

Welcome to the Military History Toolkit. This slide presentation is one of three slide sets contained in the Military History Toolkit. Others include: Homeless Veterans at Life's End and Veterans' Benefits.

This slide set provides an overview of the various military eras along with service related diseases, illnesses and conditions that may impact on Veterans at the end-of-life, from both clinical and benefits perspectives. The content will increase understanding of the importance and implications of asking Veterans about their military background. The purpose of this slide set is to heighten awareness of Veteran-specific issues; for clinical training, please use EPEC for Veterans or ELNEC-For Veterans curricula.

DISCLAIMER: Although the information contained in this slide set presents an overview of service-related diseases, illnesses and conditions, it is not intended to provide interpretation of VA policy.

Military History Checklist

MILITARY BACKGROUND		
2. In which branch of the military did you serve?		
<input type="checkbox"/> Army	<input type="checkbox"/> Marines	<input type="checkbox"/> Merchant Marines during WWII
<input type="checkbox"/> Navy	<input type="checkbox"/> Coast Guard	<input type="checkbox"/> Other _____
<input type="checkbox"/> Air Force	<input type="checkbox"/> Reservist or National Guard member	
3. In which war era or period of service did you serve?		
<input type="checkbox"/> WWII (4/6/17 to 11/11/18)	<input type="checkbox"/> Vietnam (5/5/64 to 5/7/75 and 2/28/61 for veterans who served "in country" in Vietnam) before 5/5/64)	<input type="checkbox"/> Peace Time
<input type="checkbox"/> WWII (12/7/41 to 12/31/46)		<input type="checkbox"/> Afghanistan/Iraq (OEF/OIF)
<input type="checkbox"/> Korea (6/27/50 to 1/31/55)	<input type="checkbox"/> Gulf War (8/2/90 through a date to be set by law or presidential proclamation)	<input type="checkbox"/> Other _____
<input type="checkbox"/> Cold War		<small>Note: after 9/7/80, must have completed 24 months continuous active service, or the full period for which they were called or ordered to active duty.</small>
4. Overall, how do you view your experience in the military?		
5. If available would you like your hospice staff/volunteer to have military experience? <input type="checkbox"/> Yes <input type="checkbox"/> No		

In which war era or period of service did you serve? Often in the VA or military system, a soldier's dates of service are spoken of in terms of the conflict in which the Veteran served. As with branch of service, each era of service has its own unique culture, which can dramatically influence the outcome of a soldier's experience. For example, WWII combat Veterans are more likely to have had areas of safe haven than Vietnam Veterans, who were often in immediate physical danger and resulted in a higher incidence of stress-related disorders. Korean Veterans were often told not to discuss their military service and are sometimes overlooked in the discussion regarding the needs of Veterans. A significant number of Korean Veterans were POWs held by the Chinese, and subjected to torture and other mistreatment.

Overall how do you view your experience in the military? Veterans often take great pride in their service, seeing it as a period of time when they did something meaningful to make a difference in the world despite the fact that they may well have been imprisoned, tortured, wounded, exposed to atrocities, or had other traumatic experiences. Not all Veterans see their service as a positive experience, and some do not see their sacrifice as having made any difference, which has resulting complications. There may be extensive existential questions, and providing opportunities during follow-up visits for team members to explore these has a great deal of value. Understanding how Veterans view their service, whether it is positive or negative, has implications for how they view their disease, especially if it is related to their service.

Would you like your hospice staff/volunteer to have military experience, if available? The common military culture of Veterans, which is often able to span eras and theaters of service despite the previously mentioned differences, can be a powerful force at end of life. Having a volunteer or staff member who is a part of the military culture can provide support in a way not otherwise available, and may provide an outlet for the stories and experiences that have never been communicated to family or others in the Veteran's life. Also, volunteer opportunities for Veterans are often a path to healing war related trauma for the volunteer. Be aware that Veteran volunteers may need additional support when caring for a fellow Veteran, as their own trauma may also be re-triggered. Your local VA hospital, VetCenter, County Veterans Service Office, or a Veterans Service Organizations can be good sources of information and support for community hospices that are developing Veteran volunteer programs.

Veteran Population

- 23.8 million living Veterans
- 7.5% women
- 37 million dependents (spouses and dependent children) of living Veterans and survivors of deceased Veterans
- Together, they represent 20% of the US population

Veteran Population

- Most Veterans living today served during times of war
- Vietnam Era Veteran – 7.9 million, representing the largest segment of the Veteran population

Veteran Population

- Median age of all living Veterans in 2007:
 - 61 for men
 - 47 for women
- Median ages by period of service:
 - Gulf War, 37 years old
 - Vietnam War, 60 years old
 - Korean War, 76 years old
 - WW II, 84 years old

Veteran Population

- Sixty percent (60%) of the nation's Veterans live in urban areas
- States with the largest Veteran population are CA, FL, TX, PA, NY and OH, respectively
- 6 states account for 36% of total Veteran population

Service Connected Disability

- VA pays disability compensation to Veterans with injuries or illnesses incurred during, or aggravated by, their military service
- VA must determine that the disability is "service-connected"
- A Veterans Services Representative is available at VA medical centers and regional offices to explain and assist Veterans who need help in applying for disability benefits

Basis for VA Disability Ratings:

VA disability compensation stems from an official finding that links an illness or disability with the period of a Veteran's military service, whether war-related or in peacetime. VA usually does not need to find the exact cause of the illness. The dollar amount of compensation is determined by regulations that give a rating for each illness or injury on a scale of 0 to 100 based on the severity of the medical problem. The philosophy of the compensation program is that these ratings are intended to reflect a loss of earnings capacity.

A Veteran with a slight scar that does not interfere with work might be rated at 0 percent while brain cancer would be rated at 100 percent. That percentage is used to determine amounts of tax-free disability compensation that are paid in 10 percent increments and adjusted annually for inflation.

The year 2008 range is \$117 per month for a 10 percent rating to \$2,527 monthly for a 100 percent disability. Payments are increased for dependents and for Veterans with multiple illnesses officially connected with service. A Veteran whose condition worsens may see his rating increased after periodic reexamination, or he may drop off the rolls altogether if cured of an illness. (www.vba.va.gov/bln/21/rates/comp01.htm#BM01)

Reference: www1.va.gov/agentorange/page.cfm?pg=11

See the slide set on Benefits in the Military History Toolkit for a more in depth presentation about Veterans' benefits, what Veterans need to do to apply for them and resources available to help with the application process.

“Tell me about your military experience...”

- When and where did you serve?
- What did you do while you were in the service?

Why ask these questions?

. . . .Because it may influence both health and quality of life...

Veterans often take great pride in their service, seeing it as a period of time when they did something meaningful to make a difference in the world despite the fact that they may well have been imprisoned, tortured, wounded, exposed to atrocities, or had other traumatic experiences.

Not all Veterans see their service as a positive one or do not see their sacrifice has having made any difference, and this has resulting complications. There may be extensive existential questions, and providing opportunities during follow-up visits for team members to explore these has a great deal of value.

Understanding how Veterans view their service, whether it is positive or negative, has implications for how they view their disease, especially if it is related to their service.

World War II

“World War II (1939-1945) killed more people, destroyed more property, disrupted more lives, and probably had more far reaching effects than any other war in history.”

WORLD BOOK ENCYCLOPEDIA

WWII Veterans today are all over 70 years old and subject to all the diseases of aging: cardiovascular diseases, cancer, dementias of the Alzheimer's type, etc. However, In the early 1940's, they were among the nation's fittest and participated in modern warfare that coincided with major advances in modern medicine.

The advent of antibiotics began with the use of sulfonamides in the mid-1930's, hence the troops had the benefits of sulfa and penicillin to treat both disease and wound infections. They also benefited from the availability of blood transfusions, aeromedical evacuation, better burn management, synthetic antimalarials and DDT, and a wide range of preventive measures including immunizations against yellow fever, cholera, plague, influenza, typhus, typhoid and tetanus.

The result was an up to then extraordinary 4% died-of-wounds rate for British and American troops, (this rate was later reduced to 2.5% in Vietnam) and death rates from disease markedly below the killed-in-action rate.

Reference: www.va.gov/oaa/pocketcard/worldwar_summary.asp

World War II

- December 7, 1941 – December 31, 1946
- Total who served in all Armed Forces: 16,112,566
- Battle Deaths: 291,557
- Wounded: 671,846
- Medals of Honor: 433
- In what theatre of operations did the Veteran serve?
Pacific? Asia? Europe?

World War II-Asiatic-Pacific Theater 1941-1946: the war in the Pacific was essentially a maritime war.

The European Theatre of Operations (ETO) was an area of heavy fighting across Europe, during World War II, from Nazi Germany's invasion of Poland on September 1, 1939 until the end of the war with the German unconditional surrender on May 8, 1945 (V-E Day). The Allied forces fought the Axis powers in three sub-theatres: the Eastern Front, the Western Front, and the Mediterranean Theatre. (http://en.wikipedia.org/wiki/European_Theatre_of_World_War_II)

Reference for statistics: www.va.gov/oaa/pocketcard/worldwar_summary.asp

World War II

- Fighting occurred on the continents of Europe, Asia, and Africa and in the Atlantic and Pacific Oceans
- Service was carried out under severe winter conditions, in the harshest of deserts, and in the hottest, most humid, tropical climates
- Joining up, or being drafted, meant that you were in the military for the duration

The U.S. entered the war in December 1941 following the attack on Pearl Harbor. Before it was over, Americans had fought on the continents of Europe, Asia, and Africa and in the Atlantic and Pacific Oceans. At various times, their service was carried out under severe winter conditions, in the harshest of deserts, and in the hottest, most humid tropical climates. Those who joined up or were drafted were in the military for the duration, however long that might be. The war in Europe ended on May 8, 1945, when the Germans surrendered at Reims in France. The war continued in the Pacific for three more months. However, following the dropping of the first atomic (U-235) bomb on Hiroshima on August 6 and a larger (plutonium) bomb on Nagasaki two days later, the Japanese surrender aboard the USS Missouri in Tokyo harbor on September 2, 1945.

Reference: www.va.gov/oa/pocketcard/worldwar_summary.asp



The 7 December 1941 Japanese raid on Pearl Harbor was one of the great defining moments in history. A single carefully-planned and well-executed stroke removed the United States Navy's battleship force as a possible threat to the Japanese Empire's southward expansion. America, unprepared and now considerably weakened, was abruptly brought into the Second World War as a full combatant.

Reference: www.history.navy.mil/photos/events/wwii-pac/pearlhbr/pearlhbr.htm

Image (left): http://www.presidentialtimeline.org/html/images/objects/0163_lg.jpg

Image (right): http://www.afa138.org/Images/Legacy_Pathway/Legacy_Pathway.jpg

World War II

Unique Health Risks

- Infectious Diseases
- Wounds
- Frostbite / Cold Injury
- Mustard Gas Testing
- Exposure to nuclear weapons
- Nuclear Cleanup

Morbidity from such diseases as tuberculosis (anti-tuberculous agents did not begin to appear until 1949), rheumatic fever, hepatitis, and tropical diseases was high, however, and the prime reason for residual disability and time lost from duty. World War II Veterans also were the first to serve in the nuclear age and American POWs were employed in the clean up of Hiroshima and Nagasaki, thus becoming the first "atomic vets." Over 350,000 women served with a peak strength of 271,000 representing 2% of the personnel in uniform, compared to the approximately 15% now in the military. Women, mostly nurses, were taken prisoners of war by the Japanese when Bataan and Corregidor fell and were interned in the Philippines for four years.

Following the war, there was a swift collapse of the alliance against Hitler with a failure to agree on peace terms, the partition of Germany and the beginning of the Cold War which was to last until 1991.

Reference: www.va.gov/oaa/pocketcard/worldwar_summary.asp

Cold War “Atomic Veterans”

- Cold War refers to the period of tension between the US and its allies and the Soviet bloc from the end of WW II in 1945 until the collapse of the Soviet Union in the 1990s
- Major fear of the Cold War was nuclear war with associated health concerns about exposure to ionizing radiation

The Cold War generally refers to the period of tension between the U.S. and its allies and the Soviet bloc from the end of World War II in 1945 until the collapse of the Soviet Union in the 1990s. A major fear of the Cold War was nuclear war with associated health concerns about exposure to ionizing radiation.

By law the Defense Special Weapons Agency (DSWA) is responsible for determining radiation dose estimates for these groups, sometimes referred to as "atomic Veterans". The average exposure for these Veterans as estimated by the DSWA is relatively low, with less than 1% exceeding the current annual occupational limit of 5 rem (although many Veterans question the accuracy of these official doses).

Generally, no dose of radiation is considered to be safe from the risk for neoplastic transformation. On the other hand, a minimum or threshold dose of radiation generally is felt to be necessary for clinically significant nonneoplastic tissue or organ damage.

Reference: www.va.gov/oaa/pocketcard/coldwar_summary.asp

Cold War *“Atomic Veterans”*

- Approximately 200,000 US Service personnel performed occupation duties in Hiroshima and Nagasaki following the atomic bombing of Japan
- Similar numbers of service members participated in atmospheric nuclear weapons testing from 1945 to 1962

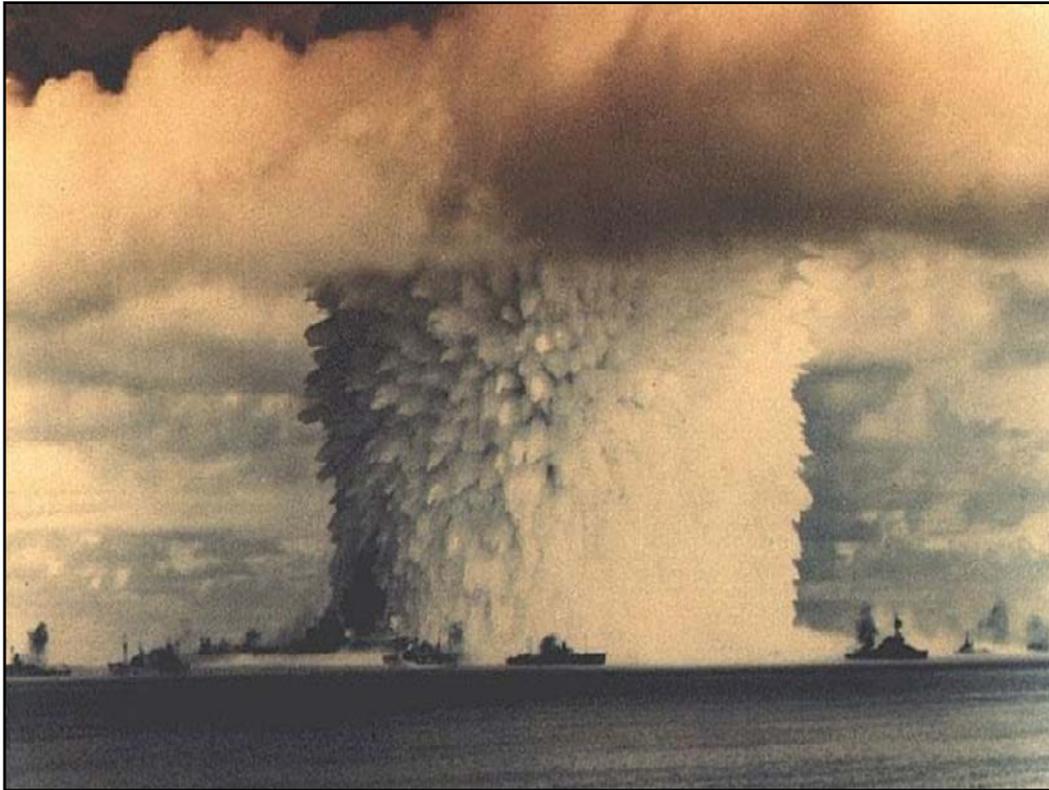


Nuclear testing at Bikini Atoll

Bikini Atoll is one of the 29 atolls and five islands that compose the Marshall Islands. These atolls of the Marshalls are scattered over 357,000 square miles of a lonely part of the world located north of the equator in the Pacific Ocean. They help define a geographic area referred to as Micronesia.

Reference: www.bikiniatoll.com/

Image: <http://www.amphilsoc.org/library/exhibits/treasures/images/abomb2sm.jpg>



Nuclear testing at Bikini Atoll

Operation Crossroads was an atmospheric nuclear weapon test series conducted in the summer of 1946. The series consisted of two detonations, each with a yield of 23 kilotons:

1. ABLE detonated at an altitude of 520 feet (158 meters) on 1 July
2. BAKER detonated 90 feet (27 meters) underwater on 25 July.

It was the first nuclear test held in the Marshall Islands.

The series was to study the effects of nuclear weapons on ships, equipment, and material. A fleet of more than 90 vessels was assembled in Bikini Lagoon as a target. This target fleet consisted of older U.S. capital ships, three captured German and Japanese ships, surplus U.S. cruisers, destroyers and submarines, and a large number of auxiliary and amphibious vessels. Military equipment was arrayed on some of the ships as well as amphibious craft that were berthed on Bikini Island. Technical experiments were also conducted to study nuclear weapon explosion phenomena. The support fleet of more than 150 ships provided quarters, experimental stations, and workshops for most of the 42,000 men (more than 37,000 of whom were Navy personnel) of Joint Task Force 1 (JTF 1), the organization that conducted the tests. Additional personnel were located on nearby atolls such as Eniwetok and Kwajalein. The islands of the Bikini Atoll were used primarily as recreation and instrumentation sites.

Reference: www.history.navy.mil/faqs/faq76-1.htm

Image: http://en.wikipedia.org/wiki/Image:Atombombentest_Crossroads-Baker.jpg

Cold War “Atomic Veterans”

- Exposure to radiation has been associated with a number of disorders including leukemia, various cancers, and cataracts
- Unique Health Risks
 - Nuclear Testing
 - Nuclear Cleanup

Largely as a result of epidemiological studies of Japanese atomic bomb survivors, exposure to radiation has been associated with a number of disorders including leukemia, various cancers, and cataracts

Information for Veterans, their families and others about VA health care programs related to ionizing radiation issues.

Ionizing Radiation Information:

- Depleted Uranium & Health Pocket Guide For Clinicians (May 2007)
- Ionizing Radiation Newsletter Sept 2006
- Ionizing Radiation Newsletter 2006
- Ionizing Radiation Handbook 2006
- Ionizing Radiation Newsletter 2005
- Ionizing Radiation Poster 2004
- Ionizing Radiation Briefs 2004
- Ionizing Radiation Newsletter 2004
- Ionizing Radiation Fact Sheet 2003
- VA Radiation Program Information
- Ionizing Radiation Newsletter February 2004
- www.va.gov/VHI

To download these documents go to: www1.va.gov/irad/

Cold War “Atomic Veterans”

Every VA medical facility has a registry physician for Agent Orange, Gulf War, and Ionizing Radiation - a resource for additional information

Atomic Veterans are eligible to participate in the VA's Ionizing Radiation Program. This includes the opportunity to have an Ionizing Radiation Registry Examination performed and special eligibility for treatment of conditions that the VA recognizes as potentially radiogenic by statute or regulation whether or not they have had a radiation compensation claim approved.

For further information about VA examination and treatment of atomic Veterans or other Veterans exposed to ionizing radiation in service, please contact the Office of Public Health and Environmental Hazards (13), VA Central Office, telephone 202-273-8575, fax 202-273-9080. Veterans' questions regarding radiation compensation claims should be addressed to the appropriate VA Regional Office, telephone 800-827-1000.

Reference: www.va.gov/oaa/pocketcard/coldwar_summary.asp