

Disabled American Veterans Greater Daytona Chapter & Unit 84 January/February 2023 Newsletter Chapter Phone: 386-252-4551 - Fax: 386-252-4613 Service Office: 386-252-8738 Service Office Open: Monday, Wednesday, Friday 9:00am-12:00 Noon Internet: davchapter84@cfl.rr.com Mask are optional



### Chapter News



Photo with National Commander at Midwinter Conference Joe Parsetich and his wife Meg.

Congratulations to all whom attended Aldo Stancato, Clifford Doubledee, Ralph Smith, Anthony Johnson, Steve Bell, Mike Gardner, Rosemary Washington all completed service officer training, please note the service offices have been moved to main building telephone number has changed 386-252-4551 Mon-Wed - Fri 9am until 12pm.

Elections are coming up soon please be ready with nominations we need members to step up.

> Submitted Harold R. Holloway Past Commander, Chapter 84 Greater Daytona



U.S. Department of Veterans Affairs News Release

Office of Public Affairs Media Relations Washington, DC 20420 (202) 461-7600 www.va.gov

FOR IMMEDIATE RELEASE Jan. 13, 2023

#### Starting Jan. 17, Veterans in suicidal crisis can go to any VA or non-VA health care facility for free emergency health care

WASHINGTON - Starting Jan. 17, Veterans in acute suicidal crisis will be able to go to any VA or non-VA health care facility for emergency health care at no cost - including inpatient or crisis residential care for up to 30 days and outpatient care for up to 90 days. Veterans do not need to be enrolled in the VA system to use this benefit.

This expansion of care will help prevent Veteran suicide by guaranteeing no cost, world-class care to Veterans in times of crisis. It will also increase access to acute suicide care for up to 9 million Veterans who are not currently enrolled in VA.

Preventing Veteran suicide is VA's top clinical priority and a top priority of the Biden-Harris Administration. This effort is a key part of VA's 10-year <u>National Strategy for Preventing Veteran Suicide</u> and the Biden-Harris administration's plan for <u>Reducing Military and Veteran</u> <u>Suicide</u>. In September, VA released the <u>2022 National Veteran Suicide Prevention Annual Report</u>, which showed that Veteran suicides decreased in 2020 for the second year in a row, and that fewer Veterans died by suicide in 2020 than in any year since 2006.

"V eterans in suicidal crisis can now receive the free, world-class emergency health care they deserve – no matter where they need it, when they need it, or whether they're enrolled in VA care," said VA Secretary for Veterans Affairs Denis McDonough. "This expansion of care will save Veterans' lives, and there's nothing more important than that."

VA has submitted an interim final rule to the federal register to establish this authority

under section 201 of the Veterans Comprehensive Prevention, Access to Care, and Treatment (COMPACT) Act of 2020. The final policy, which takes effect on Jan. 17, will allow VA to:

- Provide, pay for, or reimburse for treatment of eligible individuals' emergency suicide care, transportation costs, and follow-up care at a VA or non-VA facility for up to 30 days of inpatient care and 90 days of outpatient care.
- Make appropriate referrals for care following the period of emergency suicide care.
- Determine eligibility for other VA services and benefits.
- Refer eligible individuals for appropriate VA programs and benefits following the period of emergency suicide care.

Eligible individuals, regardless of VA enrollment status, are:

- Veterans who were discharged or released from active duty after more than 24 months of active service under conditions other than dishonorable.
- Former members of the armed forces, including reserve service members, who served more than 100 days under a combat exclusion or in support of a contingency operation either directly or by operating an unmanned aerial vehicle from another location who were discharged under conditions other than dishonorable.
- Former members of the armed forces who were the victim of a physical assault of a sexual nature, a battery of a sexual nature, or sexual harassment while serving in the armed forces.

Over the past year, VA has announced or continued several additional efforts to end Veteran suicide, including <u>establishing 988 (then press</u> 1) as a way for Veterans to quickly connect with caring, qualified crisis support 24/7; proposing a new rule that would <u>reduce or</u> <u>eliminate copayments</u> for Veterans at risk of suicide; conducting an ongoing public outreach effort on <u>firearm suicide prevention and lethal means</u> <u>safety</u>, and leveraging a <u>national Veteran suicide prevention awareness campaign</u>, "Don't Wait. Reach Out."

####

Reporters covering this issue can download <u>VA's Safe Messaging Best Practices</u> fact sheet or visit <u>ReportingOnSuicide.org</u> for important guidance on how to communicate about suicide.

If you're a Veteran in crisis or concerned about one, contact the Veteran's Crisis Line to receive 24/7 confidential support. You don't have to be enrolled in VA benefits or health care to connect. To reach responders, Dial 988 then Press 1, chat online at <u>Veteran's Crisis Line.net/Chat</u>, or text 838255. Disabled American Veterans Greater Daytona Chapter & Unit 84

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Darlene Spence, Auxiliary National Commander



### DAV Auxiliary looks to engage youth

I want to wish everyone a happy new year full of hope and drive to persevere in our shared mission with DAV. The start of a year is a great time to look at how we can create new beginnings and help reach lofty goals.

Please make time to share a little joy and appreciate the good moments our mission positions us to experience. Pay attention to those moments,

celebrate them and make them known to others. Sharing victories, both large and small, experienced by veterans and their families spreads hope to others.

Have a conversation with younger members in your family about joining as <u>Auxiliary Junior</u> <u>members</u>. Encourage them to participate to experience the shared bonds found within the veteran community. The exposure to our nation's military members and those who have sacrificed for our country benefits everyone and can even inspire our youth to serve.

For example, Army Pvt. Lianna D. Madden is the great-granddaughter of DAV <u>Past National Commander Delphine Metcalf-Foster</u>. Lianna spent time during high school volunteering at multiple VA medical centers in California and is now a member of Auxiliary Unit 7 in Oakland. She was incredibly proud to let me know she finished her combat medic course at Fort Sam Houston in San Antonio and is currently serving at Joint Base Lewis-McChord near Tacoma, Washington.

Other former Auxiliary Junior members are Army 1st Sgt. George Greene, who is now assigned to a headquarters and support company at Fort Sam Houston, and Army Capt. Veronica Perez, who now works in human resources for the 345th Combat Support Hospital in Jacksonville, Florida.

All three of these soldiers benefited from the experiences of being Auxiliary Junior members. Their interactions with veterans—Forget-Me-Not drives, social events at VA medical centers and nursing homes, parades and flag ceremonies, and more—put them in direct contact with those who served.

Junior members are our future in so many ways. I strongly believe every junior member is vital to the success of our organization. These young people have the potential to provide a tremendous positive impact on the future of our mission. Make them feel as special as they are, because each one of them has amazing potential.

Every time you interact with a young person is an opportunity to inspire and convey the true meanings of service, sacrifice, honor and duty. So invite a son, daughter, niece or nephew to spend some time with the organization. They will get a firsthand education on what these attributes mean—and could very well end up living them, like Lianna, George and Veronica.



When Brenda Reed was a young Army private stationed in Germany, she was issued combat boots made for men. Reed served from 1978-1984, when women were relatively new in the regular Army, and it was fairly common to be issued men's gear.

Not long after, she broke her foot in four places while running on cobblestone streets in the ill-fitting boots, which eventually led to the amputation of her leg.

"Through the years that followed, I would get stress fractures in the same areas over and over and I developed osteoporosis in that foot and ankle and in May 2009, I stepped down off the bottom step of a step stool and my leg shattered a third of the way up, severing my leg in half," recalled Reed.

After several major surgeries, Reed's leg was amputated. However, Reed quickly learned that VA was not as prepared to help a woman veteran amputee as they should have been.

"I got my first prosthetic six weeks after the amputation and I didn't have any problems learning to walk on it," said Reed. "But it was getting the fit, which still isn't good. I was under the impression I would be able to get a foot my size that looked similar and it was just the opposite."

Reed was given a prosthetic foot designed for a male. As a solution to the poor fit, the VA opted to shave off parts of the prosthetic rather than providing her with one created for women.

"I was told [by the VA tech] I was the only woman that he had seen and he wasn't exactly sure what to do because he had never done prosthetics for women," Reed said. "I told him it shouldn't be any different than doing it for a man. A fit is a fit. If it doesn't fit, it isn't right."

## **Meet America's Women Veterans**



Cali Mullins



Lisa Kirk



Belinda Hill



Calli Rios



Leeia Isabelle



Delphine Metcolf-Foster



JoAnn Martinez

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For Callie Rios, the military represented a bond—a brotherhood, a sisterhood. But after she was sexually assaulted by a fellow soldier at Fort Knox, that trust was shattered.

"When I went to report it, of course the military police didn't take a report, they just called the commander and said to deal with this on the unit level," said Rios. "It felt like it was me against the unit. It made me feel really isolated and really alone."

Like so many other military sexual assault survivors, Rios felt unable to talk about her experience.

"I don't think I really talked about it for several years," Rios recalled. "Getting to the point, actually saying that this happened, that was the biggest hurdle."

It was a female chaplain who ultimately provided Rios some support, and later helped inspire her to channel the trauma she suffered in the Army into supporting her fellow veterans.

"I came back out of it, and now I'm ready to help other women who were in the same situation as I was," said Rios.

As an active in DAV member in Texas, she found herself stepping in to assist in the VA claims filing process for other women veterans who have also experienced military sexual trauma.

"We had an MST claim, but...she didn't want to discuss the issue and she tried to avoid it," said Rios. "My commander suggested I go and talk to her, have a one-on-one conversation, and by telling my story she finally felt that it was safe. Just having a woman there to talk about an MST claim is easier that having a male there sometimes."

In 2017 she spearheaded a women veterans conference, Heroes in Heels, which helped link mental health practitioners and former servicewomen with invisible wounds.

Out of the darkness of her personal experience with sexual assault came a passion for helping veterans, and it's what drives her commitment to ensuring others don't hesitate to seek out mental health assistance.



Jo Ann Martinez has dedicated her time to advocating for women veterans ever since she separated from the Air Force in 2002. She served as Chair and member on DAV's National Interim Women Veterans Committee for three years and has chaired the Department of California's Legislative and Veterans' Rights Committee.

Advocating to improve patient and family-centered care, Martinez joined the VA Palo Alto Health Care System's Veterans and Family Advisory Council in 2013 and continues to serves as co-chair and on various other committees focused on improving the lives of America's women veterans and their families.

"Although VA has taken steps to try and improve it their healthcare system for women veterans, there's still a long way to go," said Martinez. "The influx of women veterans utilizing the VA healthcare system—really designed for men—has increased significantly over the last ten years or so."

When Martinez first started using the VA for her own healthcare in 2002, she said she was never addressed as a veteran, that it was assumed she was a nurse or dependent. That culture, she said, is still an issue across the country.

"To this day, I run into a lot of the same problems," Martinez said. "I've be called 'sir', I've had to wait 30 minutes past my appointment time because they didn't realize I was the veteran in the room waiting." Martinez said, despite the women veterans awareness campaigns the VA has pushed in recent years, many women veterans still feel like the culture in the military and VA keeps women from identifying as veterans.

"With the Interim Women Veterans Committee, what we did was have focus groups, and that was one of the main things that kept popping up," she said. "It basically comes down to military cultural awareness and women veterans, how they serve, and some of the unique needs that we have. They're not being recognized."

Advocacy, said Martinez, is a certain way women veterans can make their voices heard.

"It's important to have a seat at the table, we have all these complaints, but there's a way to act," she said. "We have to think about what our solutions are. What's important about women veterans being active, is that you're not just complaining, you're being part of the solution. You're actually putting your voice in and talking about the issues."

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