

CITY COUNCIL  
CITY OF NEW YORK

----- X

TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON VETERANS

----- X

April 21, 2016

Start: 1:48 p.m.

Recess: 2:38 p.m.

HELD AT: 250 Broadway - Committee Rm.  
16th Fl

B E F O R E: ERIC A. ULRICH  
Chairperson

COUNCIL MEMBERS: Fernando Cabrera  
Alan N. Maisel  
Paul A. Vallone  
Joseph C. Borelli

## A P P E A R A N C E S (CONTINUED)

Kristen Rouse  
New York City Veterans Alliance

John Rowan  
National President of the Vietnam Veterans

2 [sound check, pause]

3 [gavel]

4 CHAIRPERSON ULRICH: Good afternoon. I'm  
5 Councilman Eric Ulrich, Chair of the Veterans  
6 Committee. Invisible wounds of war can have a  
7 devastating lifelong impact not only for those who  
8 have served our country, but for generations  
9 thereafter. In recent decades medical and scientific  
10 studies have increased our awareness of the long-term  
11 health effects experienced by the children and  
12 grandchildren of service members exposed to toxic  
13 substances such as Agent Orange in Vietnam. There  
14 were toxins in the Gulf War and chemical weapons and  
15 burn pits in Iraq and Afghanistan. Many of these  
16 veterans have observed increased levels of cancers,  
17 birth defects and other health conditions in their  
18 offspring and seek a greater understanding of the  
19 relationship between the toxins they were exposed to  
20 and these conditions. Today, the committee will be  
21 considering proposed Resolution No. 579-A, which  
22 calls on the United States Congress to pass, and the  
23 President to sign the Tox--Toxic Exposure Research  
24 Act. This bipartisan piece of legislation would  
25 establish a National Center at the Department of

2 Veterans Affairs Medical Facility that would research  
3 the diagnosis and treatment of health conditions  
4 experienced by the descendants of servants--service  
5 members exposed to toxic substances during their  
6 service. This research will help identify the  
7 conditions that result from such exposure and  
8 increase the support and benefits available to those  
9 afflicted. It will also create a national outreach  
10 campaign to inform service members and their families  
11 about the potential long-term health effects of  
12 exposure. Several of our country's leading veterans  
13 organizations including the Vietnam Veterans of  
14 American, the American Legion, the--the Veterans of  
15 Foreign Wars among others have advocated strongly for  
16 the passage of this bill. They recognize, as all of  
17 us must, that our nation owes a duty of care not only  
18 to those men and women who have served in uniform,  
19 but to the children and grandchildren carrying on  
20 their brave legacy. Therefore, this committee is  
21 urging Congress to pass and Obama--President Obama to  
22 sign this important legislation, which help ensure  
23 that they receive the treatment that they deserve.  
24 And before I begin, I'd like to acknowledge we've  
25 been joined by members of the committee, Council

2 Members Borelli on my left, Maisel on my right, and  
3 Vallone as well. I would also like to thank the  
4 committee staff, Eric Bernstein, Committee Counsel;  
5 Michael Kurtz, our Policy Analyst; and James Subudhi,  
6 our Finance Analyst, and with that, we'll call up our  
7 first panel. Speaking first will be John Rowan, the  
8 National President of the Vietnam Veterans of  
9 America, and Kristen Rouse will also be on the panel  
10 from New York City Veterans Alliance. [pause]  
11 [background noise] You can choose whichever order  
12 you'd like to speak in.

13 MALE SPEAKER: This is now where is  
14 laughing. [laughter]

15 KRISTEN ROUSE: Good afternoon, Chair--  
16 Chairman and the members of the--of the Council and  
17 staff. My name is Kristen Rouse, and I am testifying  
18 on behalf of the New York City Veterans Alliance.  
19 I'm a veteran of the United States Army. I served  
20 three tours of duty in Afghanistan, and I live in  
21 Brooklyn. On behalf of our membership, many of whom  
22 have direct--been directly affected by toxic  
23 exposures in combat zones from Vietnam to Desert  
24 Storm to OEF, OIF and beyond, I want to state the  
25 strong support of the New York City Veterans Alliance

2 for this resolution. The V.A. has been notoriously  
3 slow to recognize and study toxic--toxic exposures  
4 from Agent Orange or even still to admit the cause of  
5 Gulf War illness. Even just this past December toxic  
6 exposure to troops in Iraq and Afghanistan from burn  
7 pits was removed from the list of topics that the VA  
8 funds for research. We fully support this resolution  
9 in support of federal legislation that that would  
10 pro--provide long overdue resources in the VA for  
11 tracking, studying and treating the children of  
12 veterans exposed to Agent Orange and other toxic  
13 exposures. But it must be further noted that this is  
14 but one step towards the systemic change needed to  
15 recognize, study and treat the long-term consequences  
16 of toxic exposures experienced by the men and women  
17 who have served in America's conflicts abroad.

18 More than 40 years after the end of the  
19 Vietnam War, the VA still has not fully recognized  
20 all veterans exposed to Agent Orange for all of the  
21 presumptive illnesses caused by it. More than 25  
22 years after the first Gulf War, the denial rate for  
23 Desert Storm veterans for Gulf War illness is still  
24 80% and VA and DOD continue to deny the realities of  
25 troops' exposure to the catastrophic health

2 consequences of nerve--nerve agents. Veterans such  
3 as myself who served in Afghanistan and Iraq were  
4 exposed at close proximity to massive burn pits and  
5 smoke inhalation of toxic and--toxic substances, and  
6 the best we're told this far is to sign up online for  
7 the VA's Burn Pit Registry so they can track, maybe.  
8 While most VA providers I've personally with seem to  
9 have no clue that burn pits even exist. Many of my  
10 peers who served in Iraq were also exposed to the  
11 same nerve agents that still plague Desert Storm  
12 veterans plus conditions related to the pit Uranium,  
13 failures in water purification and other problems  
14 that only beginning to come up--come to light. And  
15 the battle for recognition and treatment for these  
16 conditions remains an uphill battle. Over the last  
17 40 or more years, the VA has seemed to put more  
18 energy and resources into delaying, denying and  
19 disqualifying than it has in the documenting,  
20 studying, treating and compensating illnesses and  
21 conditions directly caused by our military service.  
22 Systemic change is long overdue, and separate offices  
23 dedicated to rectifying this must be created and  
24 further empowered to take action to ease the  
25 suffering of veterans and their family members, and

2 to recognize, understand and treat these long-term  
3 illnesses. For these reasons, we state our support  
4 for Resolution 579-A and the Toxic--Toxic Exposure  
5 Research Act, and we further submit our support for  
6 H.R. 2237, The Helping Veterans Expose the Burn Pits  
7 Act that was recently introduced in the U.S. House  
8 Representatives, which proposes specific and  
9 coordinated research, training and care related to  
10 toxic exposures that have and still are happening in  
11 both Iraq and Afghanistan. We suggest that this  
12 committee consider this for support as well. On  
13 behalf of the New York City Veterans Alliance, I  
14 thank you for the opportunity to testify. Pending  
15 your questions, this con--concludes my test--  
16 testimony.

17 CHAIRPERSON ULRICH: I'm going to reserve  
18 questions after John's testimony, and thank you.

19 JOHN ROWAN: Good afternoon, Chairman  
20 Ulrich--Ulrich and members of the committee. I thank  
21 you for this opportunity again to come to come here  
22 before you to speak on this bill, the Toxic Exposure  
23 Research Act of now 2016. They keep moving up the  
24 year and butchering (sic) it. I come with at least  
25 some positive notes from our workings with Congress



2 on this bill. The H.R. 1769 passed the House  
3 Veterans Affairs Committee unanimously--unanimously,  
4 and is awaiting action by the whole house. The  
5 Senate bill is still--still sitting. It hasn't come  
6 out of committee yet, although the committee will  
7 probably vote for it soon. But, we at--the big--the  
8 really good news is the Congressional Budget Office  
9 has finally scored the bill. The score is--the score  
10 is the budget that they're attaching to the cost of  
11 this leg--legislation, which at this time is they're  
12 saying \$14 million over ten years. That's a  
13 ridiculously low amount of money for the research  
14 that we're we ask--asking for. But we'll take it  
15 just to get our foot in the door, and we'll fight  
16 over the money on that later. The Senate is looking  
17 possibly at wrapping this bill into Omnibus budget  
18 bill. The DOD & VA Budget Bill, and we'll see how  
19 that goes. In any case, they're probably going to  
20 have to have a House/Senate conference because the  
21 House bill modified things slightly, but nothing  
22 earth shattering that really did any damage to the  
23 bill. So, we want to thank the Council for their  
24 continued support of--of veterans in this  
25 legislation, and we are grateful that things seem to

2 be finally moving, and we'll hope. They really want  
3 to try to wrap this up before Memorial Day and nobody  
4 will be happier for that than me, and everybody in my  
5 organization. So thank you.

6 CHAIRPERSON ULRICH: Thank you very much,  
7 as a professional courtesy I'll extend and yield if  
8 any of my colleagues have questions. I know they  
9 were waiting patiently for me to get here. So I'm  
10 happy to let them go first if they have any  
11 questions. Council Member Vallone.

12 COUNCIL MEMBER VALLONE: John and  
13 Kristen, thank you as always. We're always learning  
14 through your testimony and what you bring to us.  
15 Kristen, you--you mentioned extensively about the  
16 burn pits. Could you for someone who doesn't know  
17 what that's about explain those a little bit more?

18 KRISTEN ROUSE: So during my first tour  
19 in Afghanistan, I was--I was basically at Bagram  
20 Airfield, which is the largest base that was then in  
21 Afghanistan since early in the war, and in 2006 when  
22 I was there for 12 months, there was a--a giant hole  
23 in the ground in which they placed everything that  
24 needed to be burned. Because--because U.S. troops  
25 didn't put any trash outside of--outside of our base,

2 everything was burned whether--whether it be plastic  
3 bottles from all the bottled water that we consumed,  
4 cardboard, but there were also tox--toxic waste. I  
5 was--I was next to that burn pit, which was just of  
6 Biblical proportions. Like imagine a--I would say  
7 the size of--at least the size of a softball field,  
8 if you want to think of it, with just a column of  
9 smoke by day and a column of fire by night, you know.  
10 It--it was like something out of Exodus and--and--  
11 except it went nowhere. And--and so this was  
12 constant, and especially in the summer with the 120-  
13 day winds, that smoke basically went horizontal  
14 across the base. And so, you know, it was like being  
15 at a barbecue of own lungs for--for about 12 months.  
16 When I was there, I breathed in heavy smoke on a  
17 continuous basis, and it didn't occur to me how toxic  
18 the materials were in that giant hole until one day I  
19 saw they--they were burning an entire airplane in  
20 there. There as a Russian cargo jet that had--that  
21 had caught fire on the flight line at Bagram and--and  
22 they just moved the whole carcass of it into--into  
23 the burn pit. Hospital waster, batteries, you know,  
24 industrial waste. Like every--everything from the  
25 base governed in the burn pit, and--and I'm not a

2 scientist but I know that there was some really bad  
3 stuff in there. This has been the case in--in bases  
4 across Afghanistan and Iraq, anywhere that we've  
5 been. In--in later years they--they improved it  
6 with--with incinerators that were less--less harmful  
7 to the people around it. But, you know, Afghanistan  
8 and Iraq have--have toxic pollutants in the air just  
9 as ambient air because of, you know, because of the  
10 years of war, because, you know, Iraq is the--the  
11 petroleum that's been released into the air.

12 There's, you know, in--in Afghanistan even--even  
13 during my--my deployment--deployments, people would  
14 often, you know, come down with asthma, sleep apnea,  
15 like breathing related issues, pulmonary issues just  
16 because of the air quality. But--but the burn pit on  
17 top of that being in--in such concentrated exposure  
18 to that. You know, I've--for that time period--

19 COUNCIL MEMBER VALLONE: Well, that was  
20 going to be my next question as to--

21 KRISTEN ROUSE: [interposing] Friends of  
22 mine have fallen--have fallen ill with--with  
23 respiratory and pulmonary issues and I've--I myself  
24 went to the--the--the Bronx VA ER last--last November  
25 because I couldn't breath from one of the worst

2 respiratory infections that I've ever had. I think  
3 it was the worst respiratory infection I've ever had.  
4 And I mentioned to two doctors--well, one doctor and  
5 one attending nurse, you know, that--that I believe  
6 that what problem is was at least contributed to by  
7 burn pits, and they were--they--I may--I may as well  
8 have been speaking a foreign language to them. They  
9 didn't know--they didn't know what I was--they--they  
10 did not know what I was I talking about. And so,  
11 it's--there's just--there's no knowledge. When I  
12 talk with my primary care provider at the Bronx VA  
13 she at least refers me to the Burn Pit Registry. But  
14 that basically is just like, oh, yeah, I was exposed.  
15 Good luck to you. The--there's--there's no--like  
16 there's nothing they can offer me to at least like  
17 monitor or-- You know, even--even if I'm making all  
18 of this up, at least quell my fears about it. But--  
19 but like I said, I have friends who--who have become  
20 ill from this, and--and I know that there's been a  
21 lot of severe illnesses from the burn pits in Iraq  
22 especially because of there was even more stuff  
23 burned there.

24 COUNCIL MEMBER VALLONE: And now you're  
25 saying the VA removed that from the research list?

2 KRISTEN ROUSE: Uh-huh. Yeah, that--that  
3 came out in December.

4 COUNCIL MEMBER VALLONE: Now, you also  
5 referenced H.R. 2237 Helping Veterans Exposed to Burn  
6 Pits Act.

7 KRISTEN ROUSE: Uh-huh.

8 COUNCIL MEMBER VALLONE: Maybe Mr. Chair  
9 we can combine the resolutions on both of them if we  
10 can put one quickly together it makes sense.

11 CHAIRPERSON ULRICH: [off mic] Please do  
12 so.

13 COUNCIL MEMBER VALLONE: Yeah, that might  
14 be a great idea. So have there been--I--I guess  
15 there is a rise of respiratory and cardiovascular  
16 diseases noted by your fellow veterans as a result of  
17 these burn pits. I mean I don't--I can't see how  
18 that would happen. That's what happened after 9/11--

19 KRISTEN ROUSE: [interposing] Uh-huh.

20 COUNCIL MEMBER VALLONE: --the  
21 respiratory illnesses and that's what our first  
22 responders are still dealing with today, and that's--

23 KRISTEN ROUSE: Right, it's--it's  
24 similar. I don't know that it's the same type of  
25 material, but there's--there's parallels there for

2 sure. I--I--I do not know the numbers of, you know,  
3 of claims that have gone in for--for these, you know,  
4 for--for these inhalation injury--injuries, but just  
5 amongst the--my peers and colleagues, I know that  
6 it's increasing, and--and I don't know that all of  
7 them are seeking care at the VA for it even. You  
8 know, I--I was talking earlier with John that, you  
9 know, where I get in a place where I can have private  
10 health insurance again, I'm--I'm--I'm off the books.  
11 [laughs]

12 COUNCIL MEMBER VALLONE: [interposing]

13 Yes.

14 KRISTEN ROUSE: I mean because I--because  
15 I--I want--I want re--I want, you know, response. You  
16 know, medical response to what--what I'm, you know,  
17 what--what I'm experiencing.

18 COUNCIL MEMBER VALLONE: It's the not  
19 knowing, you know, and what you could possibly do to  
20 treat it--

21 KRISTEN ROUSE: [interposing] Right.

22 COUNCIL MEMBER VALLONE: --and get  
23 somebody who actually can help you on that. I had  
24 went through years of--of lung disease and couldn't

2 figure out what was going on, and they found out I  
3 had Sarcoidosis--

4 CHAIRPERSON ULRICH: [interposing] Ah-ha.

5 COUNCIL MEMBER VALLONE: --and they don't  
6 know where that comes from, and the sarcoid is  
7 directly related to inhalation, and so much of that  
8 triggers all sorts of other diseases within your  
9 body, and I--and at least I knew, and I was able to  
10 spend years getting into remission for that. But  
11 there's only a few doctors that can do that, and if  
12 you're just going to a general physician, then they  
13 don't know what sarcoid is, and they didn't know how  
14 to treat it. But those are the types of things that  
15 you're looking.

16 JOHN ROWAN: And Sarcoidosis--Sarcodosis  
17 is a disease that's found in a lot of Vietnam  
18 veterans because of the bad water. With, you know,  
19 with pollutants in the water and biological stuff in  
20 the water in--in Vietnam that was polluting us that  
21 caused that. And that's one of those diseases that  
22 comes many years later. It's one of those things  
23 that creeps up on you. We have--I don't even think  
24 we've seen the tip of the iceberg with the effects of



2 the illness on this--on this latest generation of  
3 veterans, and that's the problem.

4 KRISTEN ROUSE: I agree.

5 JOHN ROWAN: Even the, you know, the  
6 Vietnam veterans it took it 20, 30 years before we  
7 finally figured half this stuff out, and before some  
8 of the cancer started to show up. Unfortunately,  
9 sometimes they show up very early. We have veterans  
10 coming home from these new wars, and they're getting  
11 cancers already. It's just bizarre, and bizarre  
12 ones, too. It's never anything that you would  
13 normally expect, and we know that, you know, the burn  
14 pit thing is just insane. I mean they burn  
15 everything. There's no such thing as an EPA in Iraq  
16 or Afghanistan, and mostly for security purposes I  
17 would think because they don't want the stuff to get  
18 out.

19 KRISTEN ROUSE: Yes.

20 JOHN ROWAN: But, you know, I mean I  
21 heard they were digging up one and they found a tank  
22 in it. I mean give me a break. You know--you know,  
23 it's just crazy, and the Persian Gulf veterans from  
24 that first war, 25 years ago now, they have the  
25 highest rate of disability of any war group even they

2 are a relatively small amount of folks that were  
3 exposed to that war, and many of the stuff that they  
4 were exposed it's still ling--lingering around in  
5 the--in the same area that the troops are back in now  
6 in Iraq and--in Iraq in particular, and Afghanistan  
7 to some extent. And--and like with us with this bill  
8 because the reason why we wanted to make sure that we  
9 added people beyond the Vietnam era was because of  
10 things we're already hearing about the children in  
11 the present day veterans. So it's--it's--and the  
12 real issue is the VA does no studies. The VA has  
13 never studied Agent Orange, never, and they've hardly  
14 studied the--the Persian Gulf War. And for years  
15 they just precluded it was all psychological, which  
16 was nonsense. So that there--you know, we've really  
17 got to try to--that's why this bill is so crucial.  
18 Now, once we get this bill done, the expose--we had  
19 an Agent Act of 1991, and unfortunately it expired  
20 this year. It's been extended for one year, but  
21 that's only for the Vietnam vets. We want to  
22 recreate that bill, and we've got a couple of people  
23 who are going to help--help us with that. I don't  
24 know if we'll get it in this year, but certainly as  
25 soon as we go back into session that year with the

2 new administration. We want to basically create the-  
3 -an--and act like Agent Orange where the Institute of  
4 Medicine is called upon to review all relative  
5 studies related to toxic exposure for all veterans,  
6 Vietnam, Persian Gulf and present day, and to get  
7 them started in the same reviews that we've been  
8 getting frankly all of the illnesses associated with  
9 Agent Orange identified over the last 30 years.

10 COUNCIL MEMBER VALLONE: And my last  
11 question would be is--is there anything to pick up on  
12 the State or the City for medical services that are  
13 being provided on the federal level that you know of?  
14 Is there any additional aid that--that's been tapped  
15 into too long? (sic)

16 JOHN ROWAN: Actually, no because most  
17 people if you're qualified for the VA, the city is  
18 going to send you to the VA. I mean my wife works  
19 for the Department of Health signing people up for  
20 all the various healthcare programs, and if she finds  
21 a person is a veteran, then they're going to--she's  
22 going to have to send them to the VA because they  
23 qualify for VA healthcare. Now, that's a plus and  
24 it's also a minus sometimes because you---as--as  
25 Kris--Kristen would say she'd like to get a second

2 opinion by somebody outside the VA. Because  
3 unfortunately, one of the problems that we've run  
4 into is that nobody is training these doctors even  
5 the VA one, and that's one of the things that we've  
6 been pushing hard on is education levels about  
7 veterans' health issues. And it's also one of the  
8 reasons why all of the veterans organizations are--  
9 are very opposed to taking the veterans out of the VA  
10 system, closing it down and putting it in the private  
11 sector. First of all, the private sector is not  
12 ready for us, and they don't know anything about  
13 veterans health issues at all. The VA may not know  
14 much, but the outside certainly doesn't know  
15 anything.

16 COUNCIL MEMBER VALLONE: Well, as always,  
17 I thank the both of you as Mr. Chair.

18 CHAIRPERSON ULRICH: Thank you, Council  
19 Member Vallone. Let's take a--a step back especially  
20 for our viewers who might be watching us, disabled  
21 veterans in particular and vets--people who care  
22 about veterans who are not able to attend these  
23 hearings. A lot of times they'll send me emails or  
24 messages on Facebook about things that we covered,  
25 and say we wish you would have talked more about this

2 or that. let's--let's go back to the Vietnam vets.

3 Let's talk about Agent Orange. When did we start--

4 when did we first start recognizing that there was a

5 connection between Agent Orange and, you know,

6 various illnesses? What type of research was done?

7 How many people do you think were affected by it?

8 Take--take us on a--a quick, you know, tour back into

9 history about--

10 JOHN ROWAN: [interposing] Sure.

11 CHAIRPERSON ULRICH: --Agent Orange.

12 JOHN ROWAN: Well, the truth is nobody

13 knew anything for a number of years until a lady name

14 Maude DeVictor, who was a veterans counselor in

15 Chicago started seeing all the Vietnam veterans

16 showing with odd cancers and heart disease at a very

17 young age, in their 30s. The Agent Orange Act of

18 1991 was the first identification that Congress did

19 to put this research development into--into process,

20 and the early diseases were really hard fought. Now

21 there as the Ranch Hand study, which was being done,

22 which is Ranch Hand was the code name for the Air

23 Force Crews that actually sprayed out the stuff

24 because they would get covered in it all the time,

25 and they did a--a 20-year study. Every five years

2 they used to bring them into Sand Diego through one  
3 of the research facilities over there to study them.  
4 And the study then versus veterans who were not in  
5 the Ranch Hand system. The problem is some of them  
6 were Vietnam veterans, too. So that kind of clouded  
7 things, but the bottom line is the VA has done very  
8 little research, direct research. We--we rely on  
9 research done about--it was a major explosion in the  
10 Dioxin factory in Italy many years ago and several  
11 other places, Thai Beach and all that.

12 CHAIRPERSON ULRICH: What--what for--  
13 again, for our viewers and the people that may be  
14 watching online, what is Agent Orange exactly?

15 JOHN ROWAN: Agent Orange is really a--a  
16 code word, a code name. There was lots of agents  
17 that came in various colors, purple, green, yellow,  
18 but the bottom line was it was a--an herbicide. It  
19 was used to kill vegetation, and the key--the--I'm  
20 not good scientist on all of this, but Dioxin is one  
21 the--is the bad culprit. That has now been banned in  
22 the United States for many years. Because frankly in  
23 our exposure to this stuff and our research on it,  
24 and so that was the key is this issue of Dioxin. If  
25 you think about it, if it's strong enough to kill big

2 massive vegetations overnight, what is it doing to  
3 you? And, you know, one of the things that's since  
4 come about now I think in the public is a lot of  
5 reasons why a lot of people in my life included don't  
6 like GMOs, and want to make sure everything comes in--  
7 -in certain forms and not others, and don't like the  
8 use of pesticides on their--on their fruit and  
9 vegetables they eat. And so, that's when we first  
10 noticed it, and we--and we started slowly but surely  
11 because in the ILM studies every two years, they came  
12 out and identified certain illnesses. Interestingly  
13 enough, in the Ranch Hand Study for example, they  
14 were looking for minor deviations in cancer, and all  
15 of a sudden one of the researchers woke up and  
16 realized that 50% of the people in the study were  
17 diabetics, which was so far off the charts it was not  
18 even questioned--reasonable. So that was one of the--  
19 -and that didn't get on the books until 2003. So it  
20 took a long time. We have website called  
21 veteranshealth.org. If you go to [www.veteranshealth.](http://www.veteranshealth.org)  
22 [org--ORG](http://www.veteranshealth.org) and you go to that website and you click on  
23 the particular war, Vietnam, Persian Gulf, present  
24 day, you will see all the diseases that the VA has  
25 agreed to, which is very minimal for some of the more

2 recent wars. With the--Agent Orange is a long  
3 laundry list. It's even worse for women Vietnam  
4 veterans. They have an even longer list because of  
5 reproductive problems.

6 CHAIRPERSON ULRICH: Os there an estimate  
7 of how many veterans were exposed to Agent Orange?

8 JOHN ROWAN: Everybody who step foot in  
9 Vietnam. So yeah, one of the old canards used to be  
10 that they always assumed you had to be sprayed  
11 because that's what people saw. They see the planes  
12 coming over spraying these giant fields and killing  
13 the fields, but they know the guys out in the field  
14 they were getting sprayed on. The truth was they  
15 used it more in the base camps that anywhere else,  
16 and they sprayed all of the perimeters of the--the  
17 base camp, every base camp, air field that was in  
18 Vietnam, and because of that they polluted the water.  
19 I--I was in the country only for 31 days, but I know  
20 that the one--where I got--con--contracted my Agent  
21 Oranges was taking showers in the not-potable water.  
22 There used to be a big sign on the shower pen, Non-  
23 Potable Water: Do Not Drink because it came right  
24 out of the ground. It was the other side of the  
25 fence line that this tent was defoliated for 300



2 yards out so the Marines could make sure there were  
3 no infiltrators. And so, that's where the pollution  
4 began. So literally everybody who stepped foot in  
5 Vietnam is now considered to have been exposed. The  
6 VA says if you step one foot--one day in Vietnam  
7 you're considered exposed, and--and if you have any  
8 of the diseases that qualifies you're going to get  
9 compensation in healthcare.

10 CHAIRPERSON ULRICH: Let's talk about the  
11 VA. They've expressed opposition to the bill based  
12 on the claim that their research center mandated by  
13 the Act would duplicate existing work and that the VA  
14 does not currently possess the expertise according to  
15 them to conduct such research. What--?

16 JOHN ROWAN: Well, the VA never--the--the  
17 VA itself, of course, does not have the expertise to  
18 be truthful, but the VA has something called Centers  
19 of Excellence, and they set these up for years. They  
20 have them aging. They have them for post-traumatic  
21 stress disorder. They have them for different cancer  
22 issues. What it is, is that every Veterans hospital  
23 in the country is associated with a medical school by  
24 law. so, for example, in New York City here in  
25 Manhattan we have--we're in NYU. If you're in the

2 Bronx you're in Mount Sinai. If you're in Brooklyn,  
3 you're in Down State Medical and the Queens and  
4 Staten Island, of course, has to go to Brooklyn and  
5 Queens can go to Brooklyn or--or Manhattan. You get  
6 a choice, but the bottom line is there are major  
7 medical schools that would kill for this grant  
8 because what we're talking about is the effect of  
9 toxic exposure on a genetic background of the  
10 individuals and--and--and what will be passed on to  
11 their descendants. And so we--we truly believe in  
12 talking to certain people that the research people  
13 would kill for this bill.

14 CHAIRPERSON ULRICH: I think one of the  
15 challenges regarding the research that will have to  
16 be conducted is you need panel data. You have track  
17 a certain sample of the population over--over a  
18 period of time, and with all due respect, the Vietnam  
19 veterans aren't getting any younger. A lot of them  
20 are in their late 60s, 70s. Some of them are in  
21 their 80s, and it's getting--it's going to get harder  
22 and harder for us to track this. And then--and then  
23 to--to draw from that research any correlation  
24 between them and their descendants would be even more  
25 difficult. So I think--

2 JOHN ROWAN: [interposing] Well, I think  
3 that the--

4 CHAIRPERSON ULRICH: --it's imperative  
5 for Congress to pass this bill now--

6 JOHN ROWAN: [interposing] Right.

7 CHAIRPERSON ULRICH: --as soon as  
8 possible.

9 JOHN ROWAN: [interposing] Yeah, we need  
10 to get it done as soon as possible. We do have the  
11 death records, which can be interesting. The VA has  
12 got a lot of material in their files because a lot of  
13 veterans have file claims, and unfortunately even if  
14 they've been deceased they filed original claims and  
15 have been diagnosed with whatever illness they had.  
16 The genetic material, of course, is not available  
17 once you die, but the bottom line is, there's enough  
18 of us around. But the are children here and the  
19 grandchildren are here, and we can study them. We're  
20 the only veterans group ever that had their--that's  
21 had their children get benefits, and that was only  
22 for one disease and that was Spina Bifida for men.  
23 The women, by the way, got a whole bunch of things  
24 for that--went over to their kids.

2 CHAIRPERSON ULRICH: Have there been any  
3 reports or studies done around the connection between  
4 exposure to toxic substances and descendants of--of  
5 veterans being born with developmental disabilities  
6 or--or, you know, on this--on the Autism spectrum  
7 some--

8 JOHN ROWAN: [interposing] No.  
9 Unfortunately, that's the whole issue. The VA has  
10 done zero studies. They haven't studied not only the  
11 kids, they haven't studied the veterans. Yeah, we--  
12 we have a lot of concern about that. I mean I--I  
13 have a lot of concern about them. I'm wondering about  
14 the effects of all of this stuff on people. I mean  
15 while we're talking about veterans and--and our  
16 exposure to toxic substances, I think a lot of the  
17 general public has their own issues to deal with.  
18 And we may very well be able to set some--set some  
19 things in motion for studies on the effects of this  
20 stuff that may well open to the civilian population  
21 as well. I mean Council Member Vallone talked about  
22 9/11. There's certainly a correlation from all of  
23 the stuff that spewed out of that--that--that, the  
24 ultimate burn pit, and for--for months on end and  
25 covered this entire city, and we have all these

2 people walking around with problems. Respiratory  
3 cancers and all these things that are killing the  
4 first--the first respondents, and--and the people who  
5 worked on that. So, yeah, I--I think unfortunately  
6 this is the whole problem. We don't have studies.  
7 We need the studies. We've got to get this moving.  
8 We think if we get this bill passed, as I say, I  
9 think that when they did the--when they did the Post-  
10 Traumatic Stress Disorder Bill, a very similar action  
11 where they created the Center of Excellence. They  
12 ended up getting a consortium with Harvard, Yale and  
13 Stanford put together, came together to--to fight  
14 the--the access to that legislation and research. To  
15 create research into post-traumatic stress disorder.  
16 So we think that all the major medical schools who  
17 again are all-- If you go to--you know, Yale has--  
18 has New Haven. Harvard's got Boston. You know,  
19 Stanford deals with San Francisco. I mean all of  
20 these schools are all associated with the VA because  
21 they train--60% of doctors in the United States were  
22 trained through the VA at one point of time in their  
23 life.

24 CHAIRPERSON ULRICH: Kristen, let's jump  
25 back to you for a second. We talked about exposure

2 to burn pits in Iraq and Afghanistan that post-Harlem  
3 (sic) vets are dealing with health issues related to-  
4 -what about chemical weapons? What type of chemical  
5 weapons do you think veterans--post Harlem (sic) vets  
6 in particular were exposed to. What do you think?  
7 Are there any connections there? Are there any  
8 health effects that people are now experiencing or  
9 reporting or self-reporting in some instances? So  
10 what type of chemical weapons.

11 KRISTEN ROUSE: So particularly in Iraq  
12 that--so last year the New York Times did some great  
13 reporting on--it John Ismay who is an Iraq veteran  
14 who--who was living in New York City at the time, and  
15 he's--he's currently in California, but he was part  
16 of a--a groundbreaking story that the New York Times  
17 did on exposure to chemical weapons for recent Iraq  
18 veterans especially the--the EOD, the Explosive  
19 Ordinance Disposal teams dealing with Saddam's old  
20 stockpile of--of searing gas and other nerve agents  
21 that were used during the Iran-Iraq War. Those are--  
22 those are the agents, like those are the same weapons  
23 that--that our Gulf War troops were--were exposed to  
24 during Desert Storm that has taken really up until  
25 just recently for the DOD and the VA to say oh, this-

2 -this was a thing, this--this exposure to--to nerve  
3 agents. This is the Explosive Ordinance team (sic)--

4 CHAIRPERSON ULRICH: [interposing] How--  
5 how did we destroy them? I'm not an ex-military  
6 expert, but how do we--when we found the gas that  
7 they used on the Kurds and--and then prior conflicts,  
8 what do we do with that, you know, when--when the--  
9 you know, when the allied troops discovered them, how  
10 did we get rid of them?

11 KRISTEN ROUSE: I--

12 CHAIRPERSON ULRICH: [interposing] Just  
13 blew them? I don't know, you know.

14 KRISTEN ROUSE: I don't know the  
15 specifics.

16 CHAIRPERSON ULRICH: Yes.

17 KRISTEN ROUSE: That--that I don't  
18 recall--I don't recall, but I--you know, so I--I  
19 joined the Army in 1994. I, you know, my first  
20 National Defense Service Medal was for Gulf War Era  
21 Service. My, you know, my first trainers and mentors  
22 in the Army were--were all Gulf War veterans. I had  
23 a first sergeant in particular who was really the  
24 most severe case of Gulf War illness that--that I  
25 have ever met, and--and really known personally for

2 any iteration. He had--he--he was on the board of  
3 Saudi Arabia, you know, during--during this--that  
4 whole period of--of Desert Storm and, you know, there  
5 were 700,000 troops in--in--in the region, you know,  
6 during--during Desert Storm, and--and the--the DOD  
7 has now admitted that it's at least 100,000 who were  
8 exposed to some sort of nerve agent poisoning, but--  
9 So, he--he--my--my first sergeant was there, and--and  
10 he--he talked about how the chemical alarms that you  
11 place on the perimeter of your camp how the--the  
12 alarms kept going off, and they saw that as a problem  
13 because oh, well, we--we just need to unplug the  
14 alarms. These--these alarms just keep going haywire  
15 and they keep--and--and so it--it be the alarms that--  
16 -that are the problem. Everybody seems to be fine.  
17 In reality those were going off because there were--  
18 there were--there were nerve agents in--in the air  
19 from the destruction of this--of the, you know,  
20 hitting the stockpiles either through, you know,  
21 American attacks or I don't--I don't know what the  
22 exact circumstances were. But there was--there was a  
23 plume that blew over a lot of these camps, and troops  
24 were being exposed to--to nerve agents and--and--and  
25 they didn't understand what was happening. My first



2 sergeant had severe seizures, severe skin problems  
3 like rashes that were like beyond like oh, I have an  
4 it, like really severe stuff. He lost significant  
5 chunks of his memory of his--of his, you know,  
6 childhood and teenage years like he--stuff that he--  
7 that his family members said oh, we used to talk  
8 about this, he had no recollection of. And he just  
9 had this weird tick to him. I mean I--he might have  
10 been crazy to begin with, but he was like--the--the  
11 man was suffering from--from Gulf War illness. And--  
12 and the medical records, his medical record and  
13 masses of other medical records for these--these Gulf  
14 War veterans were lost. They disappeared and, you  
15 know, and we can all talk about how, no there's no  
16 conspiracy here. The government is not out to do  
17 that, but there--there was--there is a massive loss  
18 of medical records, and so that's--that's one of the  
19 reasons why the--the denial rate remains so high  
20 still for Gulf War veterans. It's an 80% denial rate  
21 of--of Gulf War illness, and--and like I said, it's  
22 been--it's been a really long process of getting the--  
23 -the VA and the DOD to even acknowledge that--that  
24 this damage has been done. And still, the position  
25 of the--the VA and the DOD is that the--the--the

2 exposure to nerve agent was not enough to cause the  
3 problems that we're seeing. But I mean people I've  
4 met if--if--I mean I--I believe otherwise, and I'm--I  
5 mean--I'm--and I'm one of the last people to ever buy  
6 into any kind of [laughs] you know, government  
7 conspiracy theory. You know, it's--it's not--I don't  
8 see it as a--I see it as a conspiracy of--of neglect,  
9 you know, more than anything else. And--and so the  
10 same--the same sort of denial has existed with Iraq,  
11 you know, current day Iraq veterans who come into  
12 contact with these same weapons stockpiles and  
13 exposures and, you know, and--and like I said, I was  
14 there, but the--the reporting, the New York Times  
15 reporting last year was excellent on it. There was  
16 a--great Newsweek article last year about the Gulf  
17 War denial, you know, the claims denials. There's--  
18 there's a group that--whose material I've been  
19 reading called Veterans for Common Sense. They're--  
20 they're working very heavily in the--in the details  
21 of--of the VA's treatment and admissions of--of--of  
22 Gulf War and Iraq issues, you know, related to--to--  
23 to these nerve agents, you know, to--to--to look up  
24 more detail on that. But I mean it's--

2                   JOHN ROWAN: [interposing] Yeah, the  
3 truth was they did blow it up. In fact, I had run  
4 into a Special Forces sergeant one time, and he  
5 explained to me that were actually three times they  
6 blew everything up. They had this giant cache of  
7 explosives and other materials that they had and they  
8 blew it up. And the DOD in one of the studies that  
9 we saw estimated that there were 600,000 people  
10 exposed in what is the--the plumes--plumes that they  
11 had from things. Plus there was just stuff in the  
12 air. The--the depleted uranium shells that the Army  
13 used at the time in that war created problems that  
14 they had no idea they were going to do. There's  
15 stuff. Then--then, you know, there's just other  
16 things that people don't even think about. There  
17 was--there's organisms in the desert that we're not  
18 used to. There's all kinds of things that-- You  
19 know, this toxic exposure covers a lot of sins  
20 unfortunately. It's not just the most obvious stuff,  
21 that-- You know, a lot of them were getting--took  
22 these shots, the--the Anthrax shots that literally  
23 killed some people, and other kinds of things that  
24 they got. So even back in the States here, there's  
25 toxic stuff that we've been working on at Fort

2 McClellan and some certain other areas. If you look  
3 at what happened in the marine base in Camp Lejeune  
4 where they poisoned their people. The water was  
5 poisoned for 15 years that they--they kind of sort of  
6 knew about, but didn't do anything about, and this--  
7 this--there's hell to think about what's going on  
8 with that, with those Marines and their kids who  
9 lived on the base and their families were living on  
10 the base.

11 CHAIRPERSON ULRICH: Let's talk about the  
12 bill very briefly, and the New York's Congressional  
13 Delegation because we are in New York City. How many  
14 members of our Congressional Delegation are co-  
15 sponsors of the bill? Who is not on the bill and  
16 what is the position of our two United States  
17 Senators?

18 JOHN ROWAN: Well, both senators have  
19 signed on a long time ago. All of the members of the  
20 House in--in the New York except four members.  
21 There's--

22 CHAIRPERSON ULRICH: And who are the four  
23 members? I want you to call them out.

24 JOHN ROWAN: [laughs] Carolyn Maloney,  
25 Eliot Engel, Congressman Nadler and there's fourth

2 one in--in Brooklyn who I--his name is--oh,  
3 Velazquez, Nydia Velazquez.

4 CHAIRPERSON ULRICH: Okay. I mean I--I  
5 can't imagine why they would be opposed this.

6 JOHN ROWAN: [interposing] I know.

7 CHAIRPERSON ULRICH: It's a bipartisan  
8 piece of legislation.

9 JOHN ROWAN: Yeah, I don't think they're  
10 opposing. I don't think they would oppose it. (sic)

11 CHAIRPERSON ULRICH: There are Democratic  
12 and Republican co-sponsors from-

13 JOHN ROWAN: [interposing] There are.

14 CHAIRPERSON ULRICH: --New York and around  
15 the country on this bill. How many co-sponsors does  
16 the bill have roughly?

17 JOHN ROWAN: It's almost 200 in the House  
18 now and it's over 40 something in the Senate.

19 CHAIRPERSON ULRICH: So it has  
20 overwhelming bipartisan--

21 JOHN ROWAN: [interposing] Oh, yeah.

22 CHAIRPERSON ULRICH: --support--

23 JOHN ROWAN: [interposing] Yep.

24 CHAIRPERSON ULRICH: --all across the  
25 country both parties. I think it would be a good

2 idea, you've probably done it already, but to get the  
3 advocacy groups here in New York. That's something  
4 that we can help with.

5 JOHN ROWAN: [interposing] Oh, yeah,  
6 we've been--I've been calling up their offices. I  
7 know, well three--I know actually--actually three of  
8 the four of them pretty well.

9 CHAIRPERSON ULRICH: Yeah.

10 JOHN ROWAN: They were all council  
11 members at one time.

12 CHAIRPERSON ULRICH: That's right. I  
13 mean and I think of--of Nydia Velazquez's district,  
14 for instance, there are so many veterans living in  
15 that.

16 JOHN ROWAN: [interposing] Yeah.

17 CHAIRPERSON ULRICH: I mean there are  
18 veterans living in every district, of course, but in  
19 the Velazquez seat there's certainly a lot of  
20 veterans. If you have members there, they should  
21 call their congress representative.

22 JOHN ROWAN: We've been trying. I've  
23 been calling.

24 CHAIRPERSON ULRICH: And say, hey, I live  
25 in your district. I'm a veteran. I vote, and I want

2 you on this bill. This is very important. I think  
3 you should do that in all four districts. There's no  
4 reason any member of congress should oppose this.

5 JOHN ROWAN: No. Today is a calling day.  
6 We--we have a calling day for everybody around the  
7 country to call in again.

8 CHAIRPERSON ULRICH: Yeah, well, I  
9 certainly--I wish you luck but I wish good sense and  
10 good judgment on the part of our government. (sic)

11 JOHN ROWAN: [interposing] Yeah.  
12 Interestingly enough, we've got Clinton, Sanders and  
13 Trump all signed on--signed on in support of the  
14 bill.

15 CHAIRPERSON ULRICH: Okay, well that's  
16 good, too, and--and, you know with the Presidential--

17 JOHN ROWAN: [interposing] We're missing  
18 Cruz and we're missing Kasich unfortunately.

19 CHAIRPERSON ULRICH: Yeah, I won't go  
20 there. Anyway, but [laughter] the point is that this  
21 is such an important piece of legislation.

22 JOHN ROWAN: [interposing] Yeah.

23 CHAIRPERSON ULRICH: The Council has  
24 absolutely no say over it. As you know, we're--we're  
25 the municipal body here, but we try to use this

2 committee as a vehicle to raise awareness about very  
3 important issues whether it be PTSD or toxic exposure  
4 or agent orange or any other issue that the more than  
5 235,000 veterans in this city might be experiencing  
6 or facing. And we hope that by holding this  
7 committee hearing today, and by hearing your  
8 testimony and listening to the very vital information  
9 that you provide to the members of this committee  
10 that our federal--that our colleagues in the federal  
11 government, particularly those in Congress, will hear  
12 our voices and the voices of veterans who are  
13 struggling with illnesses and concern about the  
14 children and grandchildren of those veterans who  
15 might be dealing genetic issues related to toxic  
16 exposure that was service connect issue. I mean we--  
17 everybody says we--we support veterans, we want to  
18 help veterans, but then when it comes to actually  
19 putting the--the meat on the bone, things like this  
20 for whatever reason take a very long time to get  
21 done. So I hope that this is helpful. I know that I  
22 learned a lot. I know that the members of this  
23 committee were very interested in what we talked  
24 about today, and I'm looking forward to hearing that  
25 this is passed by Congress and hopefully is signed



2 into law by the President. I mean that is--that is  
3 the ultimate goal of getting it done. So thank you  
4 for your testimony, and that concludes today's  
5 hearing. Thank you. [gavel]

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date May 7, 2016