

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. memo	[Personally Identifiable Information] [partial] (1 page)	03/02/1995	b(6)

COLLECTION:

Clinton Presidential Records
Chief of Staff
Jennifer O'Connor (Subject Files)
OA/Box Number: 6138

FOLDER TITLE:

Persian Gulf-March 1995 [4]

2024-0267-S
rs4103

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

PHOTOCOPY
PRESERVATION

Diana
to get
to all

① Diana - letters
for Cong. calls

② Julian's
letters
(wood)

③ Kathy & doc
(KT)

④ Stars &
Stripes
(KT)

⑤ Elisa -
on foot shut
↓

⑥ Jen
follow up
w/ Lorne Mc
on press release
on committee

QUESTIONS AND ANSWERS/PERSIAN GULF ISSUES

Q - Why has the government waited so long to do anything about Persian Gulf veterans and their health problems?

A - The President has from the beginning of his Administration promoted initiatives that resulted in legislation in 1993 for high-priority VA medical care for Gulf veterans as well as a contract with the National Academy of Sciences to review research strategies. The President directed the formation of the Persian Gulf Veterans Coordinating Board in Jan. 1994 to coordinate working groups on research, clinical issues and disability compensation. The President encouraged legislation and recently signed into law unprecedented changes in VA's compensation system that will permit VA to compensate certain Gulf veterans suffering from undiagnosed illnesses. The Administration supports an expansion of outreach to veterans, and VA recently established a toll-free hotline for Persian Gulf veterans and their families. We also are encouraging new research initiatives to reassure Gulf veterans and their families that the government will leave no stone unturned in seeking causes for their health problems and ways to improve treatment.

Q - Why is this committee going to be any different from previous Presidentially established committees? Why do you think it will be effective? What is the Persian Gulf Veterans Coordinating Board and why is this committee different?

A - This committee will be made up of a panel of scientific experts, physicians and veterans who will review the environmental exposures in the Gulf. Many important initiatives have already been undertaken. But this committee will ensure that we are doing all that we can and that every initiative underway and that will be proposed are the right things to do. The Persian Gulf Coordinating Board is comprised of the Departments of Defense, Veterans Affairs and Health and Human Services. The Board coordinates working groups on research, clinical issues and disability compensation, and disseminates information. The newly established committee will have broader responsibilities and oversight over governmentwide initiatives. The committee will review and evaluate all governmentwide activities and make recommendations on what else we might be doing to help Persian Gulf veterans and their families.

2.

Q - What medical benefits are being provided to Persian Gulf veterans?

A - VA offers a free medical examination to every Persian Gulf veteran who has health concerns, whether or not the veteran is ill. Further evaluation or treatment for health problems identified during the Registry examination. The Department of Defense also provides a similar medical examination program to military beneficiaries who participated in the Persian Gulf War. VA also offers priority medical care for Persian Gulf veterans for conditions possibly related to exposure to toxic substances or environmental hazards.

Q - What about spouses and children of Persian Gulf veterans? Are they entitled to VA care?

A - The law does not allow VA to provide medical treatment to the families of Persian Gulf veterans. And while the results of studies to date do not show evidence of infection or an increase in the number of birth defects in children born to Persian Gulf veterans, VA, DOD and HHS are conducting research into these issues.

Q - What about compensation? Some Persian Gulf veterans can't work because of their illnesses. Are they getting any benefits?

A - Persian Gulf veterans, just like any other veterans, are entitled to monetary benefits from VA if the veteran is disabled by an injury or illness that is coincidental to military service. And this Administration supported unprecedented legislation giving VA the authority to compensate chronically disabled Persian Gulf veterans who are suffering from undiagnosed illnesses.

Q - How many Persian Gulf veterans are receiving VA disability compensation?

A - Some 16,400 Persian Gulf veterans are receiving monthly compensation checks for **diagnosed** conditions that can be linked to their military service. Since Feb. 3, when the new Persian Gulf compensation rule was published authorizing VA to award benefits for **undiagnosed** conditions, 23 claims have been awarded. Benefits range from \$89 to more than \$1,800 per month.

3.

Q - What is the Persian Gulf Registry?

A - VA established the Persian Gulf Health Registry Program in Aug. 1992. Under the Program, Persian Gulf veterans can receive free medical examinations whether or not the veteran is ill. The findings from these examinations are kept in this centralized Registry. VA uses the Registry as a source of medical information on the health problems of Persian Gulf veterans and also as a means of keeping in touch with the veterans through a periodic newsletter, which provides updated information on health issues, research and compensation policies.

Q - How many are on VA's Registry?

A - As of March 1, more than 41,000.

Q - How many Persian Gulf veterans are ill?

A - An analysis of the first 27,000 on VA's Registry revealed that 15 percent had no health complaints at all. Of the total, three-fourths rated their health as all right to very good; 23 percent said their health was poor or very poor.

Q -- What illnesses do they have?

A - The most common symptoms reported by Registry participants include: fatigue, skin rash, muscle and joint pain, headache, memory problems, shortness of breath and cough, diarrhea and abdominal complaints. So far, there is no evidence that either a single disease or a single cause is responsible for illnesses experienced by those who served in the Gulf War.

Q - What are the possible causes for the health problems of Persian Gulf veterans?

A - There appears to be no unifying exposure that would account for all of the unexplained illnesses. Concerns include exposure to the rubble and dust from exploded shells made from depleted uranium; the possibility of exposure to chemical or biological agents; leishmaniasis (a tropical disease); petrochemical exposure; effects of vaccines and medications. In 1991, VA initially began to develop tracking mechanisms that evolved into the Registry over concerns about the effects of exposure to oil well fires.

4.

Q - What research is underway?

A - DOD, VA and HHS are engaged in more than 30 Persian Gulf-related projects, including general health, environmental effects, chemical agents and depleted uranium. This year, VA and DOD will spend up to \$13 million on new research looking into effects of oil well fires, environmental toxins, pesticides, depleted uranium, drugs used to protect against chemical and biological weapons, and whether illnesses have been transmitted to the spouses and children of Persian Gulf veterans.

Specifically -- VA established three environmental hazards research centers with an initial focus on possible health effects of environmental exposures. The VA Medical Center in Baltimore is following veterans who retained fragments of depleted uranium. The Birmingham VA Medical Center is conducting a pilot program aimed at detecting the kind of dysfunction that would be expected after exposure to certain chemical agents. The Naval Medical Research Center in San Diego, in collaboration with VA, has begun studies comparing the health of Gulf veterans with a group who served elsewhere. VA is working with other agencies to launch a mail survey of 15,000 Gulf veterans and active duty members to compare symptoms and health status with 15,000 who served elsewhere. Information on the health of family members also will be included. DOD will examine the chemical/environmental effects of Gulf service. CDC will be conducting a telephone survey of Iowa residents to compare the health status of some 2,000 Gulf veterans and 2,000 who served elsewhere during the Gulf War.

Q - What about birth defects among children of Persian Gulf veterans? Are they related to the veterans' Gulf experience? What is the government doing for them?

A - Results of a study conducted by the Mississippi State Health Department in conjunction with the Centers for Disease Control showed no increase in birth defects or childhood illnesses among children born to Persian Gulf veterans in two National Guard Units. But the possibility of either inheriting a birth defect or contracting an infectious disease from a Persian Gulf veteran parent are important medical questions and deserve an extremely careful review. Despite the results of the Mississippi study, a comprehensive, collaborative government response is underway to resolve the lingering concerns of Persian Gulf veterans and their families. (cont.)

5.

VA is making plans to survey Gulf veterans and a comparison group who served elsewhere to study symptoms, illnesses and exposures. VA will specifically address birth outcomes and childhood illnesses in children born to Gulf veterans. The Naval Medical Research Center in San Diego has begun studies comparing Gulf veterans with a group of veterans who served elsewhere to detect differences in symptoms, hospitalizations and birth outcomes. VA also has already included questions on reproductive outcomes as part of its revised Persian Gulf Registry Examination Program and will resurvey veterans who had examinations prior to the inclusion of these questions. CDC will begin collecting data on the health of family members of Persian Gulf veterans as part of a health survey of Iowa veterans, again to look at birth outcomes and childhood illnesses in the children born to Gulf veterans. DOD has initiated several research studies on reproductive outcomes, miscarriages and infertility.

Q- Some Persian Gulf veterans believe that their health problems are due to exposure to chemical or biological warfare agents. What is the government position on that issue?

A - DOD and the Defense Science Board Task Force on Gulf War Health Effects (an independent group of experts) have concluded that the Iraqis did not use chemical or biological weapons against coalition forces and that there was no exposure of US troops to chemical or biological warfare agents in Kuwait and Saudi Arabia. There were, nevertheless, several chemical warfare agent detections by Czechoslovakian chemical defense teams that could not be verified by US forces during the war. These detections reportedly were of extremely low, nonincapacitating levels that did not persist for more than a few hours. (cont.)

These detections occurred in areas where there was no known military action or incoming Scud missiles and where few US troops were deployed. Despite these findings, nothing is being ruled out as a possible cause for the health problems of Persian Gulf veterans. The government is actively involved in numerous studies to try to determine what is causing these unexplained illnesses, including their possible exposure to chemical agents.

Q - I've heard that Persian Gulf veterans can get information by calling a toll-free number.

6.

A - VA initiated a toll-free information line with operators trained to help veterans and family members with questions about medical care and benefits. DOD also has a toll-free helpline for military personnel who served in the Gulf which provides information on general questions and refers individuals to one of 13 DOD medical centers.

VA's number is **1-800-PGW-VETS**.

DOD's number is **1-800-796-9699**.

Q - How many calls has VA received on its toll-free helpline?

A - More than 21,000

Q: What is the study of Iowa Persian Gulf veterans that has been announced?

A: At Congressional request, the Centers for Disease Control and Prevention (CDC), part of the Department of Health and Human Services, will survey Persian Gulf War veterans who listed Iowa as their home of record, comparing a random selection of those who served in the Gulf with a random selection who served elsewhere during the same period. This will be one of the first studies to assess the health of a representative sample of veterans of the Persian Gulf War.

The study is being conducted in collaboration with the Iowa Department of Public Health and the University of Iowa, with input from veterans service organizations and affected Persian Gulf War veterans and their family members.

Q: Are family members of Iowa veterans being studied as well?

A: Yes, the survey will include questions about the health of family members.

Q: When will the study be finished?

A: We expect the final report by the summer of 1996.

Q: Why Iowa?

A: The study is being done in Iowa at Congressional request. It will be complementary to the national survey being planned by the VA because it will be more detailed than is being contemplated in the national survey.

Q: Why did the FDA approve the waiver of informed consent rules for use of pyridostigmine during the Persian Gulf war?

A: FDA granted the waiver because it believed the product was safe and effective for the intended use and because there was no available satisfactory alternative.

The principal basis for believing pyridostigmine is safe is a very long history of apparently safe use at much larger doses, and for much longer periods, than were used in Desert Storm. An outside panel of experts assembled by the NIH has said that pyridostigmine is one of the least likely explanations for the undiagnosed illnesses.

Pyridostigmine was approved by the FDA in 1955 and has for decades been the recommended treatment, at much higher doses than were recommended for Desert Storm combatants, for myasthenia gravis patients. No long term toxicity, and only mild side effects, have been found.

DRAFT
3/3/95

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

Date

FACT SHEET

Gulf War Veterans' Illnesses: Ongoing Initiatives

Shortly after returning from the Persian Gulf following Operations Desert Shield and Desert Storm, some U.S. military personnel began to report a variety of symptoms, such as fatigue, muscle and joint pain, memory loss, and headaches. In order to address these Gulf War veterans' health concerns, the Administration has taken many steps, highlights of which are listed below.

COMPENSATION

To make sure that veterans with chronic disabilities resulting from Gulf War service are compensated, the Administration is moving quickly to compensate those with both diagnosed and undiagnosed illnesses.

- **Compensation for Diagnosed Illnesses:** Under traditional disability compensation programs, veterans receive monthly compensation checks for diagnosed disabilities connected to their service. As of January 31, 1995, 16,390 veterans are receiving this type of disability compensation, including 472 for disabilities resulting from exposure to environmental hazards.
- **Compensation for Undiagnosed Illnesses:** President Clinton strongly supported and signed legislation to allow for compensation to veterans suffering from undiagnosed illnesses. This is the first time ever that the Department of Veterans Affairs (VA) has compensated veterans before their illnesses are diagnosed. The first compensation checks under this new program were sent in mid-February 1995. (Sentence deleted.)

TREATMENT

The Administration's first priority for Gulf War veterans is to provide them with the best possible medical care, even when diagnoses have not been made.

- **Priority Access to VA Health Care:** In 1993 and again in 1994, President Clinton signed legislation that changes standard eligibility rules to enable veterans to obtain free medical care for illnesses that may be related to service in the Persian Gulf. To date, more than 140,000 Gulf War veterans have received (delete "free") medical care in VA facilities.
- **Free Specialized VA Health Examinations:** Under the VA Persian Gulf Registry Health Examination Program, every Gulf War veteran who has health concerns, whether or not the veteran is ill, is eligible for a free, complete physical exam. More than 40,000 veterans have participated in this program since it began in 1992. Since June 1994, veterans with unexplained illnesses whose medical conditions require a more specialized approach have had access to a more comprehensive health examination, which is also provided without charge at any VA or military medical center.
- **Specialized VA Diagnosis Centers:** For those veterans most difficult to diagnose, VA has established Persian Gulf Referral Centers in Washington D.C., Houston, TX, and Los Angeles, CA.
- **Special Treatment for Active Duty Military Personnel & Their Families:** Under the Defense Department's (DOD's) Comprehensive Clinical Evaluation Program, more than 15,000 Gulf War veterans still on active duty have registered for extensive free medical exams and treatment. Between 8,000 and 9,000 individuals have begun to receive these exams and treatment since the program began in June 1994. Military personnel register by toll-free hotline and are then examined and treated at local military medical centers and then, if necessary, at 13 major medical centers in the U.S. and Germany.

DECLASSIFICATION

In June 1994, DOD announced that it was declassifying all of the material related to the potential causes of Gulf War veterans' illnesses. The Department is proceeding with declassification efforts and releasing information as it becomes available. To date, DOD has reviewed more than 400 linear feet of records to declassify material that mentions the possible detection of chemical or biological weapons. By the end of 1995, DOD will have the capability to match the wartime locations of individual service members with these incidents, as well as the presence of various other potential environmental hazards, such as smoke from oil well fires.

OUTREACH & EDUCATION

Because one of the most frustrating aspects of undiagnosed Gulf War veterans' illnesses is the lack of medical knowledge about the cause or cure, the Administration is reaching out to military personnel and veterans to educate them about available medical exams, treatment and compensation, as well as about new findings as they develop.

- **Hotlines:** DOD, as of June 1994, and VA, as of February 1995, began operating hotlines to provide Gulf War veterans with easy access to medical examinations and treatment. Callers are referred to the appropriate DOD or VA medical treatment facility. In addition, the VA hotline provides information on all VA medical care, compensation and research programs for Gulf War veterans. The hotline numbers are: DOD, 1-800-796-9699; VA, 1-800-PGW-VETS. VA is also providing medical and compensation benefits information on an electronic computer bulletin board, available 24 hours per day. This number is 1-800-US1-VETS.
- **Defense Secretary and Joint Chiefs Chairman Letter to Veterans:** In May 1994, Secretary Perry and General Shalikashvili jointly sent letters to all Gulf War veterans, encouraging them to go to any medical facility for an evaluation and exam if they have experienced health problems since returning from the Gulf.
- **Staying Healthy Handbooks:** As part of the 1994 deployment to the Gulf, DOD published and distributed "Staying Healthy" handbooks to help troops protect themselves against health hazards overseas. Handbooks were also provided to troops in

Somalia and Haiti. Similar information was not consistently available to military personnel during Operations Desert Shield and Desert Storm.

- **Persian Gulf Review:** VA publishes a quarterly newsletter, Persian Gulf Review, which is sent to everyone on its health registry, each VA Medical Center, and veterans' service organizations. It provides information relevant to the health and compensation concerns of Gulf War veterans and their families.

RESEARCH

More than thirty research projects are underway to try to determine the causes of Gulf War veterans' illnesses. The research projects include epidemiological investigations, environmental hazards research, psychological and neurological studies, studies of the effects of the anti-nerve gas drug pyridostigmine bromide, research on the tropical disease leishmaniasis, and on the effects of exposure to depleted uranium. A few of the more than thirty studies are highlighted below.

- **Environmental Hazards Research Centers:** VA Environmental Hazards Research Centers, located in Boston, MA, East Orange, NJ, and Portland, OR were opened in October 1994. The centers are carrying out fourteen research projects in such areas as: the effects of toxic exposure on behavior, memory, the immune and nervous systems, and the development of cancer and Post Traumatic Stress Disorder. Specific studies are also examining chemical hypersensitivity, chronic fatigue syndrome, and risk factors for undiagnosed illnesses.
- **Mortality Study:** The VA Epidemiology Service is completing a study of death rates and causes of death among those who served in the Gulf War. Comparisons will be made with veterans who did not serve in the Gulf. Results are expected later this year.
- **Birth Defects Study:** The Centers for Disease Control (CDC), VA and the Mississippi State Health Department examined a report of increased numbers of birth defects in the children of two units of the Mississippi National Guard. The study, completed in December 1994, found no increase in major or minor birth defects.

- **Iowa Study:** At Congressional request, the Administration is conducting a pilot survey of Gulf War veterans from Iowa, comparing a random selection of those who served in the Gulf War with a random selection of those who served elsewhere during the same period. This CDC study includes a detailed assessment of veterans' health concerns as well as those of their families.
- **Kuwait Oil Fires Study:** This ongoing study is examining health risks to military troops and personnel exposed to oil fire smoke in the Gulf. The study's initial findings, released in September 1994, concluded that the levels of toxic substances measured in May through December 1991 were well below United States regulatory limits.
- **Anti-Nerve Gas Drug Studies:** DOD is conducting studies of the effects of pyridostigmine bromide, an anti-nerve gas drug given to troops in the Gulf. The studies are examining the effects of this drug on women and men as well as the effects of interactions between this drug and other environmental chemicals such as insecticides that were present in the Gulf. Results are expected later this year.
- **Tropical Disease Study:** DOD, VA and the Department of Health and Human Services are examining the occurrences of the tropical parasitic disease leishmaniasis in Gulf troops. These studies aim to develop better diagnostic tests and treatment for this disease.
- **Navy Studies:** Three large epidemiological studies, begun in October 1994, are being carried out by the Navy. The studies are analyzing the health of Gulf War Construction Battalion (SeaBee) service members, hospitalization rates among all Gulf War veterans, and birth outcomes in all Gulf War veterans and their families. Preliminary results are expected in late 1995.

REVIEWS BY OUTSIDE EXPERTS

To ensure that all avenues for research on Gulf War veterans' illnesses are being aggressively pursued, the Administration has asked several panels of non-governmental scientists to review ongoing activities and make recommendations for further research. These reviews indicate a consensus in some areas. For example, there is agreement among reviewers that, rather than a single

cause or illness, there are likely to be several different causes and illnesses among Gulf War veterans.

- **National Institutes of Health (NIH) Workshop:** In April 1994, the NIH hosted a panel of outside experts to examine research efforts to date and make recommendations for future research in areas such as epidemiology, stress-related diseases, pyridostigmine bromide and leishmaniasis. Many of these recommendations are now being implemented.
- **National Academy of Sciences, Institute of Medicine (IOM):** As directed by Congress, an IOM panel is reviewing and evaluating current research efforts related to Gulf War veterans' illnesses. The group's first report, issued in January 1995, provided a number of recommendations for improving research, many of which are being implemented. The IOM is also reviewing and evaluating DOD's Comprehensive Clinical Evaluation Program.
- **Defense Science Board Task Force:** This panel, headed by Nobel laureate Dr. Joshua Lederberg, was asked by DOD to examine intelligence and other information related to possible troop exposure to chemical or biological weapons, and potential health consequences resulting from low level chemical exposure, environmental pollutants, Kuwait oil fires and other health hazards. The panel's report, released in June 1994, concluded that there was no evidence of the use of chemical or biological warfare against U.S. troops in the Gulf.

DRAFT
3/3/95

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

Date

FACT SHEET

Gulf War Veterans' Illnesses: New Initiatives

Various steps have already been taken by the Clinton Administration to respond to the health concerns of U.S. military personnel who served in the Gulf War. Today, the President announced a number of new initiatives aimed at further enhancing the U.S. government response to the needs of Gulf War veterans who are ill.

ADVISORY COMMITTEE

The President will establish an Advisory Committee on Gulf War Veterans' illnesses to review and make recommendations on U.S. government activities related to the illnesses being reported by U.S. military personnel who served in the Gulf War. This Committee, which will begin its work in the spring of 1995, will review and make recommendations on Gulf War illnesses-related research, the activities of the Persian Gulf Veterans Coordinating Board, medical examination and treatment programs, public outreach efforts, the implementation of recommendations from external reviews, possible risk factors, and reports of the possible detection of chemical or biological weapons. The Committee is to provide an interim report within six months of beginning its work and a final report by no later than December 1996.

TREATMENT

The Department of Defense (DOD) and the Department of Veterans Affairs (VA) are enhancing their current programs for diagnosing and treating Gulf War veterans.

- **Specialized Care Centers:** DOD is establishing Specialized Care Centers in Washington, D.C. and San Antonio, TX, to provide care for patients who need additional testing or treatment after completing comprehensive medical examinations at other military medical facilities. These centers will open in March 1995.

- **Reproductive Problems:** VA (delete "and DOD") diagnostic test programs for Gulf War veterans will soon include guidelines for testing individuals who have had reproductive problems since returning from the Gulf. Nationally recognized medical experts are being consulted for advice in developing these guidelines.

EXPANDED RESEARCH

In addition to the research that is already underway, VA and DOD are planning to spend \$8-13 million on new research on Gulf War veterans' illnesses in 1995. Most of these studies will be designed, peer reviewed and conducted by university researchers and other independent scientists or, in the case of VA research, by scientists at VA medical centers across the country.

- **Epidemiological Research:** For the first time, major epidemiological studies will be conducted to examine whether such things as exposure to medications and pesticides, the location of troops during the war, and the age and sex of such troops are associated with specific symptoms. The DOD-funded studies will be based on a random sample of Gulf War veterans and civilians employed by DOD. A VA study will compare the health of 15,000 Gulf War veterans and 15,000 veterans who served during the same years but not in the Persian Gulf. Miscarriages, birth defects, and other reproductive health problems and illnesses among spouses or children will also be studied by DOD and VA.
- **Drugs and Vaccines:** New research is being conducted on the drugs and vaccines provided to help protect U.S. military personnel in the Gulf against chemical and biological weapons. This research will include further studies on the anti-nerve agent *drug* pyridostigmine bromide, alone and in combination with other medications or chemicals such as pesticides. Research on the long-term effects of anthrax and botulism vaccines will also be conducted, for the first time.
- **Medical Evaluations of Spouses and Children:** For the first time, VA will provide medical evaluations and diagnostic tests to spouses and children of Gulf War veterans. These tests will be provided as part of a research project on the possible relationship between the illnesses of Gulf War veterans and those of their spouses and children. Dependents of veterans who are enrolled in the VA Gulf War Registry will be selected for inclusion in this study.

- **Environmental Hazards:** DOD and VA will support new research to expand existing information on potential environmental hazards such as infectious and parasitic diseases and the effects of exposure to petrochemicals, lead, depleted uranium and other toxic substances.
- **Improving Treatment:** Later this year, DOD will accept research proposals from scientists across the country designed to improve treatment for Gulf War veterans with diagnosed and undiagnosed illnesses and symptoms.

OPENNESS

In addition to the DOD declassification program previously announced, DOD and VA are taking other steps to make information available about issues of concern to Gulf War veterans.

- **Chemical and Biological Weapons:** Since the end of the Gulf War, some veterans have expressed concern about the possibility that they were exposed to chemical or biological weapons during the war. In response to these concerns, DOD will prepare and make available analyses of the most frequently cited reports of the detection of chemical or biological weapons and will continue to declassify and release documents bearing on these and other reports.
- **Data on Serious Illnesses:** Information regarding cancers and other serious illnesses among Gulf War veterans who have received care in VA and DOD medical facilities will be made available to the public. Reports, categorized by age group, sex and race, will be released every six months by the Persian Gulf Interagency Coordinating Board.

OUTREACH

VA Secretary Jesse Brown has recently sent letters to all VA Gulf War *Health Examination* Registry participants informing them of new compensation regulations for undiagnosed illnesses.

FUTURE SAFEGUARDS

The Gulf War made clear the need for better training of U.S. troops on health risks prior to overseas deployments, for improvements in on-the-scene preventive medicine during deployments, and for better follow-up documentation and medical screening of troops after deployments. In response, DOD is developing a comprehensive approach that will strengthen training on the risks of toxic exposure and make more information about such risks available to individual service members. The effort

will also improve documentation of each service members' health, medical problems and exposures before, during and after deployment. Policy guidelines for this new approach will be completed this spring, with the military services developing detailed implementing instructions thereafter.

Q: Why do this? What is different or better than previous expert panels?

A: For the first time, a fully independent expert panel will be created to make sure that the government's response is as effective as possible. The Committee will submit an interim report within 6 months of beginning its work and a final report by December 1996.

- **Previous expert panels have been more short-term or had a more narrow focus.**
- **We have come to realize that these undiagnosed illnesses are more difficult to understand than previously believed, and therefore requires a more concentrated effort. So, the [Presidential] Advisory Committee will:**
 - **make sure that we are doing everything possible to provide effective medical care to those who are ill;**
 - **make sure we are effectively coordinating research and other efforts aimed at determining the causes of their illnesses**
 - **make sure that information about these issues is made publicly available as soon as possible**

If pushed more:

- **Previous review efforts have been more short-term or had a more narrow focus.**
- **For example, the NIH panel met for only 3 days, and the Lederberg panel, which was created by the Defense Department, focused on DOD issues and completed its work last summer. The Institute of Medicine expert panel is making recommendations about the types of research that are needed, but not about other issues.**
- **VA and DOD have made unprecedented efforts to diagnose and treat these illnesses, and to compensate veterans who are disabled from them. The President believes that this independent Advisory Committee is the best way of determining what we are doing right and what we could be doing better.**

Q: Is there anything else new here?

A: The President also announced other new initiatives, such as:

- new research projects on anti-nerve gas **drugs** and pesticides
- research and medical evaluations of the possible transmission of illnesses to **spouses** and children
- new plans to release information about reports of detections of biological and chemical weapons and about data on **serious** illnesses among Gulf War veterans.
- **We have fact sheets on ongoing and new activities.**



THE SPECIAL
ASSISTANT

OFFICE OF THE SECRETARY OF DEFENSE
1000 DEFENSE PENTAGON
WASHINGTON, DC 20301-1000



FAX COVER SHEET

Date: March 3, 1995

To: Jennifer O'Connor

Fax #: 456-6704

From: ☐ Margie Sullivan (703-693-0566)
☐ Jeanne Wetzel (703-693-0566)
☒ Laura Marcus (703-693-4272)

Pages: 6 (including cover)

**Here's our most up to date message on Persian Gulf
Illness. Although these talking points are not in question
and answer format, they are the most comprehensive
information we can provide considering the time
constraints.**



TAB 7*Ask
Mary Elka
re this***PERSIAN GULF ILLNESS -- MARCH 2, 1995****MESSAGE****USA Today***(Thursday March 2)*

- There is nothing new that we can see in the USA Today article that appeared today.
- As it has been extensively reported before, the Administration has asked several panels of non-government scientists to review on-going activities and make recommendations.
 - The National Institutes of Health Workshop.
 - National Academy of Sciences, Institute of Medicine.
 - Defense Science Board (Lederberg Commission).
- There has been agreement among reviewers that, rather than a single cause or illness, there are likely to be several causes and illnesses among Gulf War veterans.

No Compelling Evidence

- The Department of Defense position that there is no compelling evidence of the use of chemical or biological weapons in the Persian Gulf War remains unchanged.

On-going Concern

- General Shalikashvili commented on the ongoing research of sick gulf war veterans, "No one is more concerned and frustrated about our inability to get to the root of that problem than the Department of Defense... I don't have an easy answer for anyone, because we don't know what really happened. We are going to watch this very, very carefully for any signs of possible repetition."

- The U.S. Government is working together to solve the Gulf War illnesses problem.
- The Defense Department cares - Our focus is on the patent and the cure.
- We've gotten results and found out what is making most Gulf War vets ill.
- We are working hard to find the cause of all of these illnesses.
- We have acted in a timely way and completed about 2,000 clinical evaluations so far.

The Danger of Unconfirmed Reports

- It is important to note that anecdotal reports that are often seen in the news media are offer only unconfirmed initial reports.
- To take these as a confirmed fact, no matter how well intentioned, is incorrect and unreasonable. Also, these reports cannot be taken in isolation.
- These reports were previously reviewed and discounted as a direct result of the investigations by on-site officers-in-charge and later confirmatory investigation.

No Evidence Withheld

- There is no basis for the charge that the Department tried to hide the logs in response to Senator Riegle's March 1994 request. In its "initial interim" response to the request, the Department described the search being conducted throughout DoD and noted that Central Command had, after one search, found no documents meeting the description in the request.
- In this response the Department invited Senator Riegle to "provide a more specific description" of the documents sought, and offered to "repeat the search using the new description."
- Senator Riegle's office did not respond to this offer.

BACKGROUND

What We Do for Deployments

- We are always concerned about the health of our service members. We take additional health precautions when troops deploy outside the United States.
- Service members receive immunizations and are now receiving specific information on the need for these immunizations, possible side effects and what to do if there is a problems with any immunization or drug.
- Education on health risks and illness prevention have been expanded both in the briefings that service members and printed information they receive.
- We take the threat of CW warfare very seriously. Equipment for chemical and biological warfare has been upgraded. This includes a new protective mask, more chemical detection equipment and a new biological detection system which is ready to be fielded (Army is the agent for CW gear and can give details on new equipment).

[Iraq's stock of these weapons has been greatly decreased, as well as its ability to produce and deliver this type of weapon.]

IMMUNIZATIONS

- Basic mandatory immunizations: Hepatitis, Influenza, Measles, Menigococcal, Polio, Typhoid and Tetanus. A Tuberculosis skin test is recommended. No longer given is small pox because the vaccine is no longer commercially available.
- Special immunizations for some personnel because of their job or their location (i.e. veterinarians would receive rabies shots because they handle animals): Hepatitis B, Rabies, Pneumococcal, Haemophilus Influenza and Malaria prophylaxis. Not giving Anthrax, but it will be available should the Operational Commander determine there is evidence of a threat and it is needed.

- Pyridostigmine, a drug taken orally as a protective measure against chemical warfare nerve agents. It will be taken by individuals only after the Operational Commander determines an enemy attack with chemical warfare nerve agents exists.

- If issued, individuals would receive a pack containing twenty-one 30 mg tablets. The dosage prescribed is one tablet every eight hours and is self administered.

EDUCATION

- Current plans include all service members receive a briefing on potential health hazards before they deploy. This briefing includes:
 - The need for immunizations, what they protect against and what their side effects may be.
 - Biological threats such as diseases, insect bites, poisonous animals.
 - Environmental threats: Proper use of insecticides, proper use of equipment such as kerosene heaters, identification and reporting of industrial toxins that may be in the area of operation.
- All service members will receive a booklet that contains information on health risks in the theater.
- All service members receive regular training on the use of protective clothing and equipment for chemical and biological warfare.

EQUIPMENT

- The protective equipment used by service members has been upgraded from that used during Desert Shield/Storm. (Army should have a list of those items.) CW gear is the last equipment issued before deployment.

MEDICAL PERSONNEL

- Military medical personnel are being deployed to ensure primary and specialty care in theater. They will also register treatments and environmental exposures of service members. This surveillance will allow prompt examination of potential hazardous exposures that occur during this deployment.

- **Medical teams will provide information on and investigate: industrial hygiene, stress, infectious diseases and chemical/biological warfare.**

Source: Health Affairs & Chem Bio
A/O: Jim Turner, 50192

Questions for Mrs. Clinton:

Q: Why has it taken so long to help these veterans and their families?

A: We have responded promptly and compassionately to the needs of our Gulf War vets. We have done everything we can to assure that every individual who serves in the Armed Forces gets the medical care that they need to get rid of their sickness and their illness, from whatever cause.

Q: How can you be sure that no chemical or biological weapons were used on our troops during the Gulf War?

A: Several comprehensive studies looking at the possible use of chemical or biological weapons have not found any compelling evidence that these kinds of weapons were used during the War. I cannot give you confirmation that there wasn't a soldier that came across a chemical somewhere. We're talking here about worrying about the health of our troops and the kind of medical care that they're getting. We are continuing to look as diligently as we can for evidence on this question. As of now, it is our judgment, after marshaling every bit of independent and outside analysis that we can... The Defense Science Board did an independent study of this matter and found, in their judgment, there was no confirmation of chemical weapons, widespread use in the Gulf.

Q: How can you be sure that Pyridostigmine didn't cause the problems our veterans are having?

A: Pyridostigmine is an important treatment which protects troops against the possible use of chemical agents in the Gulf. The important point of giving those drugs available to service people who were in the Gulf was to protect them from potential Iraqi use of chemical weapons. Iraq had used chemical weapons against Iran, and it was a great concern to the Department of Defense and military commanders that chemical agents might be used, and we felt that it was essential to provide protection any way we could. That drug, Pyridostigmine, protects against chemical agents.

DRAFT
3/3/95

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

Date

FACT SHEET

Gulf War Veterans' Illnesses: Ongoing Initiatives

Shortly after returning from the Persian Gulf following Operations Desert Shield and Desert Storm, some U.S. military personnel began to report a variety of symptoms, such as fatigue, muscle and joint pain, memory loss, and headaches. In order to address these Gulf War veterans' health concerns, the Administration has taken many steps, highlights of which are listed below.

COMPENSATION

To make sure that veterans with chronic disabilities resulting from Gulf War service are compensated, the Administration is moving quickly to compensate those with both diagnosed and undiagnosed illnesses.

- **Compensation for Diagnosed Illnesses:** Under traditional disability compensation programs, veterans receive monthly compensation checks for diagnosed disabilities connected to their service. As of January 31, 1995, 16,390 veterans are receiving this type of disability compensation, including 472 for disabilities resulting from exposure to environmental hazards.
- **Compensation for Undiagnosed Illnesses:** President Clinton strongly supported and signed legislation to allow for compensation to veterans suffering from undiagnosed illnesses. This is the first time ever that the Department of Veterans Affairs (VA) has compensated veterans before their illnesses are diagnosed. The first compensation checks under this new program were sent in mid-February 1995.

TREATMENT

The Administration's first priority for Gulf War veterans is to provide them with the best possible medical care, even when diagnoses have not been made.

- **Priority Access to VA Health Care:** In 1993 and again in 1994, President Clinton signed legislation that changes standard eligibility rules to enable veterans to obtain free medical care for illnesses that may be related to service in the Persian Gulf. To date, more than 140,000 Gulf War veterans have received medical care in VA facilities.
- **Free Specialized VA Health Examinations:** Under the VA Persian Gulf Registry Health Examination Program, every Gulf War veteran who has health concerns, whether or not the veteran is ill, is eligible for a free, complete physical exam. More than 40,000 veterans have participated in this program since it began in 1992. Since June 1994, veterans with unexplained illnesses whose medical conditions require a more specialized approach have had access to a more comprehensive health examination, free of charge, at any VA or military medical center.
- **Specialized VA Diagnosis Centers:** For those veterans most difficult to diagnose, VA has established Persian Gulf Referral Centers in Washington D.C., Houston, TX, and Los Angeles, CA.
- **Special Treatment for Active Duty Military Personnel & Their Families:** Under the Defense Department's (DOD's) Comprehensive Clinical Evaluation Program, more than 15,000 Gulf War veterans still on active duty have registered for extensive free medical exams and treatment. Between 8,000 and 9,000 individuals have begun to receive these exams and treatment since the program began in June 1994. Military personnel register by toll-free hotline and are then examined and treated at local military medical centers and then, if necessary, at 13 major medical centers in the U.S. and Germany.

DECLASSIFICATION

In June 1994, DOD announced that it was declassifying all of the material related to the potential causes of Gulf War veterans' illnesses. The Department is proceeding with declassification efforts and releasing information as it becomes available. To date, DOD has reviewed more than 400 linear feet of records to declassify material that mentions the possible detection of chemical or biological weapons. By the end of 1995, DOD will have the capability to match the wartime locations of individual service members with these incidents, as well as the presence of various other potential environmental hazards, such as smoke from oil well fires.

OUTREACH & EDUCATION

Because one of the most frustrating aspects of undiagnosed Gulf War veterans' illnesses is the lack of medical knowledge about the cause or cure, the Administration is reaching out to military personnel and veterans to educate them about available medical exams, treatment and compensation, as well as about new findings as they develop.

- **Hotlines:** DOD, as of June 1994, and VA, as of February 1995, began operating hotlines to provide Gulf War veterans with easy access to medical examinations and treatment. Callers are referred to the appropriate DOD or VA medical treatment facility. In addition, the VA hotline provides information on all VA medical care, compensation and research programs for Gulf War veterans. The hotline numbers are: DOD, 1-800-796-9699; VA, 1-800-PGW-VETS. VA is also providing medical and compensation benefits information on an electronic computer bulletin board, available 24 hours per day. This number is 1-800-US1-VETS.
- **Defense Secretary and Joint Chiefs Chairman Letter to Veterans:** In May 1994, Secretary Perry and General Shalikashvili jointly sent letters to all Gulf War veterans, encouraging them to go to any medical facility for an evaluation and exam if they have experienced health problems since returning from the Gulf.
- **Staying Healthy Handbooks:** As part of the 1994 deployment to the Gulf, DOD published and distributed "Staying Healthy" handbooks to help troops protect themselves against health hazards overseas. Handbooks were also provided to troops in Somalia and Haiti. Similar information was not consistently

available to military personnel during Operations Desert Shield and Desert Storm.

- **Persian Gulf Review:** VA publishes a quarterly newsletter, Persian Gulf Review, which is sent to everyone on its health registry, each VA Medical Center, and veterans' service organizations. It provides information relevant to the health and compensation concerns of Gulf War veterans and their families.

RESEARCH

More than thirty research projects are underway to try to determine the causes of Gulf War veterans' illnesses. The research projects include epidemiological investigations, environmental hazards research, psychological and neurological studies, studies of the effects of the anti-nerve gas drug pyridostigmine bromide, research on the tropical disease leishmaniasis, and on the effects of exposure to depleted uranium. A few of the more than thirty studies are highlighted below.

- **Environmental Hazards Research Centers:** VA Environmental Hazards Research Centers, located in Boston, MA, East Orange, NJ, and Portland, OR, were opened in October 1994. The centers are carrying out fourteen research projects in such areas as: the effects of toxic exposure on behavior, memory, the immune and nervous systems, and the development of cancer and Post Traumatic Stress Disorder. Specific studies are also examining chemical hypersensitivity, chronic fatigue syndrome, and risk factors for undiagnosed illnesses.
- **Mortality Study:** The VA Epidemiology Service is completing a study of death rates and causes of death among those who served in the Gulf War. Comparisons will be made with veterans who did not serve in the Gulf. Results are expected later this year.
- **Birth Defects Study:** The Centers for Disease Control (CDC), VA and the Mississippi State Health Department examined a report of increased numbers of birth defects in the children of two units of the Mississippi National Guard. The study, completed in December 1994, found no increase in major or minor birth defects.

- **Iowa Study:** At Congressional request, the Administration is conducting a pilot survey of Gulf War veterans from Iowa, comparing a random selection of those who served in the Gulf War with a random selection of those who served elsewhere during the same period. This CDC study includes a detailed assessment of veterans' health concerns as well as those of their families.
- **Kuwait Oil Fires Study:** This ongoing study is examining health risks to military troops and personnel exposed to oil fire smoke in the Gulf. The study's initial findings, released in September 1994, concluded that the levels of toxic substances measured in May through December 1991 were well below United States regulatory limits.
- **Anti-Nerve Gas Drug Studies:** DOD is conducting studies of the effects of pyridostigmine bromide, an anti-nerve gas drug given to troops in the Gulf. The studies are examining the effects of this drug on women and men as well as the effects of interactions between this drug and other environmental chemicals such as insecticides that were present in the Gulf. Results are expected later this year.
- **Tropical Disease Study:** DOD, VA and the Department of Health and Human Services are examining the occurrences of the tropical parasitic disease leishmaniasis in Gulf troops. These studies aim to develop better diagnostic tests and treatment for this disease.
- **Navy Studies:** Three large epidemiological studies, begun in October 1994, are being carried out by the Navy. The studies are analyzing the health of Gulf War Construction Battalion (SeaBee) service members, hospitalization rates among all Gulf War veterans, and birth outcomes in all Gulf War veterans and their families. Preliminary results are expected in late 1995.

REVIEWS BY OUTSIDE EXPERTS

To ensure that all avenues for research on Gulf War veterans' illnesses are being aggressively pursued, the Administration has asked several panels of non-governmental scientists to review ongoing activities and make recommendations for further research. These reviews indicate a consensus in some areas. For example, there is agreement among reviewers that, rather than a single

cause or illness, there are likely to be several different causes and illnesses among Gulf War veterans.

- **National Institutes of Health (NIH) Workshop:** In April 1994, the NIH hosted a panel of outside experts to examine research efforts to date and make recommendations for future research in areas such as epidemiology, stress-related diseases, pyridostigmine bromide and leishmaniasis. Many of these recommendations are now being implemented.
- **National Academy of Sciences, Institute of Medicine (IOM):** As directed by Congress, an IOM panel is reviewing and evaluating current research efforts related to Gulf War veterans' illnesses. The group's first report, issued in January 1995, provided a number of recommendations for improving research, many of which already are being implemented. The IOM is also reviewing and evaluating DOD's Comprehensive Clinical Evaluation Program.
- **Defense Science Board Task Force:** This panel, headed by Nobel laureate Dr. Joshua Lederberg, was asked by DOD to examine intelligence and other information related to possible troop exposure to chemical or biological weapons, and potential health consequences resulting from low level chemical exposure, environmental pollutants, Kuwait oil fires and other health hazards. The panel's report, released in June 1994, concluded that there was no evidence of the use of chemical or biological warfare against U.S. troops in the Gulf.

DRAFT
3/3/95

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

Date

FACT SHEET

Gulf War Veterans' Illnesses: New Initiatives

The Clinton Administration has been working hard to respond to the health concerns of U.S. military personnel who served in the Gulf War. Today, the President announced a number of new initiatives aimed at further enhancing the U.S. government response to the needs of Gulf War veterans who are ill.

ADVISORY COMMITTEE

The President will establish an Advisory Committee on Gulf War Veterans' Illnesses to review and make recommendations on U.S. government activities related to the illnesses being reported by U.S. military personnel who served in the Gulf War. This Committee, which will begin its work in the spring of 1995, will review and make recommendations on Gulf War illnesses-related research, the activities of the Persian Gulf Veterans Coordinating Board, medical examination and treatment programs, public outreach efforts, the implementation of recommendations from external reviews, possible risk factors, and reports of the possible detection of chemical or biological weapons. The Committee is to provide an interim report within six months of beginning its work and a final report by no later than December 1996.

TREATMENT

The Department of Defense (DOD) and the Department of Veterans Affairs (VA) are enhancing their current programs for diagnosing and treating Gulf War veterans.

- **Specialized Care Centers:** DOD is establishing Specialized Care Centers in Washington, D.C. and San Antonio, TX, to provide care for patients who need additional testing or treatment after completing comprehensive medical examinations at other military medical facilities. These centers will open in March 1995.

- **Reproductive Problems:** VA diagnostic test programs for Gulf War veterans will soon include guidelines for testing individuals who have had reproductive problems since returning from the Gulf. Nationally recognized medical experts are being consulted for advice in developing these guidelines.

EXPANDED RESEARCH

In addition to the research that is already underway, VA and DOD are planning to spend \$8-13 million on new research on Gulf War veterans' illnesses in 1995. Most of these studies will be designed, peer reviewed and conducted by university researchers and other independent scientists or, in the case of VA research, by scientists at VA medical centers across the country.

- **Epidemiological Research:** For the first time, major epidemiological studies will be conducted to examine whether such things as exposure to medications and pesticides, the location of troops during the war, and the age and sex of such troops are associated with specific symptoms. The DOD-funded studies will be based on a random sample of Gulf War veterans and civilians employed by DOD. A VA study will compare the health of 15,000 Gulf War veterans and 15,000 veterans who served during the same years but not in the Persian Gulf. Miscarriages, birth defects, and other reproductive health problems and illnesses among spouses or children will also be studied by DOD and VA.
- **Drugs and Vaccines:** New research is being conducted on the drugs and vaccines provided to help protect U.S. military personnel in the Gulf against chemical and biological weapons. This research will include further studies on the anti-nerve agent drug pyridostigmine bromide, alone and in combination with other medications or chemicals such as pesticides. Research on the long-term effects of anthrax and botulism vaccines will also be conducted, for the first time.
- **Medical Evaluations of Spouses and Children:** For the first time, VA will provide medical evaluations and diagnostic tests to spouses and children of Gulf War veterans. These tests will be provided as part of a research project on the possible relationship between the illnesses of Gulf War veterans and those of their spouses and children. Dependents of veterans who are enrolled in the VA Gulf War Registry will be selected for inclusion in this study.

- **Environmental Hazards:** DOD and VA will support new research to expand existing information on potential environmental hazards such as infectious and parasitic diseases and the effects of exposure to petrochemicals, lead, depleted uranium and other toxic substances.
- **Improving Treatment:** Later this year, DOD will accept research proposals from scientists across the country designed to improve treatment for Gulf War veterans with diagnosed and undiagnosed illnesses and symptoms.

OPENNESS

In addition to the DOD declassification program previously announced, DOD and VA are taking other steps to make information available about issues of concern to Gulf War veterans.

- **Chemical and Biological Weapons:** Since the end of the Gulf War, some veterans have expressed concern about the possibility that they were exposed to chemical or biological weapons during the war. In response to these concerns, DOD will prepare and make available analyses of the most frequently cited reports of the detection of chemical or biological weapons and will continue to declassify and release documents bearing on these and other reports.
- **Data on Serious Illnesses:** Information regarding cancers and other serious illnesses among Gulf War veterans who have received care in VA and DOD medical facilities will be made available to the public. Reports, categorized by age group, sex and race, will be released every six months by the Persian Gulf Interagency Coordinating Board.

OUTREACH

VA Secretary Jesse Brown has recently sent letters to all participants in the VA Persian Gulf Registry Health Examination Program informing them of new compensation regulations for undiagnosed illnesses.

FUTURE SAFEGUARDS

The Gulf War made clear the need for better training of U.S. troops on health risks prior to overseas deployments, for improvements in on-the-scene preventive medicine during deployments, and for better follow-up documentation and medical screening of troops after deployments. In response, DOD is developing a comprehensive approach that will strengthen training on the risks of toxic exposure and make more information about

such risks available to individual service members. The effort will also improve documentation of each service members' health, medical problems and exposures before, during and after deployment. Policy guidelines for this new approach will be completed this spring, with the military services developing detailed implementing instructions thereafter.

DRAFT
3/3/95

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

Date

FACT SHEET

Gulf War Veterans' Illnesses: New Initiatives

The Clinton Administration has been working hard to respond to the health concerns of U.S. military personnel who served in the Gulf War. Today, the President announced a number of new initiatives aimed at further enhancing the U.S. government response to the needs of Gulf War veterans who are ill.

President

ADVISORY COMMITTEE

The President will establish an Advisory Committee on Gulf War Veterans' Illnesses to review and make recommendations on U.S. government activities related to the illnesses being reported by U.S. military personnel who served in the Gulf War. This Committee, which will begin its work in the spring of 1995, will review and make recommendations on Gulf War illnesses-related research, the activities of the Persian Gulf Veterans Coordinating Board, medical examination and treatment programs, public outreach efforts, the implementation of recommendations from external reviews, possible risk factors, and reports of the possible detection of chemical or biological weapons. The Committee is to provide an interim report within six months of beginning its work and a final report by no later than December 1996.

TREATMENT

The Department of Defense (DOD) and the Department of Veterans Affairs (VA) are enhancing their current programs for diagnosing and treating Gulf War veterans.

- **Specialized Care Centers:** DOD is establishing Specialized Care Centers in Washington, D.C. and San Antonio, TX, to provide care for patients who need additional testing or treatment after completing comprehensive medical examinations at other military medical facilities. These centers will open in March 1995.

- **Reproductive Problems:** VA diagnostic test programs for Gulf War veterans will soon include guidelines for testing individuals who have had reproductive problems since returning from the Gulf. Nationally recognized medical experts are being consulted for advice in developing these guidelines.

EXPANDED RESEARCH

In addition to the research that is already underway, VA and DOD are planning to spend \$8-13 million on new research on Gulf War veterans' illnesses in 1995. Most of these studies will be designed, peer reviewed and conducted by university researchers and other independent scientists or, in the case of VA research, by scientists at VA medical centers across the country.

- **Epidemiological Research:** For the first time, major epidemiological studies will be conducted to examine whether such things as exposure to medications and pesticides, the location of troops during the war, and the age and sex of such troops are associated with specific symptoms. The DOD-funded studies will be based on a random sample of Gulf War veterans and civilians employed by DOD. A VA study will compare the health of 15,000 Gulf War veterans and 15,000 veterans who served during the same years but not in the Persian Gulf. Miscarriages, birth defects, and other reproductive health problems and illnesses among spouses or children will also be studied by DOD and VA.
- **Drugs and Vaccines:** New research is being conducted on the drugs and vaccines provided to help protect U.S. military personnel in the Gulf against chemical and biological weapons. This research will include further studies on the anti-nerve agent drug pyridostigmine bromide, alone and in combination with other medications or chemicals such as pesticides. Research on the long-term effects of anthrax and botulism vaccines will also be conducted, for the first time.
- **Medical Evaluations of Spouses and Children:** For the first time, VA will provide medical evaluations and diagnostic tests to spouses and children of Gulf War veterans. These tests will be provided as part of a research project on the possible relationship between the illnesses of Gulf War veterans and those of their spouses and children. Dependents of veterans who are enrolled in the VA Gulf War Registry will be selected for inclusion in this study.

- **Environmental Hazards:** DOD and VA will support new research to expand existing information on potential environmental hazards such as infectious and parasitic diseases and the effects of exposure to petrochemicals, lead, depleted uranium and other toxic substances.
- **Improving Treatment:** Later this year, DOD will accept research proposals from scientists across the country designed to improve treatment for Gulf War veterans with diagnosed and undiagnosed illnesses and symptoms.

OPENNESS

In addition to the DOD declassification program previously announced, DOD and VA are taking other steps to make information available about issues of concern to Gulf War veterans.

- **Chemical and Biological Weapons:** Since the end of the Gulf War, some veterans have expressed concern about the possibility that they were exposed to chemical or biological weapons during the war. In response to these concerns, DOD will prepare and make available analyses of the most frequently cited reports of the detection of chemical or biological weapons and will continue to declassify and release documents bearing on these and other reports.
- **Data on Serious Illnesses:** Information regarding cancers and other serious illnesses among Gulf War veterans who have received care in VA and DOD medical facilities will be made available to the public. Reports, categorized by age group, sex and race, will be released every six months by the Persian Gulf Interagency Coordinating Board.

OUTREACH

VA Secretary Jesse Brown has recently sent letters to all participants in the VA Persian Gulf Registry Health Examination Program informing them of new compensation regulations for undiagnosed illnesses.

FUTURE SAFEGUARDS

The Gulf War made clear the need for better training of U.S. troops on health risks prior to overseas deployments, for improvements in on-the-scene preventive medicine during deployments, and for better follow-up documentation and medical screening of troops after deployments. In response, DOD is developing a comprehensive approach that will strengthen training on the risks of toxic exposure and make more information about

such risks available to individual service members. The effort will also improve documentation of each service members' health, medical problems and exposures before, during and after deployment. Policy guidelines for this new approach will be completed this spring, with the military services developing detailed implementing instructions thereafter.

MEMORANDUM*O'Connor
III. 5*

TO: Distribution
FROM: Bob Boorstin
RE: Draft of VFW speech
DATE: March 4, 1995

Attached please find latest draft -- 3/4/95, 8 pm -- of the President's VFW speech.

This draft reflects the President's edits of earlier drafts. Note please: he removed the paragraph on page two that flagged later discussion of Gulf War illnesses and announcements.

Please note sentences substituted for: "Last year, I signed landmark legislation that -- for the first time -- compensates veterans suffering from undiagnosed illnesses resulting from Operations Desert Storm and Desert Shield." This sentence is Gulf War specific. Isn't this the first time any president has compensated vets from any undiagnosed illness contracted in any war? If so, we should say it.

I need a town/city reference for Dylan and Theresa Callahan.

This draft also reflects comments of NSC, VA, DoD, OMB, HHS, White House Cabinet Affairs, the First Lady's Office and just about everybody else in Washington with a fax machine.

Comments would be appreciated by **Noon, Sunday**. I will be in the office (456-5696) tomorrow afternoon and am available via the White House signal operator (757-5000).

Thank you.

3/4/95, 8 pm

**PRESIDENT WILLIAM JEFFERSON CLINTON
REMARKS TO THE VETERANS OF FOREIGN WARS
WASHINGTON, D.C.
MARCH 6, 1995**

Commander Kent, thank you for that warm introduction. I can tell you from firsthand experience that the members of the VFW are lucky to have a leader as forceful and thoughtful as Gunner Kent. I also want to recognize Adjutant General Larry Rivers... Charles Durning, the Chairman of the National Salute to Hospitalized Veterans... the President of your Ladies Auxiliary, Helen Harsh.... and two veterans of the Veterans of Foreign Wars, Jimmy Gates of Alabama, who has given more than 50 years of service to this organization, and your past national commander, Bob Merrill of California. It's people like Bob Merrill -- who piloted biplanes in World War I and devoted their lives to fighting for their fellow veterans -- who have helped make the VFW make a difference in the lives of so many Americans. [And it gives me great pleasure to tell you that, just as soon as it comes across my desk, I'll sign the bill that will allow the VFW to reform its charter and expand your membership even further.]

This year we mark the 50th anniversary of the end of World War II. Many of you fought in that great struggle, and one of my greatest privileges since taking office has been meeting some of the men and women who sacrificed so much for our freedom. On the windswept beaches of Normandy, between the crowded rows of a cemetery in England, and inside the tunnels on the Rock of Corregidor in the Philippines, I have gotten to know true American heroes.

America owes them a debt we cannot fully repay. With their lives before them, they left everything -- family, loved ones, home -- to fight for a just cause. From the Aleutians to Okinawa, from the Mediterranean to the North Sea, they watched friends fall at their side -- more than 400,000 died, 700,000 were wounded -- and never faltered. They gave everything so that we might be free.

To honor their deeds -- and those of all the veterans who fought for freedom in World War I, Korea, Vietnam, the Persian Gulf and around the world -- gratitude and ceremonies are not enough. We must protect the benefits you have earned... go the whole distance to address safely the dangers imposed by modern warfare... and preserve what you fought for: the American dream at home and America's leadership around the world.

Today, the tradition of America's leadership is under siege. If the new isolationists have their way, America would abandon policies -- backed by Republicans and Democrats -- that have guided us for half a century and that won the Cold War and unparalleled prosperity. America would back away from institutions like the United Nations, which promote stability around the world. America would be forced to give up support for peacekeeping and for fragile democracies, and to cut deeply into our support for emerging market economies.

No one knows better than our veterans the grave dangers of withdrawal. The last time isolationism held sway -- during the years after World War I -- Europe and Asia slid into catastrophe, and we had to fight a second world war. You in this room -- whenever you served,

wherever you served -- know what could happen if America retreats from today's turbulent world. Yes, nations on every continent are embracing democracy and free markets. But open society and free people face many enemies -- aggression by rogue states, transnational threats like overpopulation and environmental degradation, terrible ethnic conflicts. We cannot intervene everywhere, but we must be able to protect our vital interests and keep the world moving in the right direction.

Consider what might have happened -- in the last two years alone -- if we had abandoned our responsibilities. Trade wars could have erupted without American leadership on GATT. Chaos might be lapping at our borders if we had not worked to stabilize the Mexican economy.

Refugees might have poured into our country if we had not pushed to restore democracy in Haiti. Peace might never have caught a foothold in the Middle East without our constant political and economic support.

These events, and others, prove the timeless wisdom of the words Franklin Roosevelt set down in the last speech he wrote. "We have learned in the agony of war that great power involves great responsibility." Roosevelt observed, "[But] We as Americans do not choose to deny our responsibility. Nor do we intend to abandon our determination that, within the lives of our children and our children's children, there will not be a third world war."

Your devotion -- and the service of millions of other veterans -- has helped prevent that war.

You helped stopped the spread of communist tyranny across the globe. You helped democracy

and prosperity grow for our allies in Europe and beyond. And when dictators raised their heads, you stood up and stopped them.

We must be clear about this: your legacy is threatened -- a half century of American leadership that you worked and fought for. We must at all costs preserve that leadership -- so our children have the future they deserve. As Commander-in-Chief, I have done everything in my power to protect and build on your legacy -- to make certain that America moves into the next century the strongest nation in the world and the greatest force for peace, freedom and democracy.

We will meet that goal only if we protect and strengthen our armed forces. More than anything else, our armed forces guarantees our security and our global influence. They are the backbone of our diplomacy. And they ensure our credibility. Witness the Persian Gulf, where our troops deployed swiftly and convinced Saddam Hussein not to make the same mistake twice. Or Haiti, when the news that our forces were poised to invade convinced the corrupt generals that it was time to go. Or, in the past few weeks, when our troops showed great flexibility and professionalism in transferring Cuban refugees from Panama to Guantanamo... and covering the safe withdrawal of U.N. peacekeepers from Somalia.

Time and again, the American military has demonstrated its extraordinary skills. As I pledged from the beginning of my Administration, the United States will have the best-equipped, best-trained, best-prepared military in the world. We are keeping that promise every day. Our forces are ready to fight.

To maintain that high state of readiness and keep our military strong, I have asked the Congress to increase defense funding by \$25 billion over the next six years. We have fewer troops today and we ask them to perform more different missions than ever before -- so our combat pilots must fly as often as they need, our sailors must get the hands-on experience they deserve, and our ground forces must train to peak levels. Some of the money will be used to raise military pay, and provide better housing and child care for those who serve and the families who stand by them. We must improve the quality of life in the military if we want to continue drawing educated and motivated professionals. Our men and women in uniform -- some of them your sons and daughters -- are the finest fighting force in the world, and I will fight to keep it that way.

But we must also recognize a simple truth: the troops of tomorrow will only be as good as our commitment to veterans today. Long after you have shed your uniforms -- not just for a few months or a few years, but for your entire lives -- our nation must meet its solemn obligations to you.

Since before I took office, I have vowed to fight for the interests of America's veterans. My administration has kept that pledge.

- I have met with veterans groups since before my inauguration. The White House doors have been open to veterans as never before -- just ask Commander Kent, who came to visit me recently to discuss the case for protecting your benefits.
- We have consistently looked to veterans to help shape our policy for veterans. Much of your influence is due to the outstanding work of Secretary Jesse Brown. You could not have a more energetic fighter on your side.
- We protected veterans' preference for federal jobs when your national commander wrote to us last year and said it was in danger. I overruled the postal service for a simple reason: veterans deserve -- and we must preserve -- their advantage in getting federal jobs.
- When interest rates fell, we reached out and contacted veterans around America to tell you about opportunities to refinance homes [ck] bought under the GI bill. No one has more of a right to the American dream than those who fought for America.
- We made sure that military retirees received their full Cost of Living Adjustments when Congress approved them six months later than for civilian retirees. And we'll keep protecting retirees' funds until Congress fixes the problem. [ck OMB]
- We have worked to improve health care for veterans, processing claims faster and getting you the benefits you're owed. We've also expanded long-term care programs and established comprehensive centers for women veterans. We process claims faster, and we are getting you the benefits you're owed.
- Last year we sent to Congress the only health care plan that would have expanded your choices, improved veterans health facilities and given those facilities the flexibility to serve you better.

- We have confronted head-on the long-neglected problem of Agent Orange. We reached out to 40,000 veterans who were exposed to Agent Orange and told them about expanded benefits now available to them.
- We made certain that when a U.S. delegation visited Hanoi, representatives of the VFW and other veterans' groups were there to discuss the painful issue of MIAs -- and we have continued to press for the fullest possible accounting for those lost while serving our nation.

My Administration has brought the voices of veterans to the highest councils of government, protected your interests when they've been threatened, and worked hard every day to improve the services that you receive. We've done this in spite of the fact that we've cut the federal deficit by more than \$600 billion and shrunk the federal government faster than at any time in memory. In the last two years, we've cut more than 100,000 positions in the federal bureaucracy and by next year, we'll have eliminated a quarter of a million. The federal government will be the smallest it's been since John F. Kennedy was president.

My Administration has also cut more than a quarter trillion dollars in spending and more than 300 domestic programs. But this year, while we cut the budget of virtually every federal agency, we will go to the mat for the things that matter. Head Start for our kids, school lunches, job training, 100,000 new police on our streets, military readiness and better care for American veterans.

Our Administration is pushing for \$1.3 billion more for the Department of Veterans Affairs -- \$1 billion of that devoted to the veterans health system. That means care for 43,000 more veterans... two new hospitals... and three new nursing homes... among other things.

Sadly, some in Congress see no need to improve your health services. New legislation, if passed, will cut deeply: they want to eliminate more than \$200 million for veterans health, including more than \$100 million for six [ck] outpatient clinics and \$50 million for new hospital equipment. And their cuts would abolish a successful program that reintegrates homeless veterans by providing them with temporary housing and help with job training and placement.

These cuts would harm those veterans who need their nation's help most. I pledge to you today that we will fight for you every step of the way. But we need your help. You must speak up and speak out. Only your voices will make it clear: caring for veterans is not a national option but a national tradition and a national duty.

Fulfilling that duty means more than keeping the promises of the past. It means adjusting to the needs of today's armed forces, as well... men and women who confront the new and sometimes terrible weapons of modern warfare.

Michael Sills of Villa Park, Illinois is one of those soldiers. He is [tk] years old, a veteran of America's victory in the Persian Gulf war. He suffers from fatigue, joint pains and a long list of other ailments. He is old beyond his years and he doesn't know how he got that way.

There are thousands of veterans like Michael Sills, thousands who served their country in the Gulf War and came home to find themselves ill. And even though we do not know the exact causes of their symptoms, I believe these veterans must not be made to wait for science. That is why last year, I signed landmark legislation that -- for the first time -- pays benefits to veterans who report illnesses but have not yet established a diagnosis or link to their service. And that is why two weeks ago (ck), I met with Michael -- to hear firsthand how it felt to be one of the first veterans to get benefits under this new law. [tk anecdote/quote]

In the two weeks since then, the First Lady has visited Gulf War veterans at Walter Reed and the Washington VA Medical Center -- some of whom are here today. She has met with Gunner Kent and Bob Currie of the VFW and other groups to discuss these illnesses and what must be done. And we have read and reread some of the letters from these veterans -- accounts of unexplained illness, of breathing problems, joint and muscle pain, persistent headaches, and memory loss. Letters like the one we received from Dylan and Theresa Callahan of [tk town] New Hampshire, who refer to Dylan's undiagnosed illness as the "never ending nightmare" and added simply: "Our lives may be in your hands."

From the beginning of our Administration, we heard these veterans' messages. We determined that treatment for these veterans could not be delayed like it was for Vietnam veterans exposed to Agent Orange. We decided not to compound their injuries by waiting to act until scientists have

determined exactly what's wrong. And we moved to treat and compensate them fairly while making every effort to find the medical answers. Today, as a result of our actions:

- Gulf War veterans are receiving specialized exams and treatments at Department of Veterans Affairs and Department of Defense facilities. Those on active duty receive specialized care in military hospitals.
- *and DoD here both*
VA has opened centers that focus on veterans who are difficult to diagnose.
- Tens of thousands of Gulf veterans -- whether ill or not -- have received free physical examinations.
- Both DoD and VA have set up toll-free hotlines to provide easy access to care for Gulf War veterans.
- VA and DoD have collected the names of more than 50,000 Gulf veterans with health concerns -- to help avoid the kind of problems that delay caused for those exposed to Agent Orange.
- We have enlisted some of our nation's finest scientists and a range of government agencies in more than 30 research projects, including studies on the impact of oil fires and diseases common in the Gulf area.
- And to let every person explore information about possible causes for these illnesses, the Defense Department is decassifying all related documents.

Still, we must do more. That is why today I am announcing the creation of a Presidential Advisory Committee that will review the full range of U.S. government activities related to the

illnesses reported by veterans of the Persian Gulf war. This Advisory Committee will be made up of scientists, doctors, veterans and others, and will work with the Secretaries of Defense, Health and Human Services and Veterans Affairs, and report through them to me.

In the year ahead we will also step up our treatment efforts and launch new research initiatives:

- The Departments of Veterans Affairs, Defense and Health and Human Services will spend up to \$15 million on new research. Projects will examine the possible effects of pesticides... anti-tank ammunition with depleted uranium... and drugs used to protect against chemical and biological weapons.
- VA will begin to survey 30,000 Gulf veterans and active duty personnel to examine whether illnesses have been transmitted to spouses and children.
- Data will continue to be declassified, including information regarding cancers and other serious illnesses among Gulf War veterans.
- And the Defense Department will develop comprehensive guidelines to improve health records and strengthen future training for troops on the risks of toxic exposure.

These veterans of the Gulf War fought America's fight, and have paid a high price. We will not stop until we have done everything that we can for the men and women who -- like so many veterans in our history -- have sacrificed so much for us and our freedom.

Last month, at the Iwo Jima commemoration, we heard two Latin words repeated again and again: Semper Fidelis. Always faithful. The Marines noble motto is one that serves well for a

great branch of the service but also for our whole nation. Being faithful to one another and being faithful to our traditions -- they are tied together.

Being true to our tradition of leadership in the world means reaching out across the oceans to support democracy and freedom and all the benefits they bring us. We must honor the sacrifice of those who served by carrying forward all they fought for. We must lead around the world so that the America of the 21st century enjoys the peace and stability that you wanted for your children.

Staying faithful to our veterans honors the deepest ties in our society. You know better than anyone what these bonds of reliance are. As Dan Pollock, an Iwo Jima veteran and a member of the VFW, recalled last month: "You never had to watch your back," he said, because in the midst of terrible battle you belonged to what he called "a band of brothers." Whether it is 50 years later for World War II veterans or five years later for Gulf War veterans, you should know that your nation will never forget your service.

As long as I am President, the sacred tradition of protecting our veterans will continue, and a strong America will march forward. You put your faith in America. America will continue to keep faith with you.

###

Elisa:

- 1) You have the document "qsandas.wp5" on this disk. I did not make any of the scribbled changes to it and have left that for you. Please be sure to incorporate the DoD and VA changes scribbled on the pages you have.
- 2) I am providing a copy of this, marked "draft" to Mary Ellen Glynn in lower WH press, Julia Moffet, and Kitty. I will let them know that the NSC may have changes so there won't be a final copy until 7:00am tomorrow. They will call you if they have particular changes.
- 3) Diana is going to bring you her talking points as well on disk.
- 4) So you will be the keeper of all the documents. (Two fact sheets, talkers, and qs and as). I need clean, "final" copies first thing in the morning. My office is being moved, so it may be easier for me to get them from somewhere central -- as dropping them off to me may result in them getting misplaced. I can be in at 7:30am and come see you if that makes sense, let me know.

In addition, Al Maldon and your congressional liaison need both the talkers and the fact sheets 9:00am so they can make calls and fax the fact sheets. I assume you will get them to them at whatever time you are finished tonight.

- 5) The only missing document is Julia Moffett's talking points. She hasn't written them yet. She will page me when they are done. You may want to call her (she is in her office) if you want to see them. It will be a few hours.

(G3) 2024566704

*** ACTIVITY REPORT ***

TRANSMISSION OK

CONNECTION TEL 99

CONNECTION ID.

START TIME 03/06/95 09:52

USAGE TIME 00'54"

PAGES 1

SENT BY: Xerox Telecopier 7020 : 3- 6-95 : 9:42 :

99-

2024566704: # 2

6-6210

McKiernan

**PRESIDENT CLINTON ADDRESSES VFW MID WINTER CONFERENCE,
ANNOUNCES HELP FOR VETERANS SUFFERING FROM GULF WAR ILLNESS**

Monday, March 6, 1995

Gulf War illnesses

In an address today to the VFW Annual Mid Winter Washington Conference, President Clinton will reiterate the importance of America's continued engagement around the world and his commitment that America not retreat from world leadership. The President will also devote a significant portion of his remarks to outlining the progress his administration has made helping veterans suffering with ~~Persian Gulf illness~~ and announce the creation of a new Presidential Advisory Committee and other new initiatives to help these veterans. The advisory committee's charter will be to review and make recommendations regarding all efforts aimed at finding the causes of ~~Persian Gulf illness~~ and improving the medical care available to Gulf War veterans.

Gulf War illnesses

There were 697,000 U.S. troops that served in the Persian Gulf War from 1991 - 92. Since returning, thousands have complained of symptoms that often don't fit a diagnosis, including chronic fatigue, memory loss, rashes, sleep problems, gastrointestinal disorders, joint pain and unusual bleeding. In January, 1994, the Department of Defense, Department of Veterans Affairs and the department of health and Human Services formed the Persian Gulf Coordinating Board to focus and coordinate research, clinical issues and disability compensation. The board is conducting more than 30 research projects to try and determine the cause of the illness.

Also, on xx xx, President Clinton signed xx xx to allow ~~Persian Gulf~~ veterans to begin receiving compensation for illness related to undiagnosed illnesses.

Gulf War

Fact sheets on the Presidential Advisory Committee and on the Administration's progress to date addressing ~~Persian Gulf illness~~, and an editorial from Stars and Stripes, are attached.

Gulf War illnesses

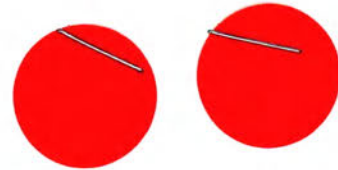
The President will be introduced for his remarks by VFW National Commander Allen "Gunner" Kant.

The VFW is the second largest congressional chartered veterans service organization in the country, with 2.2 million members. The membership consists of all U.S. citizens with honorable discharges from the armed forces who have earned an officially recognized

*have this
now &
will add*

March 3, 1995

To: Margie Sullivan - DoD
Marcy Oppenheimer - HHS
Diana Zuckerman - First Lady's Office
Julia Moffett - Communications
Kathy Jurado - VA
Bob Jones - VA
Gordon Adams - OMB/NSIA
Jennifer O'Conner - Cabinet Affairs
Lorrie McHugh - Media Affairs



From: Daniel Benjamin

Attached please find a revised draft of the VFW remarks for Monday. Please call me at 456-9179 (or Bob Boorstin at 456-5696) with comments by 5:30. Written comments can be dropped off in Rm. 373.

Thanks.

3/3/95 1:00 p.m.

**PRESIDENT WILLIAM JEFFERSON CLINTON
REMARKS TO THE VETERANS OF FOREIGN WARS
WASHINGTON, D.C.
MARCH 6, 1995**

Acknowledgments: Secretary Brown
Commander Kent
Mrs. Harsh (President Ladies Auxiliary)
Mr. Durning (Chairman of National Salute to Hospitalized Veterans)
Mr. Rivers (Adjutant General)

Commander Kent, thank you for that warm introduction. I want to thank the Veterans of Foreign Wars for inviting me here to speak with you. For almost a century, the VFW has made a difference in the lives of American veterans. You are lucky today to have a forceful, thoughtful leader in Gunner Kent.

This year we mark the 50th anniversary of the end of World War II. Many of you fought in that great struggle. One of my greatest privileges as President has been meeting men and women who sacrificed so much a half century ago for our freedom. On the windswept beaches of Normandy, at a cemetery in England, on the Rock of Corregidor in the Philippines I have gotten to know true American heroes. They are some of the finest people our nation -- or any nation -- has ever produced.

We owe them a debt we cannot repay. With their lives before them, they left everything -- family, loved ones, home -- to fight for a just cause. From the Aleutians to Okinawa and from the Mediterranean to the North Sea, they faced mortal dangers and never wavered. They watched

*too heavy
on WWII -
will insult
the others;
don't have
1st stand*

friends fall at their side -- 400,000 died, 700,000 were wounded -- and never faltered. They gave everything so that we might be free. I ask the veterans of World War II to stand and be recognized.

To honor your deeds -- and those of all the veterans who fought for freedom in World War I, Korea, Vietnam, the Persian Gulf and around the world -- ceremonies are not enough. We must deliver action as well. Wherever you fought, whatever you did, your nation must show its gratitude by preserving and protecting the benefits you have earned. And we must go the whole distance to address new injuries that modern warfare brings. Today, that means deploying every effort to uncover the causes of the mysterious illnesses that some of our Gulf War veterans brought home. We must redouble our energies to find cures for these veterans. Just as we ask men and women in uniform to fight new dangers and face new weapons and combat environments, we must see to it that every step is taken to bring these veterans back to health. They put everything on the line for us. We cannot do less for them.

Honoring your deeds also means we must preserve all you fought for. We must uphold a tradition paid for with your blood and sacrifice: the tradition of American leadership in the world.

Today, that tradition is under siege. If the new isolationists have their way, we will abandon policies -- backed by Republicans and Democrats -- that have guided us for half a century. We will back away from institutions like the United Nations, which promote stability around the world. We will be forced to give up peacekeeping and our support for fragile democracies. We

will cut deeply into our support for emerging market economies. Finally, under the mask of budget-cutting, we will deny our military the resources it needs.

No one knows better than our veterans the grave dangers of withdrawal. The last time isolationism held sway -- during the years after World War I -- Europe and Asia slid into catastrophe, and we had to fight a second world war. You in this room -- whenever you served, wherever you served -- know what could happen if America retreats from today's turbulent world. Yes, nations on every continent are embracing democracy and free markets. But no law of history says this will continue. We must seize the moment. We must shape events to serve the cause of freedom and prosperity.

Think back and consider how things might have been, and you will see why. The world could have become a dangerous trade battleground without American leadership on GATT. Chaos might be lapping at our borders if we had not worked to stabilize the Mexican economy.

Refugees might have poured into our country if we had not pushed to restore democracy in Haiti. Peace might never have caught a foothold in the Middle East without our continual involvement.

In the last speech he wrote, the greatest commander-in-chief of this century, Franklin Roosevelt put it well: "We have learned in the agony of war that great power involves great responsibility." But, Roosevelt observed, "We as Americans do not choose to deny our responsibility. Nor do we intend to abandon our determination that, within the lives of our children and our children's children, there will not be a third world war."

Your devotion and the service of millions of other veterans has helped prevent that war. You prevented communist expansionism from spreading across the globe during the Cold War. Your service made possible the growth of democracy and prosperity in the West and Japan. And when tyranny raised its head and Saddam Hussein threatened the Middle East, you stood up and stopped him.

We must be clear about this: your legacy is threatened -- a half century of American leadership that you worked and fought for. We must preserve that leadership at all costs -- to keep history on our side so our children have the future they deserve. As Commander-in-Chief, I will do everything in my power to prevent your legacy from being dismantled -- and to make certain that we move into the next century the strongest nation in the world and the greatest force for peace, freedom and democracy.

That means, first of all, preserving a strong American military. More than anything else, our armed forces guarantees our security and our influence over world events. They ensure our credibility. They are the backbone of our diplomacy. They showed that in the Persian Gulf, when our troops' swift deployment convinced Saddam Hussein that he didn't want to make the same mistake twice. They showed that in Haiti too, when the news that our forces were poised to invade convinced the corrupt generals that it was time to go.

I have pledged that the United States will have the best-equipped, best-trained, best-prepared military in the world. My administration is keeping that promise every day. Our forces are ready to fight.

I am determined to maintain that readiness. That is why I am committed to increasing defense funding an additional \$25 billion over the next six years. We have fewer troops today, and we ask more of them than ever -- which means we must pay to prepare them for the different missions they may face. Our combat pilots will fly the training hours they must fly, our artillery units will fire the rounds they must...so our troops can meet their mission of being ready to fight two major regional conflicts nearly simultaneously. Some of the money will also go toward improving the quality of life for those who serve and those who stand by them. We must raise their pay, provide better housing and child care and other benefits they deserve. If we want to continue drawing educated and motivated professionals to our armed forces -- and hold on to those who make up the finest fighting force on earth -- we must do right by them.

Improving quality of life is not the only way to ensure that our armed forces perform as well in the future as you did in the past. People who fight for the United States have the right to know that the United States will fight for them -- and not just for a few years but for their entire lives. The soldiers of tomorrow will only be as good as our commitment to the veterans of today.

Since before I took office, I vowed to defend the interests of all those who have fought for America. Our administration has kept that pledge.

- I have been meeting with veterans groups since before my inauguration. I have made sure that our administration's doors were opened to veterans as never before -- as they were when Gunner Kent visited me WHEN and we agreed to fight to protect veterans benefits. And I look forward to signing the VFW charter reform legislation in the next few days. (ck)
- We have consistently looked to veterans to help shape our policy. Much of your influence is due to the outstanding work of Secretary Jesse Brown. You could not have a more energetic fighter on your side.
- We protected veterans' preference when your national commander wrote to us last year and said it was in danger. We turned the issue around in days -- and overruled our own postal service. Veterans must get the shot they deserve at federal jobs.
- We reached out and contacted veterans around America when interest rates fell to tell them about refinancing opportunities under the GI bill. No one has more of a right to the American dream than those who went to war for America.
- We have worked to improve health care for veterans and expand veterans' nursing care benefit. We process claims faster. We are getting you the benefits you're owed.
- We made certain that when a U.S. delegation visited Hanoi, representatives of the VFW and other veterans' groups were there to discuss the painful issue of MIAs -- and we have continued to press for the fullest possible accounting for those lost while serving in Vietnam and in Korea.

and
set up a
special integrity
veterans
policy group at
the
White
House
to
address
your
concerns

When the federal government is shrinking faster than at any time in memory, our Administration has not just maintained but expanded care for veterans. This year, while virtually all federal agency budgets are being cut, we are going to the mat for you. We are pushing for \$1.3 billion more for the Department of Veterans Affairs -- \$1 billion of that devoted to the Veterans health system. That means care for 43,000 more veterans...two new hospitals...three new nursing homes...and these are just some of the things we are fighting for.

Sadly, some here in Washington do not share our determination to honor our nation's debt to veterans. Some in the Congress want to reduce the benefits that veterans have earned. New legislation, if passed, will cut deeply where there should be no cuts. Medical equipment won't be bought, outpatient centers won't be built. And a successful program to reintegrate homeless veterans -- to give them temporary housing, job training and help with job placement -- will be abolished.

The cuts on the drawing board will harm those veterans who need their nation's help most. These cuts won't strengthen America. Closing the door to a homeless vet who is looking for a way to get off the street doesn't strengthen America. An America that forgets its obligation to veterans is an America that has lost some of its greatness. And a country that can fight billion dollar battles must never nickel-and-dime its veterans. I pledge to you today that we will fight for you every step of the way. But we need your help. Only your voices will make it clear: caring for veterans is not a national option but a national tradition and a national duty.

No matter when you fought or where, we will stand with you. And we are working to meet the challenges in veterans' care that our nation's last two wars have brought. We have confronted the terrible problem of Agent Orange, ending years of neglect. We reached out to 40,000 veterans suffering from exposure to Agent Orange and told them about expanded treatment and the long list of related illnesses that we now cover.

I am determined that the kind of unacceptable treatment of veterans who were exposed to Agent Orange will not be repeated with veterans from the Gulf War. Last year, I signed landmark legislation that for the first time compensates veterans suffering from undiagnosed illnesses resulting from Operations Desert Storm and Desert Shield. Two weeks ago (ck), I gave one of the first of those checks to Michael Sills, an Illinois veteran (ck).[possible quote coming] Even if we do not know the exact reason for these veterans' disability, we know they are sick. These vets fought America's fight, and they have paid a high price. We must not compound that injury by making them wait for science.) who served in the Gulf.

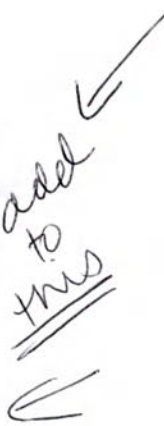
But we must do everything we can to push science forward so that they can get their health back. My wife and I feel very strongly that we can spare no effort for these Gulf War veterans. Many of these veterans have written to us, with harrowing accounts of respiratory trouble, muscular and skeleton pain, headaches and stomach disorders. We heard from Dylan Callahan of New Hampshire, for whom "The Gulf War Syndrome [has become what he and his wife call] "the never ending nightmare." We hear these veterans' message: we know that they just want to be well again, to be the people they were when they went off to fight for our country.

We are ~~giving~~ making sure
veterans get free, special
exams and treatment at VA &
military facilities. ~~also~~ We
have opened special diagnosis
centers to try to find out what
ails veterans with hard to diagnose
symptoms. We have set up
hotlines, at both the VA and DoD
to make sure all Gulf war
veterans can easily access the
care they need & deserve. And,
to make sure everyone has all
the information available about possible
causes, DoD has declassified all documents
(15)

related to these illnesses.

In the last two weeks, Hillary has visited with Gulf veterans at Walter Reed and the Washington VA Medical Center -- and she has been deeply moved by their experiences. She also met with Gunner Kent and Bob Currieo of the VFW and other service organization representatives to discuss Gulf War veterans' illnesses and what needs to be done for them.

Gulf War veterans are receiving the attention they need in VA facilities, and those still on active duty are receiving specialized care in military hospitals. We have enlisted some of the finest scientists in the nation and a range of government agencies to explore these ailments, and a broad range of research projects is under way. We have mounted a massive outreach effort to let all Gulf War veterans know about the care that is available to them. But we must do more.

add to this  That is why today I am announcing the creation of a Persian Gulf Advisory Committee that will review the hazardous elements in the Gulf region that our personnel were exposed to -- so that we can find answers to the mystery of these illnesses. This Advisory Committee will be made up of scientific experts, doctors and veterans and will report to the Secretaries of Defense, Health and Human Services and Veterans Affairs.

We will continue to step up our efforts to explain these illnesses and cure them -- because even though they are mysterious, we know they are real. This year the Veterans Administration and the Department of Defense will spend up to \$13 million on new research, looking into issues like the effects of oil well fires, pesticides, depleted uranium ammunition, drugs used to protect

against chemical and biological weapons. We are investigating the infectious diseases in the Gulf area, and we are examining whether illnesses have been transmitted in veterans' families. We will not stop until we have run these sicknesses to ground and done what we must for our veterans. We must spare no sacrifice for the men and women who have sacrificed so much for us and our freedom.

Last month, at the Iwo Jima commemoration, we heard two Latin words repeated again and again: *Semper Fidelis*. Always faithful. The Marines noble motto is one that serves well for a great branch of the service but also for our whole nation. Being faithful to one another and being faithful to our traditions -- they are tied together. And those bonds of fidelity are at the heart of our community as nation.

Being true to our tradition of leadership in the world means reaching out across the oceans to support democracy and freedom and all the benefits they bring us. We must honor the sacrifice of those who served by carrying forward all they fought for. We must lead around the world so that the America of the 21st century enjoys the peace and stability that you wanted for your children.

Staying faithful to our veterans honors the deepest ties in our society. You know better than anyone what these bonds of reliance are -- they are a lot like the ones that between troops in battle. Dan Pollack, an Iwo Jima veteran who commanded the unit that took Mt. Suribachi (ck) recalled what it was like last month: "You never had to watch your back," he said, because he was in what he called "a band of brothers." Whether it is 50 years later for World War II

veterans or five years later for Gulf War veterans, you should know that your nation will never forget your service.

As long as I am President, the sacred tradition of protecting our veterans will continue, and a strong America will march forward. You put your faith in America. America will continue to keep faith with you.

###



THE SECRETARY OF VETERANS AFFAIRS
WASHINGTON

TELEFAX TRANSMISSION MEMO

ATTENTION: Jennifer O'Connor
ORGANIZATION: Cabinet Affairs
TELEFAX NO.: 456 6704

FROM: **Robert L. Jones, Special Assistant to the Secretary (00F)**

ORGANIZATION: Department of Veterans Affairs

TELEFAX NO.: (202) 273-4876, Office No. (202) 273-4836

White House Phone No. (202) 456-5178, FAX No. 456-6218

NO. OF PAGES TO FOLLOW: _____

DATE: 3/3

MESSAGE: Per your Request



Putting Veterans First

Jennifer,

The charter change for the VFW expands membership eligibility to;

Must have served honorably as a member of the armed forces of the US in a foreign war, insurrection, or expedition which service was recognized as campaign medal service and is governed by the authorization of the award of a campaign badge by the government of the US; or

while a member of the armed forces of the US served honorably on the Korean peninsula or in the territorial waters for not less than 30 consecutive days or a total of 60 days after June 30, 1949

DRAFT

DRAFT
3/1/95

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

Date

FACT SHEET

Gulf War Veterans' Illnesses: Ongoing Initiatives

Shortly after returning from the Persian Gulf following Operations Desert Shield and Desert Storm, some U.S. military personnel began to report a variety of symptoms, such as fatigue, muscle and joint pain, memory loss, and headaches. In order to address these Gulf War veterans' health concerns, the Administration has taken many steps, highlights of which are listed below.

COMPENSATION

To make sure that veterans with chronic disabilities resulting from Gulf War service are compensated, the Administration is moving quickly to compensate those with both diagnosed and undiagnosed illnesses.

- **Compensation for Diagnosed Illnesses:** Under traditional disability compensation programs, veterans receive monthly compensation checks for diagnosed disabilities connected to their service. As of January 31, 1995, 106,390 veterans are receiving this type of disability compensation, including 472 for disabilities resulting from exposure to environmental hazards.
- **Compensation for Undiagnosed Illnesses:** President Clinton strongly supported and signed legislation to allow for compensation to veterans suffering from undiagnosed illnesses. This is the first time ever that the Department of Veterans Affairs (VA) has compensated veterans before their illnesses are diagnosed. The first compensation checks under this new program were sent in mid-February 1995. All Gulf War veterans who had disability compensation denied have been contacted to reapply under this new program.

DRAFT

DRAFT

2

TREATMENT

The Administration's first priority for Gulf War veterans is to provide them with the best possible medical care, even when diagnoses have not been made.

- **Priority Access to VA Health Care:** In 1993 and again in 1994, President Clinton signed legislation that changes standard eligibility rules to enable veterans to obtain free medical care for illnesses that may be related to service in the Persian Gulf. To date, more than 140,000 Gulf War veterans have received free medical care in VA facilities.
- **Free Specialized VA Health Examinations:** Under the VA Persian Gulf Registry Health Examination Program, every Gulf War veteran who has health concerns, whether or not the veteran is ill, is eligible for a free, complete physical exam. More than 40,000 veterans have participated in this program since it began in 1992. Since June 1994, veterans with unexplained illnesses whose medical conditions require a more specialized approach have had access to a more comprehensive health examination, which is also provided without charge at any VA and military medical center.
- **Specialized VA Diagnosis Centers:** For those veterans most difficult to diagnose, VA has established Persian Gulf Referral Centers in Washington D.C., Houston, TX, and Los Angeles, CA.
- **Special Treatment for Active Duty Military Personnel & Their Families:** Under the Defense Department's (DOD's) Comprehensive Clinical Evaluation Program, more than 13,000 Gulf War veterans still on active duty have registered for extensive free medical exams and treatment. Between 8,000 and 9,000 individuals have begun to receive these exams and treatment since the program began in June 1994. Military personnel register by hotline and are then examined and treated at local military medical centers and then, if necessary, at 16 major medical centers in the U.S. and Germany.

DRAFT

DRAFT

3

DECLASSIFICATION

In June 1994, DOD announced that it was declassifying all of the material related to the potential causes of Gulf War veterans' illnesses. The Department is proceeding with declassification efforts and releasing information as it becomes available. To date, DOD has reviewed more than 400 linear feet of records to declassify material that mentions the possible detection of chemical or biological weapons. By the end of 1995, DOD will have the capability to match the wartime locations of individual service members with these incidents, as well as the presence of various other potential environmental hazards, such as smoke from oil well fires.

OUTREACH & EDUCATION

Because one of the most frustrating aspects of undiagnosed Gulf War veterans' illnesses is the lack of medical knowledge about the cause or cure, the Administration is reaching out to military personnel and veterans to educate them about available medical exams, treatment and compensation, as well as about new findings as they develop.

- **Hotlines:** DOD, as of June 1994, and VA, as of February 1995, began operating hotlines to provide Gulf War veterans with easy access to medical examinations and treatment. Callers are referred to the appropriate DOD or VA medical treatment facility. In addition, the VA hotline provides information on all VA medical care, compensation and research programs for Gulf War veterans. The hotline numbers are: DOD, 1-800-796-9699; VA, 1-800-PGW-VETS. VA is also providing medical and compensation benefits information on an electronic computer bulletin board, available 24 hours per day. This number is 1-800-US1-VETS.
- **Defense Secretary and Joint Chiefs Chairman Letter to Veterans:** In May 1994, Secretary Perry and General Shalikashvili jointly sent letters to all Gulf War veterans, encouraging them to go to any medical facility for an evaluation and exam if they have experienced health problems since returning from the Gulf.
- **Staying Healthy Handbooks:** As part of the 1994 deployment to the Gulf, DOD published and distributed "Staying Healthy" handbooks to help troops protect themselves against health hazards overseas. Handbooks were also provided to troops in Somalia and Haiti. Similar information was not consistently

DRAFT

DRAFT

4

available to military personnel during Operations Desert Shield and Desert Storm.

- **Persian Gulf Review:** VA publishes a quarterly newsletter, Persian Gulf Review, which is sent to everyone on its health registry, each VA Medical Center, and veterans' service organizations. It provides information relevant to the health and compensation concerns of Gulf War veterans and their families.

RESEARCH

More than thirty research projects are underway to try to determine the causes of Gulf War veterans' illnesses. The research projects include epidemiological investigations, environmental hazards research, psychological and neurological studies, studies of the effects of the anti-nerve gas drug pyridostigmine bromide, research on the tropical disease leishmaniasis, and on the effects of exposure to depleted uranium. A few of the more than thirty studies are highlighted below.

- **Environmental Hazards Research Centers:** VA Environmental Hazards Research Centers, located in Boston, MA, East Orange, NJ, and Portland, OR were opened in October 1994. The centers are carrying out fourteen research projects in such areas as: the effects of toxic exposure on behavior, memory, the immune and nervous systems, and the development of cancer and Post Traumatic Stress Disorder. Specific studies are also examining chemical hypersensitivity, chronic fatigue syndrome, and risk factors for undiagnosed illnesses.
- **Mortality Study:** The VA Epidemiology Service is completing a study of death rates and causes of death among those who served in the Gulf War. Comparisons will be made with veterans who did not serve in the Gulf. Results are expected later this year.
- **Birth Defects Study:** The Centers for Disease Control (CDC), VA and the Mississippi State Health Department examined a report of increased numbers of birth defects in the children of two units of the Mississippi National Guard. The study, completed in December 1994, found no increase in major or minor birth defects.

DRAFT

DRAFT

5

- **Iowa Study:** At Congressional request, the Administration is conducting a pilot survey of Gulf War veterans from Iowa, comparing a random selection of those who served in the Gulf War with a random selection of those who served elsewhere during the same period. This CDC study includes a detailed assessment of veterans' health concerns as well as those of their families.
- **Kuwait Oil Fires Study:** This ongoing study is examining health risks to military troops and personnel exposed to oil fire smoke in the Gulf. The study's initial findings, released in September 1994, concluded that the levels of toxic substances measured in May through December 1991 were well below United States regulatory limits.
- **Anti-Nerve Gas Drug Studies:** DOD is conducting studies of the effects of pyridostigmine bromide, an anti-nerve gas drug given to troops in the Gulf. The studies are examining the effects of this drug on women and men as well as the effects of interactions between this drug and other environmental chemicals such as insecticides that were present in the Gulf. Results are expected later this year.
- **Tropical Disease Study:** DOD, VA and the Department of Health and Human Services are examining the occurrences of the tropical parasitic disease leishmaniasis in Gulf troops. These studies aim to develop better diagnostic tests and treatment for this disease.
- **Navy Studies:** Three large epidemiological studies, begun in October 1994, are being carried out by the Naval Health Research Center in San Diego, CA. The studies are analyzing the health of Gulf War Construction Battalion (SeaBee) service members, hospitalization rates among all Gulf War veterans, and birth outcomes in all Gulf War veterans and their families. Preliminary results are expected in late 1995.

REVIEWS BY OUTSIDE EXPERTS

To ensure that all avenues for research on Gulf War veterans' illnesses are being aggressively pursued, the Administration has asked several panels of non-governmental scientists to review ongoing activities and make recommendations for further research. These reviews indicate a consensus in some areas. For example, there is agreement among reviewers that, rather than a single

DRAFT

DRAFT

6

cause or illness, there are likely to be several different causes and illnesses among Gulf War veterans.

- **National Institutes of Health (NIH) Workshop:** In April 1994, the NIH hosted a panel of outside experts to examine research efforts to date and make recommendations for future research in areas such as epidemiology, stress-related diseases, pyridostigmine bromide and leishmaniasis. Many of these recommendations are now being implemented.
- **National Academy of Sciences, Institute of Medicine (IOM):** As directed by Congress, an IOM panel is reviewing and evaluating current research efforts related to Gulf War veterans' illnesses. The group's first report, issued in January 1995, provided a number of recommendations for improving research, many of which are being implemented. The IOM is also reviewing and evaluating DOD's Comprehensive Clinical Evaluation Program.
- **Defense Science Board Task Force:** This panel, headed by Nobel laureate Dr. Joshua Lederberg, was asked by DOD to examine intelligence and other information related to possible troop exposure to chemical or biological weapons, and potential health consequences resulting from low level chemical exposure, environmental pollutants, Kuwait oil fires and other health hazards. The panel's report, released in June 1994, concluded that there was no evidence of the use of chemical or biological warfare against U.S. troops in the Gulf.

DRAFT

THE WHITE HOUSE
WASHINGTON

OFFICE OF LEGISLATIVE AFFAIRS
FAX COVER SHEET

NOTE: THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS
CONFIDENTIAL AND INTENDED FOR THE RECIPIENT ONLY.

DATE: 3/2/95

TO:

Jennifer O'Connor

FAX #:

~~6-2572~~ 6-6704

FROM:

He maldon

RE:

PAGE 1 OF 4

If there are any problems with this transmission, please call
(202) 456-6620.

FAX SENT:

CLAIBORNE PELL**U.S. SENATOR
RHODE ISLAND**CONTACT: EDWIN K. HALL
(202) 224-3953**IMMEDIATE RELEASE
MARCH 2, 1995****INTERNATIONALISM OR ISOLATIONISM --
A CHOICE FOR THE NEXT GENERATION OF AMERICAN LEADERS**

Senator Claiborne Pell (D-RI), Ranking Minority Member of the Foreign Relations Committee, in a statement in the Senate, March 2, said:

"In the opening words of a major foreign policy address last evening, President Clinton said that 'we live in a moment of hope.'"

"Mr. President, I concur with that sentiment. With the demise of the Cold War, with the nascent friendship between the United States and Russia, and with the emergence of democratic trends across the globe, the world is experiencing a realignment in the fundamental relationship between states. It is, as the President suggests, a time of extraordinary opportunity for the United States.

"I commend President Clinton for his rejection of an inward-looking course, and endorse his ambitious call to support international peacekeeping, to reduce the nuclear threat by extending indefinitely the Nuclear Non-Proliferation Treaty and implementing other arms control agreements, and to be an aggressive player in the global economy. I also ask unanimous consent that the full text of the President's speech be inserted in the Record at the conclusion of my remarks.

"The present circumstances call to mind the watershed period after World War II. Then, as now, the United States faced a stark challenge: whether to assume the mantle of international leadership and become engaged in the establishment of a new diplomatic order, or whether to retreat into isolation, comfortably sheltered by two great oceans from the turbulent world of European balance of power politics.

"Due to the courage and foresight of our political leadership - visionaries such as Harry Truman, George Marshall, Dean Acheson, and Arthur Vandenberg - America charted a firm course of internationalism, guided by the principle of containment of the Soviet Union. Recognizing the shortsightedness of isolationism, the United States chose not to repeat the mistakes it made in ignoring the League of Nations, and became a driving force behind and host of the new United Nations. Our decisions then, and in the ensuing decades, solidified our role as the preeminent power in world affairs.

"The changes we have witnessed in the past six years are the direct result of the policies we, along with our allies, conceived, refined, and implemented during the course of the Cold War. None of these changes, however, could have occurred without American leadership and engagement.

"I am therefore troubled by the emerging desire, expressed both in Congress and in public fora across the nation, to retreat from our international commitments and obligations. And nowhere is this sentiment more dangerous and ill-conceived than in the emerging obsession with the United Nations.

11-17-95 14:35PM FROM FOR REL CAPTOL

TO 24566221

E227/223

-- 2 --

"I am now and have been an ardent supporter of the United Nations since 1945, when I was part of the International Secretariat of the San Francisco Conference that drew up the U.N. Charter. In the years since then, I have tried to help to make the United Nations become the effective world organization -- the very symbol of the international community of nations -- that was envisioned in the Charter.

"I am not so naive as to profess that the United Nations has always lived up to its potential. The U.S.-Soviet rivalry tended at times to hamstring the Security Council, and U.N. history occasionally has been interspersed with examples of waste and ineffectiveness. But for every example of failure, I can think of numerous countervailing examples of success -- Cambodia, El Salvador, Namibia, and countless others. And now that we are entering a new era of cooperation with Russia, the Security Council harbors even greater promise for becoming a first-rate arbiter of international conflict and discord. U.N. peacekeeping has helped to serve American interests in the Middle East, in Africa, in Latin America, and in Asia. And I know that there will be situations in the future where we will rely on the U.N. peacekeepers to support our foreign policy aims.

"Now that we no longer are forced to dedicate such a sizable proportion of our resources to the containment of Russia, we can see before us an entire new range of opportunity for international cooperation and prosperity. But the growth industries and salient political issues of the future -- be they in telecommunications, the exchange of information, the flow of capital, the sound use of our environmental resources, or the prevention the proliferation of conventional and unconventional arms -- are heading in a direction that transcends national boundaries. If the United States is to keep pace, it cannot afford to slide back into inward-looking detachment.

"In his address, the President set out a challenging and crucially important arms control agenda. I was quite pleased to note the high priority he attaches to achieving the indefinite extension of the Non-Proliferation Treaty at the conference of the parties beginning next month. The President has decided to underscore the importance he attaches to the preservation of international barriers to nuclear proliferation by asking Vice President Gore to lead our delegation. The Vice President will be ably supported by Ambassador Thomas Graham Jr. and other experts from the Arms Control and Disarmament Agency.

"The President also reaffirmed his commitment to the quick completion of a complete ban on nuclear testing. Substantial progress has been made in the negotiations. With a dedicated effort, the remaining stumbling blocks can be overcome.

"I was pleased also that the President attaches high priority to the ratification of the START II Treaty. The START I and START II effort is truly bipartisan, spanning three administrations. Under the leadership of Senator Helms and Senator Lugar, the Committee on Foreign Relations is in the process of wrapping up hearings started in the last Congress under my chairmanship.

"In addition to these priorities, the President told his audience, "There are other critical tasks we also face if we want to make every American more secure, including winning Senate ratification of the Chemical Weapons Convention, negotiating legally binding measures to strengthen the Biological and Toxin Weapons Convention, clarifying the ABM Treaty so as to secure its viability while permitting highly effective defenses against theater missile attacks, continuing to support regional arms control efforts in the Middle East and elsewhere, and pushing for the ratification of conventional weapons which, among other things, would help us to reduce the suffering caused by

11-02-95 14:55PM FROM FOR KBL CANTON

20 04000004

11/02/95

-- 3 --

the tens of millions of anti-personnel mines...."

"The President understands that this agenda is both far-reaching and imperative. He said, 'Now, in this year of decision, our ambition for the future must be even more ambitious. If our people are to know real lasting security, we have to redouble our arms control, nonproliferation and antiterrorism efforts. We have to do everything we can to avoid living with the 21st century version of fallout shelters and duck-and-cover exercises to prevent another World Trade Center tragedy.'"

"Mr. President, it is very important to understand that many aspects of arms control and non-proliferation are truly bipartisan. To be sure, Senators have and have had disagreements. Nonetheless, working together in a bipartisan fashion, we have moved steadily forward. During my chairmanship of the Committee on Foreign Relations, we were able to craft bipartisan bills, with the strong involvement of Senator Glenn and other Members, imposing effective sanctions against both nations and individuals engaged in reprehensible activities involving chemical, biological and nuclear weapons-related activities.

"It is indicative of the bipartisan nature of our arms control efforts that every treaty the Committee and the Senate approved while I was privileged to be chairman won overwhelming support in the end. We were careful in every instance to resolve all legitimate concerns along the way to Committee and floor consideration, and there was never a question with any of the arms control treaties voted out - including the Intermediate-Range Nuclear Forces Treaty, the Conventional Forces in Europe Treaty, the Threshold Test Ban Treaty, the Peaceful Nuclear Explosions Treaty, and the START II Treaty - that the approval would be well beyond the required two-thirds support.

"Mr. President, I am gratified that President Clinton has embraced an ambitious agenda that will merit continued bipartisan support. He will thus be able to bring to fruition major initiatives of the Bush Administration, as well as his own. The end result will assuredly be a safer, more stable world.

"It is important to understand that these efforts represent a continuum in arms control that covers much of the post-World War II period. Presidents Eisenhower and Kennedy initiated the first efforts to curb nuclear testing, and each succeeding administration has built on the successes of its predecessors.

"Mr. President, I wish that I could say that the major challenges of arms control and non-proliferation are behind us. Despite the many successes, the challenges ahead are formidable. I am extremely pleased that the President is able and willing to face these challenges. I trust that the Congress will continue a truly bipartisan effort to control, reduce and even eliminate weapons of mass destruction.

"Mr. President, we stand at the cross-roads of history. The tenor of current political discourse - focussed as it is on disengagement, withdrawal, and neo-isolationism - suggests we are heading towards a colossal error in judgment. Those who seek to retreat into a "Fortress America" offer no constructive suggestion for filling the vacuum to be left by America's withdrawal. We would lose our political and moral authority, our ability to exercise influence in matters vital to our interests, and do grave harm to our standing as one of the greatest powers in history.

"In his speech last night, President Clinton mentioned one of the most distinguished members ever to have served in this body - Arthur Vandenberg - who advanced the principle that politics should stop at the waters edge. But many of our interests, Mr. President, only begin there. I stand behind President Clinton's conviction that America can prosper in the next century only through international engagement and the assertion of leadership."



Department of Veterans Affairs
Office of Public & Intergovernmental Affairs

FAX: (202) 273-5717

TELEPHONE: (202) 273-5750/5751

FAX FACTS:

TO: Steve Silverman

DATE: 3/1

FROM: Kathy Tarado

Transmitting: Cover page plus _____ pages

COMMENTS: _____

Memorandum

Date: March 1, 1995
To: Steve Silverman
From: Kathy Jurado
Subject: Rescission Media Report

Tuesday, February 28

Secretary Brown

Florida Radio Network

Orlando Sentinel

States News Service

Wednesday, March 1

Secretary Brown

Tampa Tribune

Deputy Secretary Gober

WNIS-AM, Hampton, Virginia

Thursday, March 2

Deputy Secretary Gober

West Virginia Radio Network

KARN, Little Rock, AR

PRESS CLIPS and TRANSCRIPTS Attached

Gainesville Sun "Panel slashes funding for local VA clinic"

Orlando Sentinel "Orlando may lose VA clinic at base"

Hartford Courant "VA hospital expansion threatened by cuts"

WPKT Radio, Hartford, CT

The Gainesville (FL) Sun, 2/28/95

Panel slashes funding for local VA clinic

■ The outpatient clinic has been on the drawing board for 11 years.

Staff and wire report

WASHINGTON — A project that's been on the Gainesville Veterans Affairs Medical Center drawing board for 11 years has been dealt a severe blow in Congress.

A planned \$17 million ambulatory care or outpatient clinic at the VA Medical Center here, and similar projects at five other locations, have made it on the budget hit list of a key House Appropriations subcommittee.

"We've spent millions of dollars to design things we don't build," said Ed Dougherty, management engineer for the Gainesville VA Medical Center.

The subcommittee agreed to pull \$17.8 million budgeted for the Gainesville hospital's new outpatient clinic this year, as part of a \$17.5 billion budget-cutting measure to come before

the full committee Thursday.

The proposed cuts came a short time after Veterans Affairs signed a \$1.2 million contract with Gainesville architects Flad & Associates.

The predicament is not new, according to Dougherty.

"We're all frustrated," he said.

The VA has spent close to \$3 million designing the project since 1983, and a shovel has yet to hit the ground.

In 1983, the outpatient clinic was part of a 200-bed psychiatric unit and parking garage project, totaling \$90 million. It gradually has shrunk in scope over the years. The psychiatric facility has been lost, and the garage remains on paper.

The ambulatory care clinic is now in danger unless the full House Appropriations Committee restores it to the budget, and the Senate agrees.

"I've been messing with this project for 10 years, and I'm beginning to lose hope," Dougherty said.

Other clinics were scheduled to be built in Orlando, San Juan, Puerto Rico, Columbia, Mo., West Haven, Conn., and Hampton, Va.

Secretary of Veterans Affairs Jesse Brown condemned the House subcommittee's actions.

"I am bitterly disappointed that these projects have been canceled. I have never seen anything like this before and am afraid that this action sets a dangerous precedent," Brown said.

He added that cuts strike at one of the more vulnerable segments of populations, aging World War II and Korean War veterans.

Brown said the proposed cuts also fly in the face of the national trend for outpatient services rather than more expensive hospital stays.

Rep. Karen Thurman on Monday expressed outrage over the decision, saying it smacked of partisan politics.

"It's outrageous," the Inverness Democrat said. "They're going to take and cut something they believed was extremely important not less than one year ago."

The panel responsible for veterans spending voted to cut \$158 million worth of construction projects last week, shrinking a \$240 million program to \$84 million. Subcommittee members agreed last Thursday to eliminate the Gainesville clinic along with five others, all of which are based in Democratic districts, but spared one located within the district of Republican Rep. Porter Goss in Fort Myers.

Rep. Cliff Stearns, a longtime defender of veterans' interests, was quick to rise above party lines and join Thurman in lambasting the cuts. "I'm going to fight this," Stearns said Monday during a telephone interview.

The Ocala Republican said he already contacted Thurman and Rep. Corrine Brown, D-Jacksonville, in hopes of uniting the area's congressional delegation against the planned cutbacks.

Steven Cohen, Thurman's spokesman, struck a partisan stance in defending the project.

"There were another five projects that weren't touched, and those were all in Republican districts, except one," Cohen said.

But, Stearns said the cutbacks were more of a regional issue than a partisan one.

"When it comes to veteran affairs, no one is partisan, and we shouldn't be," Stearns said. "We are going to suggest that the facilities that are getting funding up in the northern part of the United States be looked at carefully, because the vets are leaving the North and coming South."

News Clip Identification

Newspaper: *Orlando Sentinel*
 City & State: *Orlando, FL*
 Date of Publication: *3/1/95*
 Special Interest:
 FILE:

Sender Identification

Name: *OPA, Atlanta*
 Facility:
 Date: *3/1/95*
 Phone: *404-347-3236*
 Remarks:

Feed this way
 into Teller
 Machine

Orlando may lose VA clinic at base

□ The GOP wants to ax the \$14 million outpatient clinic. The planned VA hospital in Brevard could be at risk, too.

By Sean Holton

SENTEINEL WASHINGTON BUREAU

WASHINGTON — Republican budget-cutters have slashed money for VA outpatient clinics in Orlando, Gainesville and four other U.S. cities in a move that would kill all six projects unless the money can be restored.

Veterans Affairs Secretary Jesse Brown Tuesday condemned the action as "un-American" and "political meanness at its worst." He said he would fight to have the money restored when the full House Appropriations Committee meets to discuss the issue on Thursday.

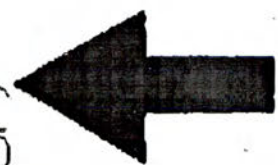
At stake for Orlando is the \$14 million approved by Congress last year to convert the hospital at the Orlando Naval Training Center into a VA outpatient clinic and a 120-bed nursing home.

Brown warned in an interview with The Orlando Sentinel that Central Florida may eventually take an even bigger hit on a planned VA hospital in Brevard County — a project that came to fruition only after years of intensive lobbying by Florida lawmakers.

"This is just the beginning of the battle," Brown said of the Orlando and Gainesville setbacks. "In the 1998 budget, I have about \$150 million set aside for that Brevard hospital ... and I think that's at risk."

Besides putting the Orlando outpatient clinic in peril, the situation illustrates a political dilemma that will be replayed again and again this year for Republican congressmen who signed the "Contract With America."

U.S. Rep. Bill McCollum, R-Longwood, fought to get money



JURADO

URGENT

03/01/95 18:58 03/01/95 09:41

TO:

PAGE 2 OF 2

News Clip Identification

Sender Identification

Newspaper:

Name:

City & State:

Facility:

Date of Publication:

Date:

Special Interest:

Phone:

FILE:

Remarks:

VA secretary hopes clinic can be saved

VA from A-1

for the outpatient clinic in his home district. But, as a contract signer, he may ultimately have no choice but to vote for a broader budget-cutting bill that would include the death warrant for his pet project.

"To have me vote against the [budget-cutting] bill as a whole because this is in there, I probably would not do that," McColm said. "I would probably vote for that ... bill. But that doesn't mean I'm not

going to fight very hard to get this out of it."

The new outpatient clinic would ease the strain on a crowded clinic on Columbia Street in Orlando, which serves veterans from Orange, Seminole, Osceola and parts of Brevard, Sumter and Lake counties.

Converting the relatively new NTC hospital to a VA clinic would also save some of the 300 jobs Orlando would lose when the hospital closes this summer as part of the closing of the base.

"Now here you've got a beautiful hospital that we were getting ready to take over," Brown said. "It makes perfect sense for us to occupy that building ... It's a good investment for the public. And now they come and take away that \$14 million that we set aside so we could move forward."

The Cabinet secretary said he

wouldn't be able to find the money elsewhere in his budget.

Other cities with planned outpatient clinics on the chopping block are Columbia, Mo.; Hampton, Va.; West Haven, Conn.; and San Juan, Puerto Rico.

"It kills it," he said of the planned cut to Orlando. "It's not just Orlando [that's been cut]. There are \$200 million worth of projects they have here ... I don't have that kind of money just laying around to pull out of the system."

McColm disputed that notion, and said Brown could probably find the money to at least get the outpatient clinic running — if not the nursing home.

But Brown said if the action stands, he will seek to cancel the June 1 transfer of the hospital from the Navy to Veterans Affairs.

"I would not want the property if

I can't develop it," he said. "Because if I acquired the property, then I'm going to have to maintain it. Why should I want to maintain property that I can't make use of?"

An appropriations subcommittee cut the money for Orlando from the Veterans Affairs department's 1995 budget as part of a sweeping mid-year budget review under way in the House. Various appropriations panels have slashed \$17.5 billion in projects governmentwide that were approved by last year's Congress.

Nearly \$15 billion of that total has come from programs overseen by the departments of Education, Health and Human Services, Housing and Urban Development, Labor and Veterans Affairs. Though they deal with a past year's budget, these specific spending cuts represent the first salvo in the GOP's battle to trim government as promised in its "Contract With America."

Memorandum

Date: February 27, 1996
To: Kitty Higgins
From: Harold Gracey
Subject: VA Rescission Strategy

Message

- These cuts are aimed at one of the most vulnerable and most deserving segments of our society -- elderly, sick and disabled veterans and others who have sacrificed so much for our nation -- to pay for a lucrative tax cut for the wealthy.
- This is a sign of things to come. If the Republicans will so quickly and heartlessly deny outpatient treatment to veterans, then veterans can expect even deeper, harsher cuts in the FY '96 budget cycle and under a balanced budget amendment.

Congressional

- Secretary Brown testified before the House Veterans Affairs Committee on VA FY '96 Budget. The proposed rescission of \$206.1 million was addressed by many committee members: Rep. Montgomery (D-MS) pledged to work to restore the projects; Rep. Gutierrez (D-IL) expressed concern for access to service for deserving veterans; Rep. Brown (D-FL) stated that the two rescissions slated for Florida would hurt her state the most due to its large population of veterans and a lack of adequate resources; Rep. Bishop (D-GA) asked Secretary Brown if the Department had been consulted about the rescissions. Secretary Brown committed to those committee members that he would fight the rescissions.

The Secretary has written letters to all Representatives and Senators with rescinded projects in their states. These letters are currently awaiting OMB clearance.

Public Affairs/Media

- Secretary Brown criticized the rescissions at a House Veterans Affairs Committee Meeting on the FY '96 Budget. All media present reported on the Secretary's comments.
- VA has issued the attached national press release. In addition, VA has issued local press releases in the communities with affected facilities.
- Secretary Brown, Deputy Secretary Gober and Undersecretary for Health Ken Kizer will address the American Legion, Disabled American Veterans and Veterans of Foreign Wars Winter Conferences this week and will discuss the rescissions. VA's press release will also be distributed at the VSO Winter Conferences.
- Secretary Brown and Deputy Secretary Gober will conduct media interviews in Florida, Virginia, Arkansas and West Virginia this week at the request of the White House Media Affairs Office.

Page Two
VA Rescission Strategy

Public Liaison

- On February 24th, Secretary Brown met with the executive directors of the American Legion, Paralyzed Veterans of America, Disabled American Veterans, Veterans of Foreign Wars, AMVETS and Non-Commissioned Officers Association and discussed the proposed rescissions. The group indicated they would: 1) identify and contact membership in targeted congressional districts, requesting that they contact their local representatives; 2) release a joint press statement to selected congressional districts; 3) release a joint National Commanders letter concerning the rescissions; and, 4) encourage delegates attending the Washington Conferences to visit Appropriation Committee members concerning the impact of the rescission.
- American Legion and Disabled American Veteran are holding their Winter Conferences in Washington this week. The American Legion will devote February 28th to congressional visits including a 5:30 pm congressional reception on capitol hill. DAV has also scheduled February 28th for congressional visits.
- VSO representatives are scheduled to meet Thursday March 2nd in the Roosevelt Room with White House representatives. VA has requested that Chief of Staff Panetta attend.
- VA requests that White House Public Liaison individually call the Executive directors of the big 5 VSO's and stress the importance of the anti-rescission effort. Calls should be made by noon February 28th.
- President Clinton will address the VFW Winter Conference on March 6th at 11 am. VA Public Affairs and Public Liaison offices are working with White House speech writers to incorporate anti-rescission language into the President's VFW speech.

DRAFT

TALKING POINTS

- Today, the President will be giving a speech at the VFW Annual Washington Conference at 11 a.m.
- I'm calling to tell you about the two main issues he will discuss.
- The first issue is maintaining our commitment to veterans, by supporting VA programs. [He will express his concerns about rescissions.]
- **The second issue, which is the more newsworthy part of the speech, is that the President will discuss his concerns about Gulf War illnesses for the first time.**
- He will announce **several new initiatives** that are aimed at improving the government's ability to meet the needs of Gulf War veterans who are ill.
- **The major new initiative is a Presidential Advisory Committee on Gulf War Veterans' illnesses**, that will review all the major activities of the government. For the first time, a fully independent expert panel will be created to make sure that the government's response is as open and effective as possible. The Committee will continue its work until December 1996.
- Previous efforts have been more short-term or had a more narrow focus. For example, the NIH panel met for only 3 days, and the Lederberg panel, which was created by the Defense Department Science Board, focused on Defense Department issues and was disbanded last summer. The Institute of Medicine expert panel is making recommendations about the types of research that are needed, but not about other issues.
- In contrast, the Presidential Advisory Committee will:
 - make sure that any information about the nature of these illnesses, or possible causes or treatments are made publicly available as soon as possible
 - make sure that research and other activities are fully coordinated and effectively implemented among all the different Departments, including DOD, VA, HHS, and also EPA and USDA when necessary
- Despite unprecedented efforts on the part of VA and DOD to unravel the mystery of some of these illnesses, and to compensate veterans who are disabled from it, the President believes that more needs to be done, and that

the public will have more confidence in an independent group of experts.

- **The President will also announce other new initiatives, such as:**
 - new research projects on anti-nerve gas pills and pesticides
 - research and medical evaluations of the possible transmission of illnesses to spouses and children
 - In the next few days, DOD will also be making more information available about the reports of chemical detections that have been in the news recently.
- We'll fax you a fact sheet on ongoing and new activities.

These are very
preliminary -
pls don't
share with
anyone - I'd like
your input
Diana

That is why today I am announcing the creation of a Persian Gulf Advisory Committee that will review the hazardous environmental exposures in the Gulf conflict in the hopes of finding answers to the mysterious illness of our Gulf War veterans. This Advisory Committee which will be made up of a panel of scientific experts, doctors and veterans, will report to the Secretaries of the Departments of Defense, Health and Human Services and Veterans Affairs on their findings. It is our hope that we can uncover clues in the Gulf conflict that will explain these undiagnosed illnesses and speed the treatment and recovery of our sick Persian Gulf veterans.

We have enlisted some of the finest scientists in the nation to help us solve this mystery. This year the Departments of Veterans Affairs and Defense will spend up to \$13 million on new research, looking into issues like oil well fires, environmental toxins, pesticides, depleted uranium, drugs used to protect against chemical and biological weapons and examining whether the illnesses have been transmitted in veterans' families.

March 2, 1995

To: Margie Sullivan - DoD
Marcy Oppenheimer - HHS
Diana Zuckerman - First Lady's Office
Julia Moffett - Communications
Kathy Jurado - VA
Bob Jones - VA
Gordon Adams - OMB/NSIA
Jennifer O'Conner - Cabinet Affairs *u* *1/2*
Lorrie McHugh - Media Affairs

From: Daniel Benjamin

Attached please find a draft of the VFW remarks for Monday. Please call me at 6-9179 with comments—this evening or latest 10 a.m. tomorrow. Written comments can be dropped off in Rm. 373.

Thanks.

3/2/95 3:00 p.m.

**PRESIDENT WILLIAM JEFFERSON CLINTON
REMARKS TO THE VETERANS OF FOREIGN WARS
WASHINGTON, D.C.
MARCH 6, 1995**

Acknowledgements: Secretary Brown
Commander Kent
Mrs. Harsh (ck-Ladies Auxiliary)
Mr. Durning
Mr. Rivers

DRAFT

Commander Kent, thank you for that warm introduction. I want to thank the Veterans of Foreign Wars for the opportunity to speak with you at this midwinter conference. For almost a century now, the VFW has played a vital role in providing a voice for American veterans and in promoting debate about the most important foreign policy issues of the day.

This year, when we mark the 50th anniversary of the end of World War II, is a year rich with remembrance of the deeds of our veterans. Many of you fought in that struggle -- in that extraordinary moment in our nation's history. In recent months, I have had the honor to meet many men and women who sacrificed so much a half century ago for our freedom. This has been one of my greatest privileges as President. On the beaches of Normandy and Italy, at an airstrip (ck) in England, on Corregidor in the Philippines and, most recently, here in Washington at the commemoration of the battle for Iwo Jima, I have had the good fortune to get to know a legion of heroes. They are some of the finest people our nation -- or any nation -- has ever produced.

We owe them a debt that is beyond repayment. With their lives before them, they left everything - family, loved ones, home -- to fight for a just cause. From the Aleutians to Okinawa and from North Africa to the Elbe, they faced inconceivable dangers, and they never wavered. They watched friends fall at their side -- 400,000 died, 700,000 were wounded -- but they never faltered. They gave everything so that each of us might be free. We owe them nothing less than our liberty and the safety of our homes. I ask the veterans of World War II to stand and be recognized.

In the months ahead, there will be more ceremonies and commemorations. But to honor your deeds -- and those of all the veterans who fought for freedom in Korea, Vietnam, the Persian Gulf and around the world -- we must do more than invoke fine words. We must uphold a tradition that was paid for with your blood and your sacrifice: the tradition of American leadership in the world.

Today there is a struggle going on in our country between those who want to carry on the tradition of American leadership and those who preach a new isolationism. No one knows better than our veterans the dangerous and inevitable costs of withdrawal -- especially a withdrawal behind the illusion that we can remain untouched by world issues in this turbulent era. You in this room -- whenever you served, wherever you served -- know what could happen if America retreats. The last time isolationism held sway -- during the years after World War I -- Europe and Asia slid toward catastrophe, and we had to fight a second world war. Today, there is an extraordinary trend in the world toward democracy and free markets. But there is nothing

→ insert PG #
reference

inevitable about this and no saying what the consequence might be if we quit the hard work we have been doing now.

The greatest commander-in-chief of this century, Franklin Roosevelt, summed this all up so well in the last speech he ever wrote. He died before he could deliver it, but President Roosevelt's words ring as true today as ever. He wrote, "We have learned in the agony of war that great power involves great responsibility.... We as Americans do not choose to deny our responsibility. Nor do we intend to abandon our determination that, within the lives of our children and our children's children, there will not be a third world war."

Your devotion and the service of millions of other veterans has helped prevent that war. They prevented communist expansionism from spreading across the globe or tyrants like Saddam Hussein from conquering one neighbor after another. The new isolationists would radically revise the fundamentals of our foreign policy that has enjoyed bipartisan support throughout the postwar era -- and make life easier for the Saddams of the future. They would weaken or eliminate our roles in the institutions that help keep the peace today. They would eliminate any meaningful role for the United Nations, which has played such a crucial role around the world. They would take resources away from peacekeeping and from the support of fledgling democracies. Our withdrawal from these commitments would imperil our longterm security and critically weaken our role in the world. What's more, at their most hypocritical, isolationists in both parties today sing the praises of American strength -- but under the mask of "budget-cutting" deny our military the resources they need.

The new isolationists are wrong. They would have us face the future alone. Their approach would weaken this country, and we must not let the ripple of isolationism that has been generated build into a tidal wave.

We must be clear about this: your legacy is threatened -- a half century of American leadership that you worked and fought for. We must preserve that leadership at all costs -- to keep the tide of history running our way and to ensure for our children the future they deserve.

I will do everything in my power to prevent your legacy from being dismantled -- and to make certain that we move into the next century as the strongest nation in the world and the greatest force for peace, freedom and democracy. That means, above all else, preserving a strong American military. You know as well as I do that nothing guarantees our influence over world events as much as our armed forces -- it is the guarantor of our credibility and the backbone of our diplomacy. We saw that in the Gulf region, where the swift deployment of our troops convinced Saddam Hussein that he didn't want to make the same mistake twice. And we saw that in Haiti, where the news that our forces were on the move convinced the corrupt generals that it was time to go.

Since taking office, I have pledged that the United States will have the best-equipped, best-trained, best-prepared military in the world. My administration is keeping that promise every day. As a result of our defense policies, the readiness of our forces is unparalleled. And we are

working to make it even better, because today we have fewer troops, and we ask more of them than ever.

That is why I have asked for and we are committed to increasing defense funding by \$25 billion over the next six years. Some of that money will be devoted to bolstering our readiness -- so our combat pilots fly more training hours, and our artillery units can fire more rounds...so our troops can meet our goal of fighting two major regional conflicts almost simultaneously. And some of it will go toward long-needed improvements in the standard of living of our personnel -- so we can give them pay raises, better housing and provision for child care and other benefits so that they have the quality of life they deserve. If we want to continue attracting the kind of educated, motivated, dedicated professionals who now make up our armed forces, we must do right by them.

Improving the quality of life of those in uniform today is not the only -- or perhaps even the most important -- way to ensure that our armed forces personnel perform in the future as you did in years past. People who are prepared to fight for the United States have the right to know that the United States will fight for their well-being -- and not just for a few years but throughout their lives. We owe it to the soldiers of tomorrow, who will only be as good as our commitments to the veterans of today.

Since before I took office, I vowed that I would defend the interests of all those who have fought for America. I intend to make sure that commitment is honored.

- Even before my inauguration, we began meeting with veterans groups, as those of you who visited me in Little Rock will remember.
- Under the terrific leadership of Secretary Brown, this administration's doors have been open to veterans as never before. We have consistently included veterans in the policy process and made sure their concerns are felt.
- When your national commander wrote to us last year saying that veterans' preference was in danger, we turned the issue around in days -- and overruled our own postal service -- to ensure that veterans still get the shot they deserve at federal jobs.
- When interest rates came down a couple of years ago, we contacted veterans around America to tell them about refinancing opportunities under the GI bill -- because no one has a more of a right to the American dream than those who went to war for America.
- We have worked for comprehensive health care for veterans and the expansion of veterans' nursing care benefits.
- We have sped up claims processing in the Veterans health care system, and worked through much of the backlog that had accumulated.
- We have expanded treatment and now cover the numerous illnesses associated with exposure to Agent Orange.
- [When a U.S. delegation visited Hanoi, we made certain that there was a member from the VFW to discuss the painful issue of MIAs -- and we have continued to press for the fullest possible accounting for those who were lost while serving in Vietnam and in Korea.]

Congress⁷ already passed it

- And by the way, when the Congress passes the VFW charter reform, I look forward to signing it as soon as it lands on my desk.
- Our commitment to see the veterans interests represented doesn't stop when you disagree with us. Ask Gunner Kent, who accompanied the U.S. delegation on President Aristide's historic return to Haiti.

Just as you never faltered when you were fighting for us, my administration will never fail you.

At a time when the federal government is shrinking faster than at any time in memory, we have not just maintained but expanded care for veterans. Gunner Kent visited me at the White House and we discussed the needs of veterans. This year, while virtually all federal agency budgets are being cut, we are pushing for an additional \$1.3 billion in appropriations for the Veterans Administration -- \$1 billion of that devoted to the Veterans health system. That means care for another 43,000 veterans, two new hospitals, three new nursing homes and a whole range of other improvements.

Unfortunately, there are those today who do not share our determination to honor the nation's debt to its veterans. Some in the Congress want to reduce the benefits that veterans have earned. New legislation, if passed, will cut deeply where there should be no cuts. For example, outpatient centers won't be built and medical equipment won't be bought. And a truly successful program to reintegrate homeless veterans -- to give them temporary housing, job training and help with job placement -- will be abolished.

These funding cuts don't strengthen America; they weaken it, because an America that has forgotten its solemn obligation to its veterans would be an America that has lost touch with some of its greatness. The cuts that are on the drawing board will harm those veterans who need their nation's help most. I pledge to you today that we will fight them every step of the way. But we need your help. Because only when your voices are heard can we make it clear: caring for veterans is not a national option but a national tradition and a national duty.

This administration, however, will not cut corners on its commitment -- or rely on excuses about how things were done before. That is why we broke decades of precedent to make sure that the veterans of the Gulf War never experience the neglect and insensitivity that met those who were exposed to Agent Orange. Last year, I supported and signed legislation that for the first time ever compensates veterans suffering from undiagnosed illnesses resulting from Operations Desert Storm and Desert Shield. And I am proud that last week (ck), I gave one of the first of those checks to Michael Sills, an Illinois veteran (ck) who served in the Gulf. [Possible quote coming.] These vets fought America's fight, and they have paid a high price. We must not compound that injury by making them wait for science.

But we must do everything we can to push science along. My wife and I feel very strongly that we can spare no effort to heal the pain of Gulf War veterans. In the last two weeks, Hillary has been deeply moved by her visits with Gulf veterans at Walter Reed and the Washington Veterans' hospital, and she also met with VFW representatives to discuss Gulf War illnesses. Gulf War veterans are receiving priority access in VA facilities, and a broad range of research projects is

we must be deeply moved

under way. We have mounted a massive outreach effort to let veterans know about the care that is available to them. But we must do more.

That is why today I am announcing the creation of a Presidential Advisory Committee on Gulf War Veterans' Illnesses to review the research, recommend new avenues of investigation and speed the use of new treatments. *haven't decided*
 We have enlisted some of the finest scientists in the nation to help us solve these ailments -- because even though they are mysterious, we know they are real. This year the Veterans Administration and the Department of Defense will spend up to \$13 million on new research, looking into issues like the effect of the drugs that were used to protect against chemical and biological weapons and examining whether the illnesses have been transmitted in veterans' families. My new advisory committee will ensure that the results of this work are not sidetracked in the bureaucracy or bogged down by details. Our veterans never hesitated before going into battle. We must not waste a moment in the effort to relieve them of their injuries.

Make research bigger & broader
 Last month, at the Iwo Jima commemoration, we heard two Latin words were repeated again and again: Semper Fidelis. Always be true. The Marines noble motto is one that serves well for a great branch of the service but also for our nation as a whole. Being true to one another and being true to our traditions -- they are tied together. And those bonds of fidelity are at the heart of our community as nation. Being true to our tradition of leadership in the world means reaching out across the oceans to support democracy. It means honoring the sacrifice of those who served and carrying forward all they fought for. It means actively involving ourselves in world affairs so

write a few HS

plus give more passion no stone unturned

that the America of the 21st century enjoys the peace and stability that you wanted for your children.

Staying true to our veterans honors the deepest ties in our society. You know better than anyone what these bonds of reliance are -- they are a lot like the ones that between troops in battle. Dan Pollack, an Iwo Jima veteran who commanded the unit that took Mt. Suribachi recalled what it was like last month: "You never had to watch your back," he said, because he was in what he called "a band of brothers." Well, whether it is 50 years later for World War II veterans or five years later for Gulf War veterans, you should know that your nation will not forget what you have done for it. Long after your service has ended, your nation's service to you continues. You put your faith in America, and America will continue to keep faith with you. As long as I am President, the sacred tradition of protecting our veterans will continue, and a strong America will march forward.

###

-Talk to Jonathan Spalter re
backgrounder

- ① 2 feet sheet
- ② Kathy's account
- ③ PG coord Ld
- ④ Stars/Stripes
- ⑤ Q & A

Repts to produce

Murphy
401-8032
↓
Laura
34272

DRAFT

TALKING POINTS FOR CONGRESSIONAL STAFF RE VFW SPEECH

- Today, the President will be giving a speech at the VFW Annual Washington Conference at 11 a.m.
- I'm calling to tell you about the two main issues he will discuss.
- The first issue is maintaining our commitment to veterans, by supporting VA programs. [He will express his concerns about rescissions.]
- **The second issue, which is the more newsworthy part of the speech, is that the President will discuss his concerns about Gulf War veterans' illnesses for the first time.**
- He will announce several new initiatives that are aimed at improving the government's ability to meet the needs of Gulf War veterans who are ill.
- **The major new initiative is a (Presidential) Advisory Committee on Gulf War Veterans' illnesses, that will review and make recommendations on all the major activities of the government on this issue. For the first time, a fully independent expert panel will be created to make sure that the government's response is as open and effective as possible. The Committee will submit an interim report within 6 months of beginning its work and a final report by December 1996.**
- Previous expert panels have been more short-term or had a more narrow focus.
- In contrast, the Presidential Advisory Committee will:
 - make sure that we are doing everything possible to provide effective medical care to those who are ill;
 - make sure we are effectively coordinating research and other efforts aimed at determining the causes of their illnesses
 - make sure that information about these issues are made publicly available as soon as possible
- VA and DOD have made unprecedented efforts to unravel the mystery of some of these illnesses, and to compensate veterans who are disabled from it. The President wants to respond to the problems that remain, and believes that this independent Advisory Committee is the best way to do so.

- **The President will also announce other new initiatives, such as:**
 - new research projects on anti-nerve gas pills and pesticides
 - research and medical evaluations of the possible transmission of illnesses to spouses and children
 - new plans to release information about reports of detections of biological and chemical weapons and about data on serious illnesses among Gulf War veterans.
- We'll fax you a fact sheet on ongoing and new activities.

If asked why this Committee is different from previous expert panels (or in response to comments that it doesn't seem different):

- Previous review efforts have been more short-term or had a more narrow focus.
- For example, the NIH panel met for only 3 days, and the Lederberg panel, which was created by the Defense Department Science Board, focused on Defense Department issues and was disbanded last summer. The Institute of Medicine expert panel is making recommendations about the types of research that are needed, but not about other issues.

Sandy --

In reviewing the draft memorandum, I have two comments:

- 1) It is important for it to be clear that the broad version of the scope or terms of reference includes the environmental hazards review. Thus I think we should add to page three, where it says "that you approve a committee with broad terms of reference" the phrase ", including a focus on environmental hazards."
- 2) We need to acknowledge that we have not yet made decisions at the staff level about the make-up of the committee. The President doesn't need to deal with that issue in this memo, but we need to focus on it before Monday. The press will ask about it.

Let me know if you are planning to set up a discussion with the President on this issue.
Thank you.

Kitty

LEGISLATIVE
AFFAIRSOFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
WASHINGTON, DC 20301

FAX COVER SHEET

FROM: LT.COL LINDA JELLEN**Assistant for Health Affairs**

Pentagon, Room 3D918

Office: (703) 614-8098

Fax: (703) 697-8299

TO: Jennifer O'ConnorOFFICE: Cabinet AffairsFAX NUMBER: 456-6704THIS TRANSMISSION CONSISTS OF PAGES (INCLUDING THIS COVER)MESSAGE: Updated list for VFW speechNote addition of Chairman & Ranking
Members of oversight committees (Thurmond,
Nunn, Spence & Dellenus)

Members of Congress

SENATE

Senator Alan Simpson	(R-WY) Chairman /Vet Affairs Cmte
Senator Jay Rockefeller	(D-WV) Ranking Minority/Vet Affairs Cmte
Senator Strom Thurmond	(R-SC) Chairman/SASC
Senator Sam Nunn	(D-GA) Ranking Minority/SASC
Senator Daniel Coats	(R-IN) Chairman/SASC Mil Personnel Subcmte
Senator Robert Byrd	(D-WV) Ranking Minority/SASC Mil Personnel Subcmte
Senator Richard Shelby	(R-AL)

HOUSE

Congressman Bob Stump	(R-AZ) Chairman /Vet Affairs Cmte
Congressman Sonny Montgomery	(D-MS) Ranking Minority/Vet Affairs Cmte
Congressman Floyd Spence	(R-SC) Chairman/HNSC
Congressman Ronald Dellums	(D-GA) Ranking Minority/HNSC
Congressman Robert Dornan	(R-CA) Chairman/HNSC Mil Personnel Subcmte
Congressman Owen Pickett	(D-VA) Ranking Minority/HNSC Mil Personnel Subcmte
Congressman Glen Browder	(D-AL)
Congressman Steven Buyer	(R-IN)
Congressman Joe Kennedy	(D-MA)
Congressman Paul McHale	(D-PA)

TALKING POINTS

DRAFT

- Today, the President will be giving a speech at the VFW Annual Washington Conference at 11 a.m.
- I'm calling to tell you about the two main issues he will discuss.
- The first issue is maintaining our commitment to veterans, by supporting VA program. [He will express his concerns about rescissions.]
- The second issue, which is the more newsworthy part of the speech, is that the President will discuss his concerns about Gulf War veteran's illnesses for the first time.
- He will announce **several new initiatives** that are aimed at improving the government's ability to meet the needs of Gulf War veterans who are ill.
- The major new initiative is a **(Presidential) Advisory Committee on Gulf War Veterans' Illnesses**, that will review and make recommendation on all the major activities of the government on this important matter. For the first time, a fully independent expert panel will be created to make sure that the government's response is as effective as possible. The Committee will submit an interim report within 6 months of beginning its work and a final report by December 1996.
- Previous review efforts have been more short-term or had a more narrow focus.
- In contrast, the (Presidential) Advisory Committee will:
 - make sure that we are doing everything possible to provide full medical care to those who are ill;
 - make sure that we are doing everything we should to try to determine the causes of their illnesses.
- DOD and VA have done a superb job of responding to the compensation and medical needs of these veterans. The President believes this independent Advisory Committee can help us do even better.

- The President will also announce other new initiatives, such as:
 - new research projects on anti-nerve gas pills and pesticides;
 - research and medical evaluation of the possible transmission of illnesses to spouses and children;
 - new plans to release information about reports of the detection of chemical and biological weapons and about data on serious illnesses among Gulf War veterans.
- We'll fax you Fact Sheets on ongoing and new activities.
- If asked, why this Committee is different from previous review efforts:
 - Previous review efforts have been more short-term or had a more narrow focus.
 - For example, the NIH panel met for only 3 days, and the Lederberg panel, which was created by the Defense Department, focused on DOD issues and completed its work last summer. The Institute of Medicine expert panel is making recommendations about the types of research that are needed, but not about other issues.

THE WHITE HOUSE
WASHINGTON

K. HIGGINS -
PLEASE REVIEW &
SIGN IF YOU CONCUR.
THEN RETURN TO
NSC. THANK YOU.

ACTION

MEMORANDUM FOR THE PRESIDENT

FROM: ANTHONY LARA ✓
KITTY HIGGINS
MELANNE VERVEER

SUBJECT: Proposed Advisory Committee on Gulf War Veterans' Illnesses

Purpose

To establish an independent Advisory Committee to review U.S. government activities on Gulf War veterans' illnesses.

Background

Over the past few weeks, Sandy Berger has coordinated an interagency group involving the First Lady, Secretaries Jesse Brown and Shalala, John Deutch and others to examine how we can do a better job demonstrating our commitment to determining the causes and providing care for Gulf War veterans who are ill. A great deal has already been done by the Administration. Last year, for example, DOD established a program to diagnose and treat affected veterans and the Administration supported unprecedented legislation providing disability benefits to veterans with undiagnosed illnesses. Nevertheless, the government's handling of this issue has been the subject of criticism from both veterans and the Congress, frustrated by the lack of more definitive answers and distrustful of the government, particularly in light of the Agent Orange experience.

Secretaries Brown, Shalala and Perry believe that the Administration should launch a new initiative on Gulf War veterans' illnesses. The initiative would have three elements. The first element will involve energizing and elevating the day-to-day coordination of agency activities on the issue. The second element will involve launching an aggressive six-month public affairs effort by senior officials to communicate more effectively what we are doing to help veterans who are ill.

The third element would involve establishing an independent Advisory Committee to review the government's activities on this issue. (DOD has agreed to fund such a Committee.) Agencies agree that such a review could help assure the public that the Administration is committed to providing full medical care to

veterans who are ill and to leaving no stone unturned in determining the origins of their illnesses. It would also enhance the Administration's credibility with veterans and others by showing that we are not afraid to subject our activities to independent scrutiny. Finally, it would strengthen our response to the needs of Gulf War veterans by establishing a mechanism for outside evaluation of our activities.

Agencies agree that the Advisory Committee should report to the Secretaries of Defense, HHS and VA. Two issues, however, are unresolved: the terms of reference for the Committee and whether it should be established by you or by the three Secretaries.

On the scope of the Advisory Committee's work, DOD believes that the Committee should evaluate the full range of government activities related to Gulf War veterans' illnesses. VA believes that the Committee should focus on whether there were environmental exposures during the war (such as the use of chemical weapons) that might be associated with the veterans' illnesses. HHS does not have a strong position on this issue.

We believe that the narrow approach being proposed by VA suffers from at least two major weaknesses. First, it focuses the Advisory Committee's work almost entirely on what DOD did or knew before and during the war, precluding us from getting outside validation of our activities in other important areas. Second, by focusing the review on this "hot button" issue only, it runs the risk of being seen as little more than a "cover-up" if the Committee concludes that there is no evidence of exposure to chemical or biological weapons.

On the issue of who should establish the Advisory Committee, VA and HHS believe that it is important for you to remain insulated from any outside review of the government's activities on Gulf War veterans' illnesses. They point out that such a review is unlikely to satisfy the desire of veterans for an answer to what is causing their illnesses and that the Committee's reports are likely to be critical of at least some aspects of our activities.

DOD supports the idea of a Presidential Advisory Committee, reporting in the first instance to the three Secretaries. An Advisory Committee established by you will have more credibility than one established by the agencies, given the criticisms that have been leveled at previous groups established by DOD and other agencies to review aspects of the issue. Such an approach would also give the problem of Gulf War veteran's illnesses the prominence it deserves, without personally involving you in the Committee's subsequent deliberations or recommendations. Finally, an Advisory Committee established by you will have fewer difficulties obtaining information from the relevant agencies and better prospects of securing prominent, highly-qualified members.

If you approve such an Advisory Committee, we recommend that we ask David Hamburg of the Carnegie Corporation to chair the Committee (Bio at Tab A). An announcement that you intend to establish such a group, together with a strong statement about what we already have done, could be made during your speech to the VFW on March 6. However, further time would be required to complete the necessary background/conflict of interest checks on the chairperson and to develop a list of proposed members.

RECOMMENDATION

That you approve the creation of an Advisory Committee, established by you but reporting to the three Secretaries.

Approve _____

Disapprove _____

(Alternatively, that you approve the creation of an Advisory Committee established by and reporting to the three Secretaries.)

Approve _____

Disapprove _____

That you approve a Committee with a broad terms of reference.

Approve _____

Disapprove _____

(Alternatively, that you approve a Committee with a narrow terms of reference focused on environmental hazards.)

Approve _____

Disapprove _____

That you approve a request to David Hamburg to chair the Committee.

Approve _____

Disapprove _____

Attachment

Tab A David Hamburg Biography

Who's Who in America, 1995

HAMBURG, DAVID A., psychiatrist, foundation executive; b. Evansville, Ind., 1925. M.D., Ind. U., 1947, D.Sc. (hon.), 1976; D.Sc. (hon.), Rush U., 1977, Mt. Sinai Sch. Medicine, 1980, U. Rochester, 1981, U. Ill., Chgo., 1984, Albert Einstein Sch. Medicine, 1985, U. Pitts., U. So. Calif., Hahnemann U., 1986; LHD (hon.), Ramapo Coll., 1991, Duke U., 1993. Diplomate Am. Bd. Psychiatry and Neurology. Intern Michael Reese Hosp., Chgo., 1947-48, resident in psychiatry, 1949-50; resident in psychiatry Yale U.-New Haven Hosp., 1948-49; staff psychiatrist Brooke Army Hosp., San Antonio, 1950-52; practice medicine specializing in psychiatry, 1950-75; research psychiatrist Walter Reed Army Inst. Research, Washington, 1952-53; assoc. dir. Psychosomatic and Psychiat. Inst., Michael Reese Hosp., Chgo., 1954-56; fellow Center for Advanced Study in Behavioral Scis., Palo Alto, Calif., 1957-58, 67-68; chief Adult Psychiat. Br. NIMH, Bethesda, Md., 1958-61; prof., chmn. dept. psychiatry Stanford U. Med. Sch., 1961-72, Reed-Hodgson prof. human biology, 1972-76; Sherman Fairchild Disting. scholar Calif. Inst. Tech., Pasadena, 1974-75; pres. Inst. Medicine Nat. Acad. Scis., Washington, 1975-80; dir. div. health policy research and edn., John D. MacArthur prof. health policy and mgmt. Harvard U., Cambridge, Mass., 1980-82; pres. Carnegie Corp., N.Y.C., 1983—; adv. com. med. research WHO, 1975-86; mem. exec. panel adv. com. Chief of Naval Ops., 1984-92; chmn. sci. adv. bd. NIMH, 1986-87; sec. Energy Adv. Bd., 1990—; Ctr. for Naval Analysis, 1984—. Bd. dirs. Rockefeller U., Mt. Med. Ctr., N.Y.C.; trustee Stanford U., 1988—, Internat. Devel. Rsch. Centre, Ottawa, Can., 1990-94, Am. Mus. Natural History, N.Y.C., 1990—, Pres.'s Coun. on Advisors on Sci. and Tech., 1994—; dep. chmn. Fed. Res. Bank N.Y., Def. Policy Bd., U.S. Dept. Def., 1994—. Recipient numerous awards including: Pres.'s medal Michael Reese Med. Ctr., 1974; A.C.P. award, 1977; MIT Bicentennial medal, 1977. Mem. Am. Psychiat. Assn. (Vestermark award 1977, Disting. Svc. award 1991, Pres.'s medal Bank St. Coll. 1994, Charter medallion Radcliffe Coll. 1994), Nat. Acad. Scis. (com. on internat. security and arms control 1981-86, Inst. of Medicine), AAAS (pres. 1984-85, chmn. bd. 1985-86), Assn. Rsch. Nervous and Mental Disease (pres. 1967-68), Am. Philos. Soc., Am. Acad. Arts and Scis., Phi Beta Kappa, Alpha Omega Alpha. Address: Carnegie Corp NY 437 Madison Ave New York NY 10022

March 2, 1995

MEMORANDUM FOR BOB BOORSTIN

FROM: JENNIFER O'CONNOR

SUBJECT: VFW SPEECH

Beautifully written but...

- 1) Page 7, says he looks forward to signing the charter when Congress passes it; Congress already passed it and it is sitting here waiting for him to sign it, so drop the "when Congress passes" part.
- 2) Page 8, he says Hillary is deeply moved by the veterans stories. The point of the crew who has been working on Persian Gulf, including the First Lady, is for him to show he cares. This only says she cares. We need to show his personal compassion. You can do that by literally saying that -- or by having him describe the sicknesses of the veterans. He has received a lot of mail on it -- he can talk about the letters, he can describe the scary symptoms Michael Sills described and how moving it was to talk with him, etc. We need him to feel it and show that in the speech.
- 3) Page 9, says we have enlisted the finest scientists... It sounds like they are on the Advisory Committee. He hasn't and won't by Monday have decided who is on the committee, so that is confusing,
- 4) This is the big comment. I think the speech is misfocussed. It is 5 pages of last night's engagement, 2 pages of other veterans stuff (which is good) and 2 pages of Persian Gulf (which is light). I think the intention of the Sandy/FLOTUS/Kitty/Ickes/etc crew is for this to be a major statement on Persian Gulf. I think that purpose is lost here. Remember one of the reasons we are doing this is that on March 12, "60 Minutes" is going to slam the hell out of us for not doing enough on Persian Gulf. We want there to be a strong statement from the President to counter it. Last week he said he wants to do something really big -- I just don't think this is it. Perhaps we could cut back the foreign policy stuff, and beef up the Persian Gulf stuff, with a few paragraphs describing what they are going through, to show he knows and cares, and some more details on what the Administration has done -- I think you have this stuff in the outline Elissa gave you, but I can give you more.
- 5) Please call me if you need more Persian Gulf stuff.

LEGISLATIVE
AFFAIRSOFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
WASHINGTON, DC 20301

FAX COVER SHEET

FROM: LT.COL LINDA JELLEN**Assistant for Health Affairs****Pentagon, Room 3D918****Office: (703) 614-8098****Fax: (703) 697-8299**TO: Jennifer O'ConnorOFFICE: Cabinet AffairsFAX NUMBER: 202 456 6704THIS TRANSMISSION CONSISTS OF PAGES (INCLUDING THIS COVER)MESSAGE: Per your request list for VFW
speech heads-up.2 Mar - Jennifer - When I checked on
fax confirmation sheet this morning
it did not indicate that this fax
went through when I sent it last
night. I am re-transmitting it just
in case you didn't get it. Linda

Members of Congress

SENATE

Senator Alan Simpson	(R-WY) Chairman /Vet Affairs Cmte
Senator Jay Rockefeller	(D-WV) Ranking Minority/Vet Affairs Cmte
Senator Daniel Coats	(R-IN) Chairman/SASC Mil Personnel Subcmte
Senator Robert Byrd	(D-WV) Ranking Minority/SASC Mil Personnel Subcmte
Senator Richard Shelby	(R-AL)

HOUSE

Congressman Bob Stump	(R-AZ) Chairman /Vet Affairs Cmte
Congressman Sonny Montgomery	(D-MS) Ranking Minority/Vet Affairs Cmte
Congressman Robert Dornan	(R-CA) Chairman/HNSC Mil Personnel Subcmte
Congressman Owen Pickett	(D-VA) Ranking Minority/HNSC Mil Personnel Subcmte
Congressman Glen Browder	(D-AL)
Congressman Steven Buyer	(R-IN)
Congressman Joe Kennedy	(D-MA)
Congressman Paul McHale	(D-PA)

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. memo	[Personally Identifiable Information] [partial] (1 page)	03/02/1995	b(6)

COLLECTION:

Clinton Presidential Records
Chief of Staff
Jennifer O'Connor (Subject Files)
OA/Box Number: 6138

FOLDER TITLE:

Persian Gulf-March 1995 [4]

2024-0267-S
rs4103

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

InterOffice Memo

To: Lee Satterfield
From: Robert L. Jones
Date: March 2, 1995
Subject: Security access VFW event March 6, 1995

Request that the following Department of Veterans Affairs staff be cleared by security (pinned) for access during the VFW event at the Washington Sheraton Hotel March 6, 1995. Listed in order of priority.

James Farrell SSAN	(b)(6)	Special Assistant to SecVA
Kathy Juado SSAN		Asst Sec Public and Intergovernmental Affairs
Roy Spicer SSAN		Executive Assistant to SecVA
Bob Jones SSAN		

CC: Steve Hilton, Jennifer O'Connor

DRAFT

DRAFT
3/1/95

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

Date

FACT SHEET

Gulf War Veterans' Illnesses: New Initiatives

Various steps have already been taken by the Clinton Administration to respond to the health concerns of U.S. military personnel who served in the Gulf War. Today, the President announced a number of new initiatives aimed at further enhancing the U.S. government response to the needs of Gulf War veterans who are ill.

ADVISORY COMMITTEE

The President will establish an Advisory Committee on Gulf War Veterans' illnesses to review and make recommendations on U.S. government activities related to the illnesses being reported by U.S. military personnel who served in the Gulf War. This Committee, which will begin its work in the spring of 1995, will review and make recommendations on Gulf War illnesses-related research, the activities of the Persian Gulf Veterans Coordinating Board, medical examination and treatment programs, public outreach efforts, the implementation of recommendations from external reviews, possible risk factors, and reports of the possible detection of chemical or biological weapons. The Committee is to provide an interim report within six months of beginning its work and a final report by no later than December 1996.

TREATMENT

The Department of Defense (DOD) and the Department of Veterans Affairs (VA) are enhancing their current programs for diagnosing and treating Gulf War veterans.

- **Specialized Care Centers:** DOD is establishing Specialized Care Centers in Washington, D.C. and San Antonio, TX, to provide care for patients who need additional testing or treatment after completing comprehensive medical examinations at other military medical facilities. These centers will open in March 1995.

DRAFT

Placeholder language pending

Presidential decision.

DRAFT

- **Reproductive Problems:** VA and DOD diagnostic test programs for Gulf War veterans will soon include guidelines for testing individuals who have had reproductive problems since returning from the Gulf. Nationally recognized medical experts are being consulted for advice in developing these guidelines.

EXPANDED RESEARCH

In addition to the research that is already underway, VA and DOD are planning to spend \$8-13 million on new research on Gulf War veterans' illnesses in 1995. Most of these studies will be designed, peer reviewed and conducted by university researchers and other independent scientists or, in the case of VA research, by scientists at VA medical centers across the country.

- **Epidemiological Research:** For the first time, major epidemiological studies will be conducted to examine whether such things as exposure to medications and pesticides, the location of troops during the war, and the age and sex of such troops are associated with specific symptoms. The DOD-funded studies will be based on a random sample of Gulf War veterans and civilians employed by DOD. A VA study will compare the health of 15,000 Gulf War veterans and 15,000 veterans who served during the same years but not in the Persian Gulf. Miscarriages, birth defects, and other reproductive health problems and illnesses among spouses or children will also be studied by DOD and VA.
- **Drugs and Vaccines:** New research is being conducted on the drugs and vaccines provided to help protect U.S. military personnel in the Gulf against chemical and biological weapons. This research will include further studies on the anti-nerve agent pill pyridostigmine bromide, alone and in combination with other medications or chemicals such as pesticides. Research on the long-term effects of anthrax and botulism vaccines will also be conducted, for the first time.
- **Medical Evaluations of Spouses and Children:** For the first time, VA will provide medical evaluations and diagnostic tests to spouses and children of Gulf War veterans. These tests will be provided as part of a research project on the possible relationship between the illnesses of Gulf War veterans and those of their spouses and children. Dependents of veterans who are enrolled in the VA Gulf War Registry will be selected for inclusion in this study.

DRAFT

DRAFT

- **Environmental Hazards:** DOD and VA will support new research to expand existing information on potential environmental hazards such as infectious and parasitic diseases and the effects of exposure to petrochemicals, lead, depleted uranium and other toxic substances.
- **Improving Treatment:** Later this year, DOD will accept research proposals from scientists across the country designed to improve treatment for Gulf War veterans with diagnosed and undiagnosed illnesses and symptoms.

OPENNESS

In addition to the DOD declassification program previously announced, DOD and VA are taking other steps to make information available about issues of concern to Gulf War veterans.

- **Chemical and Biological Weapons:** Since the end of the Gulf War, some veterans have expressed concern about the possibility that they were exposed to chemical or biological weapons during the war. In response to these concerns, DOD will prepare and make available analyses of the most frequently cited reports of the detection of chemical or biological weapons and will continue to declassify and release documents bearing on these and other reports.
- **Data on Serious Illnesses:** Information regarding cancers and other serious illnesses among Gulf War veterans who have received care in VA and DOD medical facilities will be made available to the public. Reports, categorized by age group, sex and race, will be released every six months by the Persian Gulf Interagency Coordinating Board.

OUTREACH

VA Secretary Jesse Brown has recently sent letters to all VA Gulf War Registry participants informing them of new compensation regulations for undiagnosed illnesses.

FUTURE SAFEGUARDS

The Gulf War made clear the need for better training of U.S. troops on health risks prior to overseas deployments, for improvements in on-the-scene preventive medicine during deployments, and for better follow-up documentation and medical screening of troops after deployments. In response, DOD is developing a comprehensive approach that will strengthen training on the risks of toxic exposure and make more information about such risks available to individual service members. The effort

DRAFT

DRAFT

will also improve documentation of each service members' health, medical problems and exposures before, during and after deployment. Policy guidelines for this new approach will be completed this spring, with the military services developing detailed implementing instructions thereafter.

DRAFT



Department of Veterans Affairs
Office of Public & Intergovernmental Affairs

Telephone: (202) 273-5750

FAX: (202) 273-5715

To: Jennifer O'Connor FAX: 456-6704

From: Kathy Jurado

Date: February 24, 1995
27,

Comments: We have developed a success story document for our use. Can we have White House approval to distribute this to our various interest groups and media.

Kathy

DRAFT

Partnerships with Veterans Organizations

- Secretary Brown signed a performance agreement with President Clinton which committed VA to improve customer satisfaction, improve the quality and timeliness of its services, and empower VA employees to meet veterans' needs creatively.
- Presumptive service-connection for disability compensation was established for veterans who experienced full-body exposure to mustard gas and Lewisite.
- VA is providing information on radiation research that may have involved human subjects to the Advisory Committee on Human Radiation Experiments, a committee established by the White House and made up of non government scientists, physicians and ethicists. VA Secretary Jesse Brown had ordered a nationwide medical records search on nuclear medicine and radiation research that may have been conducted in VA facilities years ago.
- VA plans to undertake a survey of the health status of submariners and airmen who may have received radium treatments in military service.
- The Administration supported enactment of a law extending disability compensation to U.S. veterans who suffer from conditions that may have resulted from radiation exposure in atmospheric nuclear weapons tests conducted by other countries.
- The White House has conducted extensive outreach to the veterans service organizations, resulting in greater access to the Administration on a broad range of domestic policy and foreign policy issues. Veterans service organizations have participated in more than 80 significant White House activities and meetings on such subjects as POWs/MIAs, health-care reform, the reaffirmation of veterans' preference, Vietnam, Haiti, employment of people with disabilities and VA's budget. VA also has involved veterans service organizations in the department's decision-making process at an unprecedented level.
- An interagency Veterans' Policy Group of the White House Domestic Policy Council has been established to improve coordination of federal veterans' programs. Topics of focus include homelessness, National Guard and Reserve job security, VA claims processing, veterans' preference, small business loans and employment for disabled veterans.
- Veterans are being included at an unprecedented level as delegates to the White House Conference on Aging, to be held in Washington, D.C., May 1-5.
- In 1993 and 1994, President Clinton invited representatives of the major veterans' service organizations and the National League of Families of American Prisoners and Missing in Southeast Asia to be part of the Presidential delegation to Vietnam to address the POW/MIA issue.

February 1995

DRAFT

VA Called for the First National Summit On Homelessness

- A Women Veterans Division was established at VA's National Center for Post-Traumatic Stress Disorder in Boston.
- VA established a new Women Veterans Program Office and appointed a director.
- VA awarded the first-ever grants to public and private nonprofit groups under a program to develop new homeless veterans assistance programs.
- 44 new or expanded programs were approved for homeless veterans at VA facilities nationwide. Some \$70 million was directed to VA's specialized homeless assistance programs in fiscal year 1994.
- VA Secretary Jesse Brown called for the first National Summit on Homelessness Among Veterans, which was held in Washington, D.C., Feb. 24-25, 1994.
- The first Center of Excellence in Substance Abuse Treatment and Education was established at the Seattle VA Medical Center, which will serve as a resource for the VA health-care system, develop treatment programs and provide consultation.
- Secretary Brown issued a decision, supported by the Administration, that Vietnam veterans suffering from respiratory cancers (lung, larynx and trachea) and multiple myeloma (a cancer involving the bone marrow) should be awarded disability payments based on presumed exposure to Agent Orange and other herbicides.
- A toll-free number was established for veterans and their dependents to inquire about VA's headstone and grave marker program.
- 34 new or expanded post-traumatic stress disorder treatment programs were initiated at VA medical centers, bringing to 110 the number of such specialized VA programs nationwide.
- VA guaranteed the 14 millionth home loan almost 50 years after the signing of the original GI Bill. The 50th anniversary of the signing was celebrated in June 1994.
- VA implemented a number of measures to provide relief or protection to VA benefit recipients, GI Bill homeowners and insured veterans affected by the Jan. 17, 1994, earthquake in the Los Angeles area.
- VA published rules in the Federal Register that establish presumptive service-connection for Hodgkin's disease and porphyria cutanea tarda (PCT), a liver disorder, based on exposure to Agent Orange and other herbicides.
- Secretary Brown announced the appointment of the executive director, Chief Minority Affairs Officer staff, with the goal of assessing VA's delivery of services to minority-group veterans.

DRAFT

- President Clinton ordered the National Performance Review of the federal government. This intensive study by the Vice President recommended ways to make the federal government work better and cost less.

- President Clinton unveiled his welfare reform plan — a plan that is designed to help people help themselves, transforming the welfare system into an employment system.

- President Clinton announced Priority: Home! Federal Plan to Break the Cycle of Homelessness. This innovative plan moves from merely providing emergency assistance to promoting long-term independence and self-sufficiency.

- President Clinton is confronting the AIDS epidemic in a number of ways, including the creation of the position of National AIDS Policy Coordinator to coordinate federal government efforts and increasing funding for research.

- Because of President Clinton's leadership, health-care reform is at the top of the national agenda.

- President Clinton signed the Family & Medical Leave Act, which means that 44 million workers have job protection in the form of unpaid leave during a family crisis.

- At Secretary Brown's urging, the Administration is seeking a \$1.3 billion increase in VA's fiscal 1996 budget, \$1 billion of which is targeted to VA's health care system, which will enable VA to provide medical treatment to an additional 43,000 veterans, construct two new hospitals, three nursing homes and make a number of facility improvements.

- The Administration strongly endorsed legislation, since enacted, that permits VA to pay compensation benefits to chronically disabled Persian Gulf War veterans with undiagnosed illnesses.

- Three environmental hazards research centers were established at three VA medical centers with an initial focus on the possible health effects of environmental exposures of Persian Gulf veterans. The centers supplement other research VA is conducting on the possible health effects of Gulf service.

- VA established a toll-free number for Persian Gulf veterans and their families who have health concerns.

- The National Academy of Sciences was awarded a contract for an independent review of possible environmentally related health effects from military service in the Persian Gulf. The contract is jointly funded by VA and the Defense Department.

- A series of VA health-care initiatives for women veterans was implemented, including four comprehensive health centers and four stress-disorder treatment teams, as well as hiring counselors in 69 locations to treat the aftereffects of sexual harassment and assault.

Administration
Accomplishments
Related Specifically
To Veterans



DRAFT

Administration Accomplishments Which Affect Veterans and All Americans



- Since President Clinton took office, the economy has created more than three and a half million new private sector jobs; more than 60 percent pay 45 percent above median wages.
- President Clinton is pursuing an increased standard of living for middle class families. His "Middle Class Bill of Rights" includes a child tax credit, an education tax deduction, expanded IRAs and a grant program to enable low-skill or laid-off workers to attain training and skills for reemployment.
- President Clinton's crime bill balances punishment with prevention. More than 100,000 additional police officers have been put on the street. Reducing gang violence and creating more drug treatment programs also are part of the bill.
- The deficit reduction plan reduces the deficit by more than \$500 billion over five years — cutting the deficit in half.
- President Clinton has strengthened the economic infrastructure in a number of ways, including the creation of nine Economic Empowerment Zones and 95 Enterprise Communities; investing in new technologies and industries; and instituting the Defense Reinvestment and Conversion Initiative, which reinvests in workers, communities and companies hit hardest by the defense cuts brought about by the end of the Cold War.
- President Clinton introduced a program to improve credit availability for small businesses, making new tax cuts available for more than 90 percent of them.
- President Clinton's commitment to education is reflected in a number of initiatives, including an increase in Head Start funding; The Student Loan Reform Act, which greatly increases access to higher education; National Service, which helps students further their education while also contributing to communities through public service; and the Goals 2000: Educate America Act, which sets education standards and helps implement education reforms.
- President Clinton signed The National Voter Registration Act, which will increase the percentage of Americans registered to vote from 60 percent to more than 90 percent in the next four years.
- President Clinton signed the comprehensive Child Immunization Plan, which means that at least 90 percent of the nation's two-year-olds will be immunized by 1996.
- President Clinton's international efforts have advanced American's interests abroad. Among the accomplishments: President Clinton led international support for democracy and market reform in Russia and other former Soviet states; supported South Africa's transition from apartheid to democracy; and reinvigorated the Middle East peace process.
- President Clinton introduced a strong campaign finance reform plan that, when enacted, will clean up the way campaigns are financed and limit the role of special interests.

Gulf war sequel: Claims, counterclaims

The Pentagon denies that U.S. forces in the Persian Gulf war were exposed to chemical or biological agents, but there are a growing number of claims to the contrary.

By John Ritter
USA TODAY

The yellow ribbons are a fading memory, but reports that U.S. forces were exposed to Iraqi chemical and biological agents during the gulf war are mounting, despite the Pentagon's vigorous denials.

Active duty officers and enlistees, once reticent for fear of reprisals, are now signing a gulf war illness registry at a rate of 100 a week and challenging the military's position.

And this week a top official at the Department of Veterans Affairs said he lacks confidence in Pentagon assertions that troops were not exposed to biological or chemical agents.

"Despite having heard from the Department of Defense, I remain concerned about what actually happened, about exposures that either occurred or not," said Kenneth Kizer, VA undersecretary for health. "That's the area I feel most insecure about."

Even the White House has signaled impatience with progress in understanding gulf illnesses. Hillary Rodham Clinton, who made two high-profile visits with gulf vets last week and the week before, said the president has asked her to look into "what we have left to do."

But former senator Donald Riegle, whose two-year banking committee probe concluded last year that there's strong evidence troops were exposed to agents, says: "The problem is so big and the implications so serious, the professional bureaucracy at the Pentagon can't afford to acknowledge it."

"We saw this with Agent Or-

ange, where the truth can be so calamitous to reputations and careers and budgets that bureaucracies will go to great lengths not to come clean."

The Senate banking committee initially got involved because it oversees legal exports that may have military applications, such as chemical, biological and nuclear materials.

More than 50,000 gulf veterans have reported a range of ailments that include fatigue, muscle and joint pain, heart and intestinal problems, memory loss, rashes and sores. They suspect they were exposed to chemical or biological agents from Iraqi artillery and Scud missile attacks, fallout from coalition bombing of Iraqi chemical and biological targets, and exposure to munitions in Iraqi storage facilities.

The Pentagon steadfastly says troops were not exposed to chemical or biological agents. But there are many accounts to the contrary.

► An Army chemical and biological warfare specialist received a meritorious service medal for "supervising the positive identification" of mustard agent in Kuwait. The Pentagon says there were no chemical agents in Kuwait.

► Air Force battle repair mechanics say they were ordered to decontaminate F-111s returning from bombing missions of Iraqi chemical weapons plants but didn't have proper protective gear. At least 14 of them are sick.

► Members of a 5th Special Forces unit detached to Egyptian coalition forces twice confirmed the presence of a nerve agent during bombing of Iraqi



By D. Patrick Harding

ANGRY: 'There's a lot of pressure, whether it's said or perceived,' not to speak out, says Capt. Kenneth Takasaki. He remains on active duty but says chemicals from the gulf war made him sick.

chemical sites.

► A 2nd Marine Division log confirms nerve and mustard agent detections and a "large number of dead sheep," a possible indicator, military manuals say, of biological agents.

A Central Command log released in January includes entries reporting traces of nerve agents "caused by fallout from bombing" Iraqi chemical sites.

The log was just declassified in January, leaving some veterans wondering if key informa-

tion remains confidential.

The Pentagon says it has only classified its sources and intelligence gathering methods. But in a Senate hearing, officials were asked whether Iraqi chemical units were near U.S. forces and if they could attack with chemical and biological agents. The Pentagon ruled answers to those and 17 other questions were classified.

"It's becoming increasingly clear the Pentagon has not been playing straight on this is-

burning chemical plants, high explosives, depleted uranium — a cocktail of stuff."

Hundreds of gulf vets have told Senate investigators about artillery explosions and Scud missile attacks, followed by alarms and orders to don protective gear. In some instances, chemical agents were detected by more than one device using different detection techniques.

The Pentagon acknowledges thousands of chemical alarms went off, but says every one was false.

"I've got everything to gain if I can prove chemical agents were out there," says Theodore Procv, deputy assistant secretary for chemical and biological matters. "Budgets would go up for defensive equipment. So it's in our best interest to verify that agents were used and we've tried unsuccessfully."

The Pentagon also says it has not found any suspicious clusters of similar symptoms reported by units that operated in the same geographic area.

"If we don't find any clusters ... it begins to push the possibility way out of the realm of probability," says Stephen Joseph, Defense assistant secretary for health affairs.

Capt. Michael Johnson, who teaches chemical and biological warfare at the Army's infantry school in Fort Benning, Ga., received a meritorious service medal for detecting mustard gas. He confirmed his findings with mass spectrometer tests, the most sophisticated field detection method. The

"Our troops encountered a cocktail of chemical agents, biological agents, toxins from

“
There's natural reluctance to say (chemical agents set off alarms) because nobody wanted to ... demoralize troops.
”

— Army Lt. Col. Robert Frandsen



Pentagon says later lab analysis found nitric acid instead.

"I'm confident to this day the systems we used detected the presence of chemical agent," says Johnson.

Capt. Kenneth Takasaki says he is angry that the military won't acknowledge nerve gas detections by units in his Special Forces group.

"There's a lot of pressure, whether it's said or perceived," not to speak out, he says. "My career is shot. I came out of the Persian Gulf with a Bronze Star and it doesn't mean a thing."

Army Lt. Col. Robert Frandsen isn't sure what caused his symptoms, but doubts all the alarms he heard were false. If chemical agents set them off, "there's natural reluctance to say so because nobody wanted to ... demoralize troops."

Scientific panels, however, have failed to confirm claims that U.S. troops were exposed to chemical or biological weapons. A National Institutes of Health panel, an Institute of Medicine panel and a Defense Science Board task force have found no basis for linking chemical or biological agents to gulf illness.

Still, critics say the military is ignoring the very people it trained in chemical and biological warfare and gave responsibility for battlefield detection.

"They say it was there," says James Tuite, a former Senate banking committee investigator. "It's only the policymakers saying it didn't happen."

Veterans claim gulf war chemical exposure

Many U.S. veterans who became ill after the Persian Gulf war say they believe they were exposed to chemical or biological agents. The Pentagon says no troops were exposed, and not a single detection report was verified. Iraqi targets and key places in Kuwait and Saudi Arabia where U.S. troops reported incidents:

Iraqi chemical and biological warfare facilities

Syria

Baghdad

Iraq

Basra

Kuwait

Ahmadi

Hafar al Batin

King Khalid Military City

Jubail

Dhahran

Riyadh

Saudi Arabia

Jiddah

At Ta'if



Detection leads to medal
Capt. Michael Johnson gets a medal for detecting mustard agent at a Kuwaiti school. But the Pentagon says it was nitric acid.



By Mike Haskey, AP

By John McConico, AP

Troops find dead sheep
Robert Huff, a Navy chief medical corpsman with the first troops in Kuwait, says he found hundreds of dead sheep over a large area and inside buildings, a possible indicator, military manuals say, of biological agents.

Nerve agent reported
An Army Special Forces unit detects nerve agent during first night of air war.

Scuds trigger alarms
Troops say chemical alarms sounded during Scud missile attacks. The Pentagon says Iraq lacked technology to arm missiles with chemical agents, but post-war U.N. teams find them.

Mechanics decontaminate jets
Air Force mechanics say they were ordered to decontaminate F-111 jets returning from bombing missions in Iraq without proper protective gear. More than a dozen say they are sick. The Pentagon says chemical agents would not stick to jets.

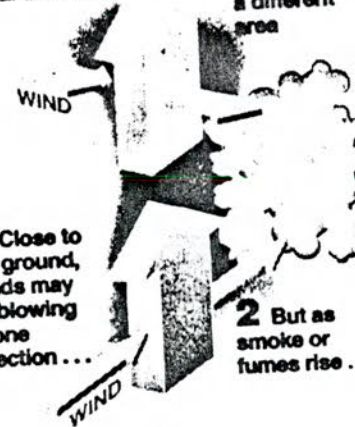
Winds can spread chemical agents

The Pentagon disputes a theory that winds carried fallout from bombed Iraqi targets back over U.S. troops, causing gulf war illnesses.

3 Wind direction can change, spreading debris over a different area

1 Close to the ground, winds may be blowing in one direction ...

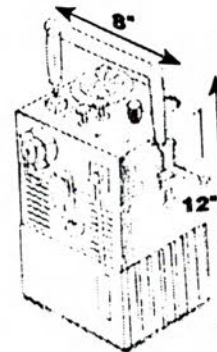
2 But as smoke or fumes rise ...



Chemical alarm

U.S. forces scattered more than 13,000 battery-powered M-8 chemical detectors across the desert.

- ▶ Detector sounds alarm when heavy chemical agents are present.
- ▶ If used in blowing sand or dust, air filter must be replaced every day and sometimes every hour.



By Cliff Vancura and Marty Baumann, USA TODAY

Source: USA TODAY research

THURSDAY, MARCH 2, 1995 • USA TODAY