

Congress of the United States

Washington, DC 20515

August 2, 2019

The Honorable Robert Wilkie
Secretary of Veterans Affairs
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Secretary Wilkie,

We write to you regarding the implementation of updated training for Department of Veterans Affairs (VA) staff responsible for processing claims involving Military Sexual Trauma (MST). We urge you to incorporate input from and, where possible, instruction by MST survivors and survivor advocates as part of such training. The opportunity to convey their personal experience navigating the VA benefits system in the wake of an assault will be imperative to ensuring the training's intended impact.

As you know, an August 2018 Inspector General (OIG) report found that 49% of surveyed MST-related claims denied by the Department of Veterans Affairs contained processing errors. This is a tragic and horrifying number. Behind that statistic are survivors who, when their claim is denied, feel retraumatized, untrusted, and ignored. Such a staggering rate of errors also serves to discourage other survivors from reporting in the first place and accessing the care and benefits they so urgently need. We appreciate your commitment to rectifying this situation and are gratified that veterans can access Veterans Health Administration care if they identify themselves as a victim of MST. However, the process for MST survivors to get consideration for a service-connected disability and other benefits clearly requires improvement. We are eager to work with you to address how claims are handled and ensure all are properly processed.

OIG made six recommendations that your Department has committed to implement moving forward, including improved Talent Management System training for specialized claims processors working on MST related cases. We feel strongly that such training must result in all relevant staff becoming trauma-informed and fully-prepared to work with MST survivors. As described by the Substance Abuse and Mental Health Service Administration (SAMSHA), a trauma informed approach:

1. Realizes the widespread impact of trauma and understands the potential paths for recovery from that trauma;
2. Recognizes the signs and symptoms of trauma
3. Responds by fully integrating knowledge about trauma into policies, procedures, and practices
4. Seeks to actively resist re-traumatization.

Trauma-informed claims processors will be better able to understand the concerns of survivors. They will have a more complete picture as to why a given survivor may have been slow to report, provided limited details, or other facets to a case that could result in a denial of VA benefits. This understanding is essential to properly reviewing cases, and no one can convey that

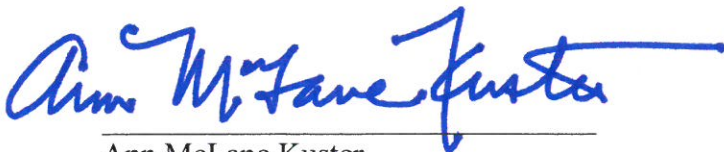
more clearly than survivors and trained advocates. For some survivors, retelling their experience is devastating; others have reached a point where they can draw strength and help protect others by sharing what they have endured. Programs such as the Pixel Project, the Voices and Faces Project, and the nationally recognized Sexual Assault Forensic Examiner Training Institute could serve as valuable models for the VA to draw from. The VA should consider hiring an expert in providing trauma informed service to survivors who can oversee engagement with survivors of MST and train VA staff in best practices in providing support to MST survivors. The opportunity to engage with survivors and advocates will help convey to staff the intricacies and nuances of trauma-informed care.

In answering questions before the House Veterans Affairs Committee on June 20, 2019, Deputy Under Secretary for Field Operations Willie Clark was asked about including survivor input and involvement in VA staff training. He raised understandable concerns that such a practice might risk retraumatizing survivors. However, we believe that survivors who voluntarily choose to participate in such programming, with the freedom to share as much or as little as they chose, would significantly strengthen training implemented by the VA.


The Defense Department's own analysis finds a 38% increase in reporting of MST between 2016 and 2018. One in three active-duty women in uniform are sexually assaulted. This stark reality means that the VA has no margin for error in assessing the claims of those who do bravely come forward. Further, as the VA grapples with veteran suicide, it must acknowledge that women veteran suicide is increasing at a greater rate than male suicide rates. Although MST victimization cuts across genders, we cannot help but identify a possible connection between these two issues. As a result, we hope that continuing to provide training and awareness around MST will have the positive impact of reducing women veteran death by suicide as well.

We believe incorporating the survivors and trained advocates will provide vital contributions to the success of VA staff training moving forward. We would appreciate your consideration of this matter and urge you to benchmark with survivor-support organizations and programs to discuss how such a proposal could be implemented.

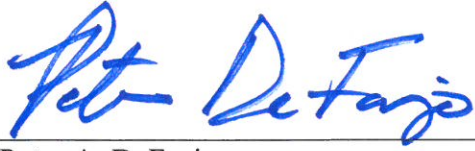
Sincerely,



Ann McLane Kuster
Member of Congress



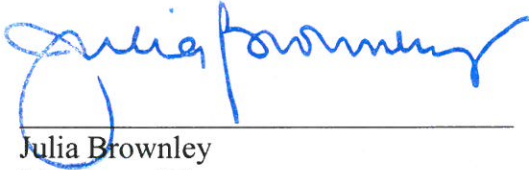
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Member of Congress



Peter A. DeFazio
Member of Congress



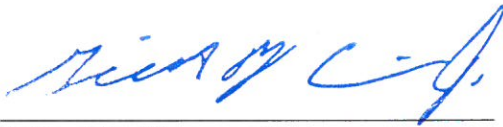
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Member of Congress



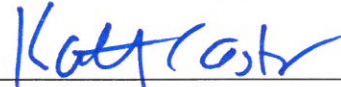
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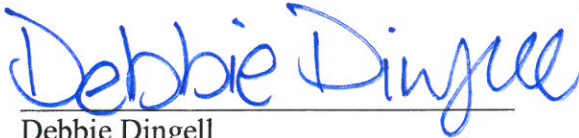
Kathy Castor
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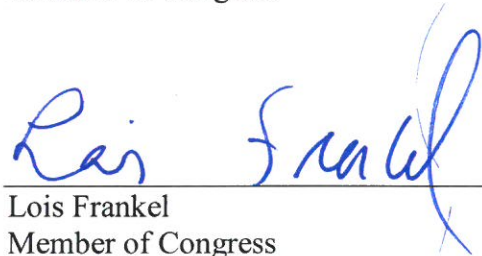
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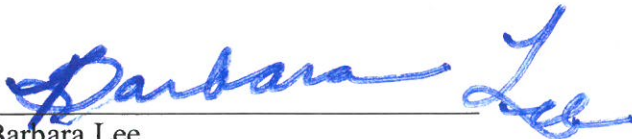
Susie Lee
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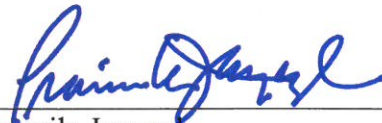
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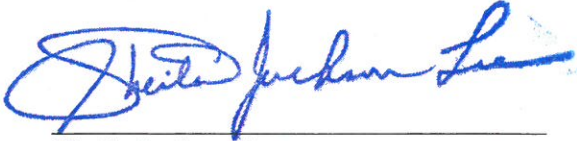
Lois Frankel
Member of Congress



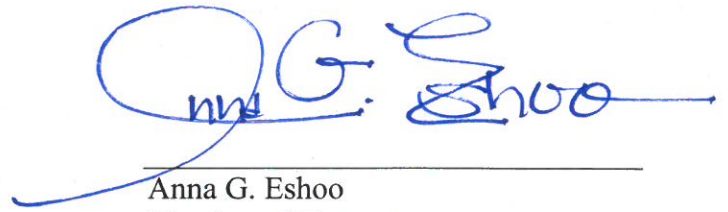
Barbara Lee
Member of Congress



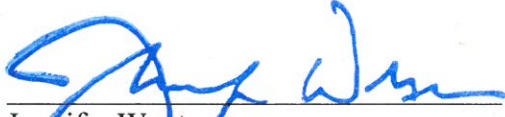
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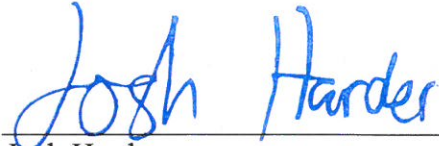
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