Soldiers, families speak at Walter Reed public hearing

Government indifference, cost-cutting compound ravages of war for wounded US troops

Barry Grey in Washington DC 15 March 2007

At a public hearing held Tuesday at the Walter Reed Army Medical Center in Washington DC, soldiers being treated for wounds suffered in Iraq and Afghanistan and family members of injured servicemen detailed the bureaucratic red tape, long delays, lack of financial and social support and other problems they face at the Army's most prestigious medical facility.

Their testimony illustrated the tragic impact on American families, compounded by the indifference and incompetence of the political establishment, of the colonialist wars in the Middle East and Central Asia.

The meeting was called by the Independent Review Group, an eight-man panel established March 1 by Secretary of Defense Robert Gates to investigate conditions at Walter Reed and the National Naval Medical Center in nearby Bethesda, Maryland. The panel, which is to report back to Gates in mid-April, was created in response to a series of articles published last month by the *Washington Post* describing conditions of squalor and neglect at a facility for outpatients at Walter Reed.

Those articles sent the Pentagon and the White House scurrying to contain the political fallout and staunch a further decline in troop morale. The exposure of poor conditions at Walter Reed and other military hospitals, as well as within the Veterans Administration (VA) medical system, was particularly damaging since it undercut the attempt to equate continued funding for the war in Iraq with "support for the troops."

Two weeks ago Gates engineered the firing of the commander of Walter Reed, Maj. Gen. George W. Weightman, and then forced Army Secretary Francis Harvey to resign. The scandal toppled another high-ranking official last Sunday, when Lt. Gen. Kevin C. Kiley, the Army's surgeon general, agreed to step down.

A number of reports released this week have underscored that the problems plaguing the military and veterans' medical systems go well beyond the failings of individual officials. On Monday, the Army's inspector general issued a report concluding that the thousands of soldiers wounded in Iraq and Afghanistan have overwhelmed the Army's system for determining eligibility for disability benefits. The vast majority of these reviews drag on long after Army standards say they should be completed.

The Army has only 30 people assigned to manage all the physical evaluation boards, even though the boards said they had an "overwhelming need" for support staff, the report said.

As a result, thousands of wounded soldiers are left in the dark as to whether or not their military careers are over, making it impossible for them to move on with their lives.

The report also found that medical hold facilities, such as the one profiled by the *Washington Post*, face widespread shortages in critical staff, including professionals with specialized training in caring for wounded soldiers. More than half of unit commanders reported "inadequate" databases for tracking the wounded and said their staffing was "inadequate for them to execute their mission."

On Tuesday, Government Accountability Office officials and Harvard professor Linda Bilmes, who have conducted a study of the Department of Veterans Affairs system for handling disability claims, told a House of Representatives Veterans Affairs subcommittee that the system is at the breaking point, and the Bush administration's measures to relieve backlogs will not suffice to serve veterans returning from Iraq and Afghanistan.

They reported that it took 127 to 177 days to process an initial claim—close to double the private sector average—and that an appeal required nearly two years (657 days) of processing time. The VA has a claims backlog of 600,000, they said.

Meanwhile, the American Medical Association's Archives of Internal Medicine released a study that underscored the immense discrepancy between the present capacity of the military and veterans' health systems and the scale of the medical problems facing returning soldiers. The study concluded that 25 percent of Iraq and Afghanistan war veterans seen at Veterans Affairs health care facilities were found to

have mental health problems.

These reports demonstrate that the Bush administration, Congress and the military brass made no serious plans to take care of the men and women whom they sent to kill and be killed in Afghanistan and Iraq. Walter Reed is itself slated to be closed down and merged with the Naval hospital in Bethesda in 2011.

These problems have been exacerbated by the drive of the government to cut costs and privatize key aspects of the military and VA health systems, granting lucrative contracts to business cronies of the Bush administration. At Walter Reed, for example, maintenance of the hold unit profiled by the *Washington Post* was undermined by the Army's decision in 2006 to give IAP Worldwide Services a \$120 million contract to privatize the hospital's support workforce.

IAP is owned by Cerberus Capital Management LP, an assetmanagement firm chaired by former Treasury Secretary John W. Snow. The company is headed by two former high-ranking executives of KBR, a subsidiary of Halliburton, the energy giant that was headed by Dick Cheney before he became vice president.

These issues were reflected in the accounts given by the score of soldiers and veterans who testified at Tuesday's hearing. Many of them praised the direct medical care provided by Walter Reed and paid tribute to the dedication of the doctors, nurses and case workers. It was the system, many said, that was broken and unresponsive to their needs.

Martin F. Cody, a Navy retiree and resident for 12 years at the Armed Forces Retirement Home in Washington, began by saying, "The last time I was here was to object to the merging of this wonderful medical facility with Bethesda... I use the services here. They're wonderful people, but they're underfunded and under-resourced."

He then described what is happening at the soldiers' retirement home. "We have significant medical, health and welfare problems. There are 1,300 members. The health care is declining, the dental care is disappearing, and the death rate, literally, has doubled since we've gotten civilian management. We used to have eight deaths a month, we now have sixteen."

He spoke of a class action lawsuit filed by residents of the home against the Department of Defense "for declining medical care and dental care" and noted that the new management of the home had just sold a 400-bed nursing facility to private investors who plan to turn it into a hotel.

Sgt. B. J. Fischbach of the Maryland Army National Guard said, "The doctors are fantastic. I've had excellent physician care and nurses, but there are problems... It's mainly in administrative things."

He then raised one of the most common complaints of wounded soldiers—that medical and physical evaluation boards label disabling conditions as "preexisting," thereby lowering the disability level assigned to soldiers and, consequently, the amount they receive in benefits.

"The med board and the physical evaluation board is a total sham," he said. "I was checked out by my state before mobilization. Nothing was wrong with me. I hadn't been on a pill my whole life... The doctor who evaluated me for medical board—the broken pieces in my arm, the crushed disc in my spine—well, 'That's all preexisting.' I don't know how it was preexisting if I made it through three months of mobilization training. That's one of the problems we have here."

Cathy Lazzell fought back tears as she described the plight of her injured husband, the toll of his disability on her family, and the lack of a support system for those whose lives have been turned upside down by the war. "We have six kids and two grandchildren," she said. "I work full-time. My husband was injured last year. He came back from Kuwait. It's been very tough...

"We had no place to stay... I'm trying to help my husband recuperate. I don't know what we're supposed to do. Are we supposed to sell our house in West Virginia and move here? Was I supposed to quit my job and uproot my whole family to move here and help my husband recuperate? What are we supposed to do? I don't know...

"My husband submitted his retirement letter on February 14 and it's just floating around here somewhere. It hasn't even gotten to the Department of Defense... Sometimes you just feel like giving up."

Her husband, Lt. Col. Robert Lazzell, rose and took the microphone. "The majority of people that I've dealt with here have tried to do the right thing. I have two case workers, and they try to do what they're supposed to do, but I don't think they're trained to do what they're supposed to do... They hit the same stone walls I do. I'm a lieutenant colonel and I'm hitting stone walls, so I know darn well that the average soldiers are...

"I can handle it, but it's the spouses, the children... We've been bouncing back and forth for over a year... The hospital care has been tremendous, but the process facing soldiers who come in here is terrible. It's broke."

Michael Sparling is the father of a Walter Reed patient who had a leg amputated. "The care here is the best," he said, "But I think we need to look at how we can support the families of those taking care of their children. A lot of families have lost their jobs to take care of their sons or their daughters. A lot of spouses have given up their jobs to take care of their soldiers when they came back."



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