided to shift left, into the empty chair that represented our invisible boundary line.



Gulf Coast veterans participate in the Gulf Coast Veteran’s Day Roll-Thru and Wave Parade outside the Armed Forces Retirement Home at Gulfport, Mississippi, Nov. 7. Keesler Air Force Base leadership participated in the parade in support of all veterans past and present. Photo by Kemberly Groue, courtesy of the U.S. Air Force.

“Excuse me, sir,” I said.

His face froze while he glared at me in his peripheral vision.

“Where are you on the job at?” I asked.

He turned to me. When my eyes met his, I could see that he wasn’t looking at me; he was looking through me.

“What was that?” he said, wrinkling his leathery forehead.

“Who do you work for?” I repeated.

“I’m a federal marshal. You in the military?”

“No, sir,” I said. “I am not.”

“You a cop?”

“No, sir.”

“I’m never wrong about that. ... ” he grumbled, stroking his mustache and turning back to his cocktail.

“I just got out of the Marine Corps, and I’ll be starting the police academy real soon,” I said.

“No shit,” he said “I knew it. I don’t normally tell people what I

do. The only reason I’m talking to you is because I saw you sizing me up.” He took a drag of his cigarette.

“Funny, that’s the only reason why I spoke to *you*,” I said, half-smiling.

That was the beginning of a conversation that lasted roughly an hour and a half. We spoke of many things—not just the same old war stories two fighting men inevitably tell each other; but the real, deep-down-inside stuff that warriors know but no one else can easily understand. Like, why we served and will still serve. And why have we done it for the better part of our lives.

He told me his military history, of parachuting in on D-Day and then volunteering to fight the war in the Pacific when Hitler’s Reich fell. He told me about getting out of the Army and then getting recalled to fight in Korea. He was part of the legendary Marine Corps battle at the Chosin Reservoir, the mythical “Frozen Chosin,” as we’re taught.

As an artillery forward observer, he got separated from his unit during a rapid enemy advance. After a chaotic fighting retreat, his small cadre of soldiers found themselves cut off. Out of necessity, they joined the closest unit to their positions, which happened to be a Marine battalion.

“I was stuck with crazy Goddamn jarheads for weeks!” he said, and laughed.

He also told me the story of how he lost his finger during a battle. He and his friends dug through the sand to find it. He had it sewn back on at a MASH unit, and then he went right back into the fray.

But even more amazing than his exploits was that he wanted to hear about mine and even pushed me to tell him when I was at first hesitant.

We found that, even though my adventures paled in comparison, we had a lot in common. We were both recalled into the military. We both volunteered specifically for combat tours, even though we had already served our time. Just as in my family, all his brothers were in the military. He went into law enforcement when he was finished with the Army, finally telling Uncle Sam to piss off when the Vietnam War started. And when I would tell him about a specific instance in battle where everything seemed utterly f.ked up, he would burst into laughter and slap my back: “Shit never changes! War never changes. ... ”

When the laughter subsided, we turned to our drinks and looked at each other through the mirror again, but this time with curiosity rather than suspicion. We had walked in each other’s boots, down the same beaten and treacherous paths.

“You can never get comfortable,” he said. “If you’re comfortable, if you think you’re good enough ...”

“... You’re dead.” I nodded.

He nodded and took a drink from his glass. His crows’ feet became more apparent when he smiled from underneath his mustache. I smiled, too, and put a cigarette in my mouth. He flipped open his Zippo and offered me the flame. I drew it in and blew the smoke out of my nostrils.

“You’re making me miss the Corps, you old bastard,” I said.

“You did your time, don’t go back,” he said. “I didn’t, but I still serve. I’m a patriot through and through. I’m 78, and I’ll serve till I can’t wipe my own ass.” He took a sip from his glass and smacked his lips.

“Here’s to you. ...” He held out his hand. I looked at it and then looked at him.

“All the respect for you, sir—you’re what us young guns look up to,”” I said, smiling and grasping his hand.

He wasn’t John Wayne or Johnny Rambo. He wasn’t Wyatt Earp or Doc Holliday. He was what Hollywood had imitated for so long, and what most men really sought to emulate. He was a true warrior, without want for glory, content in living and serving.

He finished his drink and stood to leave.

“I’ll see ya around,” I nodded.

“Yeah,” he said.

He walked out the door, away from his past. And I sat in silence watching the future leave the room. We didn’t even ask each others’ names, but such trivialities didn’t matter; I knew who he was, I had known him for most of my life. He was my father, my brother, my teacher, and my comrade in arms.

(Source: <https://thewarhorse.org/war-never-changes-a-marine-a-hardcore-warrior-and-a-connection-across-generations-in-uniform/>)

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