

# The Bulletin

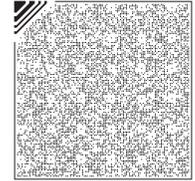
Blinded Veterans Helping Blinded Veterans



March-April 2020



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**Cover Photo:** Seated, in center, President Dr. Thomas Zampieri presents legislative priorities at BVA testimony February 26. Left to right, BVA member Russell Nelson, National Secretary Danny Wallace, Executive Director Joe Bogart, Director of Government Relations Don Overton, Blind Veterans UK Chief Scientific Officer Dr. Renata Gomes, and BVA Legislative Committee Member Dr. Robert Mazzoli surround him.

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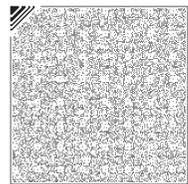
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## President's Page

by Tom Zampieri

On March 28, 2020, we celebrated BVA's 75th anniversary. On behalf of our Board of Directors and National Headquarters, I encourage all regional groups and chapters to plan events this spring to raise awareness about the organization.

Many thanks to our website subcommittee members and staff for their weekly updates to the BVA website. These significant changes have improved both accessibility and content. Please be sure to encourage your regional group members to utilize this as an important resource. We are also working with Thrive CE to create a mobile application for our membership with various documents and resources available at their fingertips.

Our Director of Government Relations, Don Overton, worked closely with the Government Relations Committee to prepare the annual testimony that we presented orally on February 26. Blind Veterans UK's (BVUK) Dr. Renata Gomes, Chief Scientific Officer, joined us February 23-28 as we emphasized the need for an increase in ocular trauma research and technology innovations.

BVUK invited me to London on March 4 to announce the new Veterans Research Program, which BVA will be directly involved with in making key international partnerships with other professional medical and research associations. We are also working with senior UK defense officials, the Prime Minister's office, the British Embassy in Washington, senior Department of Defense officials, and VA Research and Development to bring more attention to the goals of vision restoration research, advancing new adaptive technologies, improving care of ocular

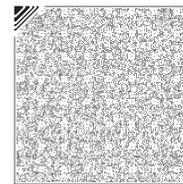
injuries on the battlefield, and the sharing of best practices.

We welcome Stuart Nelson back as our Director of Public Relations and look to him for his extensive historical knowledge of the organization. We ask any BVA member or family member of a blinded veteran to send us any historical documents—photos, letters, or military hospital records—for our archives and insight into our World War II founding and early members. We would like to display these archives at the Convention in August, in the **Bulletin**, and on the website.

We ask regional groups to please follow the bylaw requirements when submitting all required documents on minutes, finances, and the election of officers to BVA Headquarters in a timely manner. Also, please work with our staff in submitting membership changes within your regional groups. If members move or if they are deceased, our headquarters must receive that critical information quickly so that records are updated, apportionment checks are accurate, and delegate votes reflect accurate numbers of members in each regional group.

Due to the national emergency relating to COVID-19 (Coronavirus), our BVA Board of Directors voted to allow our regional groups the flexibility of holding teleconference business meetings this spring. While physical meetings of more than ten people are discouraged, we encourage our regional groups to engage all their members during this time to prevent further isolation.

I extend my appreciation to our board members, welcome our new staff, and thank our existing staff for the commitment and dedication to our mission of serving our members and caregivers.



## Executive Director's Message to Members

By Joe Bogart

Happy Spring greetings to our BVA family and friends and a happy 75th birthday to our wonderful Blinded Veterans Association. For three-quarters of a century, our outstanding organization has boldly led the way, serving as ambassadors and mentors to all veterans and families coping with sight loss.

We always look to great leaders throughout history as role models to emulate. Throughout my service, I incorporated the effective teachings of my leaders into my own leadership style. I looked up to some great mentors that served their troops, the unit, and our country well. Within BVA, we still see outstanding service and leadership in our members.

That service and leadership starts at the local level in our regional groups. We all know of figures in our regional groups that have contributed in ways to benefit and advance blind rehabilitation, employment, and their own regional group. Make sure you recognize them by nominating that leader for the Irving Diener Award this year by April 17.

We have brothers and sisters who have worked hard to overcome the obstacle of blindness and continue successfully in employment and daily life. These outstanding leaders may have gone on to run their own businesses, work for VA, or be head of their households. A host of other achievements and achievers are out there as well.

These leaders truly embody the spirit and determination inherent in overcoming obstacles and inspiring others to be more, do more, and serve more.

We all should know a service-connected member that does just that so take it upon yourself to nominate that blinded veteran for the Major General Melvin J. Maas Achievement Award by April 17.

All inspirational leaders are volunteers as well because they put in the extra effort to do, serve, and mentor just a little bit more. We have volunteers who do what it takes to serve our members, know the VA system, and go that extra mile. Therefore, we must recognize and nominate those who serve consistently and with distinction for the David L. Schnair Award by April 17.

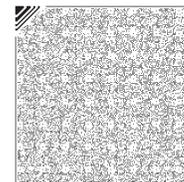
Throughout almost 13 years of membership in BVA, I have been inspired by my fellow members for their amazing continued efforts to go above and beyond regular responsibilities as leaders of, and for, this organization. Please take a moment to nominate those who have inspired you in your regional group, as a fellow blinded veteran, and as a volunteer. I would not be here without them and without you.

Thank you for continuing to allow me to serve as YOUR Executive Director.

### Did You Know?

You don't have to be in a management position to be a leader, leaders are found throughout all levels in an organization.

Retrieved from: [https://www.kings.edu/admissions/adult/Leadership\\_Fast\\_Facts](https://www.kings.edu/admissions/adult/Leadership_Fast_Facts)



# Legislative Update

By Don Overton



We've been busy preparing to present our annual testimony

before a joint session of the Senate and House Veterans' Affairs Committees on February 26, 2020.

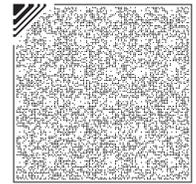
Our BVA President delivered our organizational priorities for the second session of the 116th Congress, which includes ensuring that VA implement caregiver benefits for catastrophically disabled veterans of "ALL" war eras—mandating that eligibility criteria be inclusive of caregivers for blinded veterans; enacting H.R. 3504 modernizing VA's Specially Adapted Housing (SAH) grant program—mandating that eligibility criteria be inclusive of legally blind veterans; enacting H.R. 1199 mandating VA's compliance with website accessibility as required by Section 508 of the Rehabilitation Act, as amended by the Workforce Investment Act of 1998 (Public Law 105-220); enacting H.R. 4589 making permanent the authority of VA's Secretary to award grants for the transportation of rural veterans to medical care; supporting and urging swift Senate passage of H.R. 4920, which will continue VA contracting with AbilityOne programs that employ blinded and visually impaired veterans; supporting adequate funding of Veterans Health Administration Blind Rehabilitation Services; supporting improved programs and services for women veterans; supporting Fiscal Year 2021 appropriations of \$30 million for the Department of Defense Congressionally Directed Medical Research Program for vision, strengthening the "ONLY" research program focused on prevention and

treatment of combat-related ocular trauma and Traumatic Brain Injury (TBI) visual dysfunction; calling upon Congress, VA, and DoD to request that the Assistant Secretary of Defense for Health Affairs— working with our United Kingdom (UK) Defence Medical colleagues, Universities, and non-profit associations—sign a five-year agreement establishing a Joint International Ocular Trauma Task Force; and urging Congress to mandate DoD Defense Health Agency compliance with Section 703 of the National Defense Authorizations Act (NDAA) (Public Law 114-328) for Fiscal Year 2017 requesting the designation of four ocular trauma centers.

The Government Relations Team during testimony week consisted of Dr. Thomas Zampieri, Dr. Renata Gomes (Head of Research and Innovation, Blind Veterans UK), Dr. Robert Mazzoli (BVA Government Relations Committee), Danny Wallace (BVA National Secretary), and Russell Nelson (BVA Operation Peer Support). The week included meetings with VA Rehabilitation Research and Development Services, the Defense Health Agency, the British Embassy, Congressional offices, and the National Eye Institute.

We welcomed a new Chairman of the Senate Veterans Affairs Committee, U.S. Senator Jerry Moran (R-KS). After decades of long battles, the 2020 NDAA included a phased elimination of the Survivor Benefit Plan (SBP) Dependency Indemnity Compensation (DIC) "Widows Tax" offset. This legislative victory finally allows greater financial freedom for affected beneficiaries.

On behalf of BVA, thank you for your continued membership. We look forward to our achievements in the year to come.



# Milestone 75th Gathering Fast Approaching

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You are invited to BVA's 75th National Convention August 17-21, 2020 in the Nation's Capital. Hotel Reservations:

**Hyatt Regency Capitol Hill Hotel,  
400 New Jersey Avenue NW, Washington,  
DC, 20001.**

Call **202-737-1234** or visit <https://www.hyatt.com/en-US/group-booking/WASRW/G-BVA9> by **Friday, July 24, 2020** to use code **G-BVA9** for special BVA rates. The room rate is **\$135.00 single/double, \$160.00 triple, \$185.00 quad, plus tax of 14.95 percent.** Hyatt Regency Capitol Hill offers

complimentary Wi-Fi, a fitness center, a pool, an in-house restaurant, and a coffee shop.

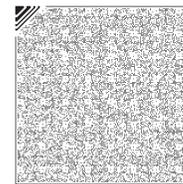
**Registration Packets coming in May!**

**Travel Reservations**

Fly into Ronald Reagan National Airport for transportation to the Hyatt Regency Capitol Hill. The **Ronald Reagan National Airport** code is **DCA**. Please be aware that there are three airports serving the Washington, DC area and provide transportation to and from Ronald Reagan National Airport **only**. Don't miss out! We hope to see you there!



BVA 75th National Convention is just minutes from the Korean War Veterans National Memorial. Dedicated in 1995, the Memorial features 19 stainless steel sculptured statues next to the more than 2,500 images of the conflict on a black granite wall. A second granite wall reveals the Memorial's theme, "Freedom is Not Free."

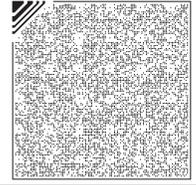


## Important Dates for Regional Groups

- **April 17\*:** Mail credentials forms to regional group presidents, vice presidents, secretaries, and treasurer (three copies each, Article XIV, Section 12c).
- **April 17\*:** Nominations for BVA Certificates of Appreciation, the Melvin J. Maas and Irving Diener Awards, and the David L. Schnair Service Award all due at National Headquarters.
- **May 8\*:** (no earlier than 100 days before convention): Earliest date to mail pre-registration package and official convention notice to potential attendees. Actual 100-day mark before the convention is **May 9**, which is a Saturday this year, requiring a **May 11** mailing.
- **Mid-May\*:** 75th National Convention pre-registration package prepared and sent to printer.
- **Mid-May\*:** 75th National Convention proxy forms mailed but only by request to National Headquarters Administrative Director.
- **May 19:** (no earlier than 90 days before convention): Earliest date to distribute ballots to Districts 5 and 6 (Article VI, Section 3d).
- **May 9:** (no later than 90 days before convention): Envelopes containing proposed bylaw amendments must be directed to National Headquarters and postmarked (Article XIX, Section 1b).
- **May 19:** (no earlier than 90 days before convention): Earliest date to mail proposed bylaw amendments to members in good standing (Article XIX, section 1b).
- **May 19:** (90 days before convention and 60 days following the original mail call referred to above): Nominations for regular elections of Directors of Districts 5 and 6.
- **June 3:** (no later than 75 days before convention): Latest date to mail pre-registration official convention notice.
- **June 8:** (no later than 70 days before convention): Latest date for National Headquarters to mail ballots for regular elections of Directors of Districts 5 and 6 (Article VI, Section 3d).
- **June 15\*:** National Headquarters mails annual financial report forms (three copies) to treasurers of regional groups.
- **July 3:** (no later than 45 days before convention): Ballots for regular elections of Directors of Districts 5 and 6 due at National Headquarters.
- **July 3:** (no later than 45 days before convention): Latest date to mail proposed bylaw amendments to members in good standing.
- **July 8:** (no later than 40 days before convention): Regional group meeting notices to elect convention delegates must be mailed to group members. A copy of the notice must also be mailed to National Headquarters at the same time it is mailed to the group membership.
- **July 13:** (35 days before convention): National Headquarters counts election ballots for regular elections of Directors of Districts 5 and 6.
- **July 27:** (21 days before convention): Completed delegate credentials forms and proxy forms must be postmarked no later than midnight.

# BVA History: First Editorial

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**The B.V.A Bulletin**  
**Issued monthly by the Blinded Veterans Association**  
**22 East 17th Street**  
**New York 3, N.Y.**  
**(Telephone GRamercy 7-1039)**  
**No. 1. Vol. 1.**  
**Lloyd Greenwood,**  
**Editor-in-Chief (pro-tem)**  
**April 15, 1946**

## Editorial

The original intention of the B. V. A. was to take over the **Quadrangle Review** of the official army publication of Old Farms Convalescent Hospital, Avon, Conn. Since the B.V.A. is devoted to the interests of all blinded veterans, regardless of their branch of service, the B.V.A. **Bulletin** seemed more appropriate.

The need for such a publication was demonstrated by the response to over a thousand questionnaires sent out recently from headquarters. The replies to the questionnaires have strikingly shown that there is a great lack of information concerning the adjustment of pensions, conversion of insurance, and the proper way to make application for the benefits to which all blinded veterans are entitled.

If you aren't happily placed or haven't received all the benefits to which you are entitled under Federal and State Laws, it will help if you will let us know immediately. The B.V.A. was organized to resolve your problems quickly and attentively. It was organized with that as one of its main objectives. It is already in a position to facilitate your dealings with the Veterans

Administration because it has learned the correct methods of making application, the proper forms to use, and is in constant touch with the Veterans Administration on hundreds of problems similar to your own.

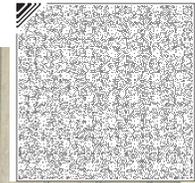
We are trying to make the letters "B.V.A." stand for something—Brains—Vision—Ambition, perhaps as much as anything. Only by using these three qualities can we prove our use to the general public.

If you send in your own problems and your own solutions, you are not only helping the Veterans Administration to help you—and millions of other veterans—but you lend a hand to one of your friends who may be facing the same problems as you.

The B.V.A. asks only for your interest, your cooperation, and a little patience. If your letters are not immediately answered, it is only because we are frightfully understaffed. Instant action is taken on every request, but it takes some time to get the proper information from the proper departments and authorities. If you are not already a member, the sooner you join, the sooner we can increase our staff and our office space. We need a 100% membership to be able to give you a 100% assistance. The B.V.A. has no political affiliations – no affiliations of any kind.

It was started by blinded veterans, is run by blinded veterans for the interest of blinded veterans and for the interest of the blind throughout the world. Your membership will help, many miles of red tape ago . . . . By the next anniversary, the BVA will have many more things to remember. Let's hope the remembering in 1948 will be as pleasant . . . .

**Retrieved from the first BVA Bulletin in April 1946.**



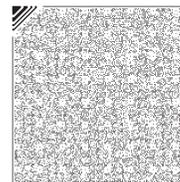
Among BVA's treasure trove of photographs is one depicting four World War II blinded veterans feeding a deer at the Philadelphia Zoo in what is believed to be late 1945. Left to right standing, Joseph Lysak, Alfred Therrien, and Arthur Schultz. Seated in the middle, John Westmoreland. Lysak and Therrien were known BVA members at the time, having been present at the March 28, 1945 meeting at Avon Old Farms Army Convalescent Hospital to formally establish the organization. Al Therrien was employed at the Catholic Guild for the Blind (later known as the Carroll Center) directed by Father Thomas Carroll. He also participated in several Iowa City TEE Tournaments in the early 2000s and passed away in 2014.

## TSA Rules for REAL ID

Beginning on October 1, 2020, all air travelers over 18 years of age will need a REAL-ID compliant driver's license, state-enhanced driver's license, or other acceptable form of ID – to include government-issued passports and government-issued ID cards such as passports and military ID.

REAL ID compliant cards should have a star at the top. Contact your state's driver's license agency on how to obtain a REAL ID compliant card. If you have an Active Duty or Retiree Military ID card, this will not affect your ability to use those cards to travel by air within the U.S.

Visit <https://www.tsa.gov/real-id>.



# Operation Peer Support News

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**Operation Peer Support (OPS) is a program designed by the Blinded Veterans Association to assist blind and visually impaired veterans and their families with educational resources and adaptive sports in order to regain independence, social skills, and confidence through rehabilitation.**

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## Steamboat Springs

By Kennan Horn

Operation Peer Support (OPS) partnered with the Steamboat Adaptive Recreational Sports (STARS) winter program in mid-January to send eight members for three days of skiing and snowboarding in Steamboat Springs, Colorado. The blinded veterans were Mark Wilson, Marlene Davis-Lilly, Roosevelt Moring, Calvin Poole, Hugo Gonzalez, and new members Zack Tidwell and Matt Hennigsmith. The group was led by Sergeant-at-Arms and OPS Committee Chairman, Ken Horn (myself), and sighted guide, Command Sergeant Major Kevin McGovern, U.S. Army (Ret).



Skiing, snowboarding, and hot springs proved to be a successful blend for eight blinded vets enjoying winter attractions in Steamboat Springs, Colorado.

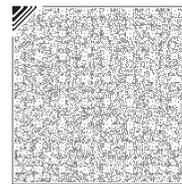
Our group was the first to stay in the new Steamboat Stars Ranch facility, located only minutes from the slopes and downtown Steamboat Springs. The STARS staff were completely hospitable and professional. Each veteran had two instructors to assist them with learning to ski, snowboard, or simply improve the skills they possessed. All were exceptional instructors and very patient.

One of my snowboarding instructors was Paralympic Gold and Bronze medalist Noah Elliot. As bad as I felt after falling so much the first day, there was no way I'd let this opportunity go to waste. I was glad I stayed with snowboarding since I saw the most improvement the second day.

Hugo Gonzalez used to surf in Puerto Rico so he chose to snowboard as well. Hugo saw a great deal of success on the slopes. Zach Tidwell learned to ride the "nowGo," which is something like a bike with skis and no seat. Everyone else stuck to skiing and had a wonderful time.

After the second day, we went into town to enjoy the natural hot springs. Everyone enjoyed its therapeutic effects after a couple of physical days of skiing. New OPS member Matt Hennigsmith, told me: "I doubt I will ever forget who my roommates were this week."

Kevin McGovern served as my First Sergeant in two different Army units and was a logical choice in helping lead this motley crew of blinded veterans.



## Recent and Upcoming Events

### February-March 2020

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Members of our Operation Peer Support Program participated in the 2020 Congressional Advocacy and Vision Research Conferences, which were two events in Washington, DC. During these events, five OPS veterans (two for the first and three for the second event) advocated for Department of Defense vision research with Legislative Representatives, the Department of Veteran Affairs, and visited Walter Reed Hospital. This event included airfare, lodging, ground transportation, and meal expenses for OPS veterans.

### April 2020

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OPS looked forward to sponsoring two BVA members in the Heroes New Hope Foundation Veterans Turkey Hunt April 21-25. Travel, lodging, license fees, tags, meals, and a professional guide were included. Unfortunately, blinded veteran participation in the event had to be suspended for this year due to COVID-19.

## A Letter From BVA National President

This year is our 75th anniversary. It happened as a result of a meeting called by several veterans who were recuperating at Avon Old Farms Convalescent Hospital in Connecticut. We wish to honor and remember as many as possible of our current World War II membership who are part of this Greatest Generation. Countless events will occur this year marking the end of World War II in 1945.

While many of the heroes of that war have passed on, there are still some who walk with



OPS participant Zachary Tidwell, aided by his sighted guide, traversed the slopes at Steamboat Resort using a nowGo, essentially a bike with skis but without a seat.

“I didn’t really know what to expect. I would have never guessed you guys would be so crazy!” Kevin said. He put his First Sergeant hat on and went right back to leading soldiers. He was a tremendous help and it wouldn’t have been the same without him.

Everyone left Steamboat more tired than when they arrived but full of the energy that only comes with knowing that you can always push yourself a little further than you thought. Strong bonds were made stronger through a common challenge and the idea that we are all better having spent this time together.

us. Visit our American Legion halls and listen to their amazing stories.

BVA will honor these World War II members throughout the year by highlighting special stories and by sharing videos and photographs, especially in August, leading up to the National Convention.

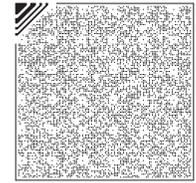
Our Operation Peer Support Committee requests that regional groups submit to OPS Committee Chairman Ken Horn an application for World War II members to attend the first three days of the convention. The application will be available in Microsoft Word on the BVA website for downloading and submission. The deadline is May 31.

We hope that up to five members will have applications sent on their behalf. Applicants must confirm that their health

will allow attendance at Tuesday, Wednesday, and Thursday events. We will first recognize them Tuesday at the President's Reception.

BVA is expanding our archives and we need your help. We're asking for stories that shed light on the legacy our World War II members left for us. It is imperative for us to gather these stories now before it is too late.

Please join us in saluting the Greatest Generation of BVA World War II members as we collect these stories! Consider presenting these veterans in your regional group with special recognition and ask them to share their story, a photograph or two, and even a short interview to share with our National Headquarters Public Relations Team.



## Wheelchair Games Celebrate 40 Years

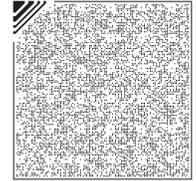
Registration is now open for the VA-PVA 2020 National Veterans Wheelchair games, which occur July 3-8 in Portland, Oregon. The event this year will mark 40 years of competition.

This year's National Veterans Wheelchair Games will feature more than 20 events and more than 650 athletes from across the United States. The games are designed for veterans who use wheelchairs for sports competition.

For more information or to register for this event, please visit <https://www.wheelchairgames.org/>



National Veterans Wheelchair Games logo



## Choose a version of The Bulletin

Would you like to receive a Word, PDF, or CD version of the **Bulletin** as well as a hard copy? Or a combination of all of the above? Are you signed up for our monthly email newsletter? Do you know any members that haven't received their copy? Please let us know by calling BVA Headquarters.

## Blind Rehab Leaps in Leap Year

We've all been there and done that: hospital food. Sometimes it's good but too often it needs help. Understandably, however, is the fact that the hospital kitchens are rarely cooking for just a couple of people. Normally, it's for the whole hospital system. It's a tough job with little thanks but here at Biloxi things are changing.

Starting in March 2020, the Gulf Coast Hospital system's Biloxi Campus will no longer be serving the Blind Rehabilitation Center with the pre-cooked meals that were delivered in the thermal carts. On February 6, a new process was being tried out for the first time: buffet-style meals served on real plates. Using the food warming cart, the food staff revealed a variety of different breakfast items and our choice of meals was served up fresh and hot: bacon, eggs, french toast, biscuits and gravy...a pleasant surprise for all.

According to Darlene Caranna, Chief of Nutrition and Food Services, this new process will be implemented across the campus to give healthier and tastier choices to veterans.

They are also implementing a new software program for developing menus. Caloric values, diabetic considerations, and a more heart-healthy diet are primary concerns.



Cutting-edge food service and quality, buffet style, have built excitement among blinded veterans attending the Biloxi, Mississippi Blind Rehabilitation Center.

Many of the veterans who had breakfast that morning agreed that, all in all, it was a great start. On February 19, all three meals were prepared and served in this manner and the excitement continued to build.

Without a doubt, however, the recent worry over the spread of COVID-19 has driven a temporary wedge into this wonderful innovation. We remain hopeful that very soon once again our veterans at the Gulf Coast BRC will be able to enjoy the creative menu choices generated by this new food concept.

## **NYRG Holds Final Celebration of Decade**

Recognizing the accomplishments of those who passed away, remembering the challenges and efforts to reach this plateau, expressing thanks for achievements, and preparing to embrace the future, BVA life members of the New York Regional Group held their last bread breaking of the decade at the New York Harbor VA Medical Center.

The occasion was a Christmas party on December 20 to coincide with the 90th birthday of the longstanding support group president and advocate, Enrique Sanchez. He claims, and we believe him, to have attended 43 BVA National Conventions consecutively. We salute him for his continuous service.

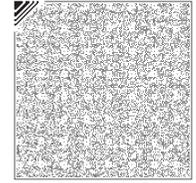
It was a very cold day in New York City with a low temperature and fast-moving winds, normal for New Yorkers in the wintertime. The Christmas party was well attended by 95 percent of the membership and then spouses, caregivers, and guests. The VIST Coordinator and the BROS coordinated the event and their decorations were breathtaking, colorful, and classy. It was a table setting right out of **Harper's Bazaar** Magazine. The food was blessed by regional group chaplain John Morrall.

Shish kabobs were served as an appetizer before the main course, which consisted of barbecued chicken, baked beans, and two different salads.

Everyday, we support the concept of veterans helping veterans. To this end that day, we gave other veterans—low-vision, visually impaired, and those in the mental health clinic—a surprise plate of goodies.

We end this decade with a positive thought in mind: Create a better world for all blinded veterans.

## **BVA Women's Veteran Group**



### **MISSION:**

To support and serve blinded women veteran members of BVA through awareness and advocacy efforts that are impactful to their health and welfare.

### **Women's Veteran Group Committee:**

Monaca Gilmore, Chairman  
Marlene Davis-Lilly  
Jeanie Murphy  
Michaun Harrison  
Elizabeth Holmes

### **Calendar of Events:**

- 2020 WVG national convention meeting, **August 2020, TBD**
- 2020 WVG annual retreat, **September/November 2020, TBD**

For more information contact:

Monaca Gilmore, WVG chairman

EMAIL: [BVAWVG@gmail.com](mailto:BVAWVG@gmail.com)

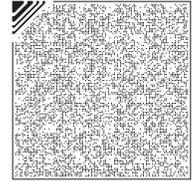
Facebook: BVA Women's Veteran Group

In January 2020, President Tom Zampieri established the BVA Women's Veteran Group and a committee to assist with ensuring that our blind women veteran members are getting valuable resources and their advocacy concerns addressed. We are proud to have the support of our national leadership team and look forward to serving our women veterans. Congratulations and welcome BVA Women's Veteran Group!



## Chaplain's Corner

by Chaplain Johnnie E. Busch, Sr.



As we look at our 2020 calendars, we could be surprised to see that one third of the year has already passed! Hopefully, we are filling these calendars with activities that keep us connected to each other, actively serving others, and striving to improve our own quality of life and that of others in all we do.

One of my great joys has been to help and serve veterans from all walks of life through my weekly volunteer assignment at the Atlanta VA Medical Center. As I do so, I maximize opportunities to learn from others and then to take those skills with me to later benefit my family, friends, and additional veterans with whom I've become acquainted.

These could be social or practical skills that we learn in our rehabilitation programs—life skills, woodshop skills, and orientation and mobility skills are just the beginning. We know from news emanating from our Operation Peer Support groups that many of us hike a portion of the Appalachian Trail, or get on a kayak to traverse the Colorado River, or learn to snow ski.

A fantastic side benefit of engaging in these activities and gaining new skills is what it does for us in a more spiritual sense. We feel better about our lives and feel an uptick in ourselves in areas such as self-esteem, self-confidence, and self-actualization.

Engaging in something new and excelling in that activity, followed by the chance to share it with someone else, does wonders for the individual psyche.

Let us be encouraged and not allow our situation to stop us from doing all that we can. We can do anything that we set our minds to while motivating others to do the same.

You might be wondering what could be out there for you to do and what activities are available in your area of the country. Key persons in all of this are your VIST Coordinators. They should be aware of local opportunities and activities as well as national events like the Golden Age Games, the Winter Sports Clinic, the TEE Tournament, and the Creative Arts Competition and Festival.

I look forward to seeing many more of our veterans out there doing good things. I return to my favorite Carl Bard quote: "Although no one can go back and create a brand new start, anyone can start from now and make a brand new ending."

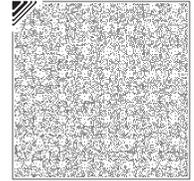
Get up, get out, and be active. Live the life you want because only you can.

May God bless each of us.



# Auxiliary's View

By Patricia Hail, BVAA Reporter and Past National President



## Caregiving vs. Independence

We in the BVA Auxiliary (BVAA) are caregivers for the blind and often for multiple needs. Do we know when we have “crossed the line” of “don’t do for others what they can do for themselves?” It is a fine line, and one that is different for each person. That line can be seen from different perspectives.

To maximize one’s independence is a goal for everyone. It is difficult to achieve, for many reasons, including health, safety, economics, and the unknown. No one knows what level of independence is possible until the person makes the attempt.

Caregivers must first give blind persons the opportunity to try to achieve their own level of independence. As caregivers, we encourage them. VIST Coordinators, Blind Rehabilitation Outpatient Specialists, and Blind Rehabilitation Center staff can help identify tools and skills of accommodation. Personal health and safety are always the primary concern but, if we do not encourage independence, we are promoting dependence of the blind on ourselves as caregivers.

Age makes a difference in independence and caregiving, but wait! It also makes a big difference in the economics and need. The older people are when they become blind, the more opportunity they have had in their lives. They have had their careers, raised their families, and (hopefully) planned for retirement. A person who has become injured while in the military or otherwise, in the prime of life, has not had the same opportunity to achieve these life goals as hoped.

The veteran whose sight is aggravated substantially or lost during military service frequently also loses a spouse within about

two years after coming home. Blindness was not in the bargain. Contrarily, the age-related blind person who has been married for years usually has a caregiver they can hang onto for some time.



So, we all have adjustments to make. They are:

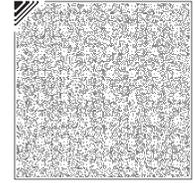
1. Utilize the resources available.
2. Open and encourage “doors of opportunity.”
3. Gently push the blind person toward independence.
4. Listen to their needs and frustrations.
5. Stay strong – and be ready to adjust and be compassionate.
6. Be lovingly firm.

A short story: we went shopping some months ago. My husband made an order and planned to pay for it, then pick it up when it was ready. I stayed long enough to make sure any reading and filling in of blanks was done and told the clerk he would finish. I left to complete the rest of my list. As I finished, my husband called, saying that the clerk wanted to wait until I returned. His feeling of independence was totally shot down. I was furious! I paid for the order and left without saying anything.

What began as an encouragement of independence became devastation to a great man’s dignity. What was a setback for him was also a setback for me.

# From the Veterans Services Staff

By Claudia Baldwin



## Understanding Service Connection for Tinnitus and Hearing Loss

Military service exposes many veterans to noise and increases the probability of incurring hearing loss. In fact, veterans are 30 percent more likely to have severe hearing loss than non-veterans. At our Veterans Services Resource Center, we file claims for Tinnitus and hearing loss. It is important to understand the difference between both conditions and how VA tests for these conditions. The following is needed to establish service connection:

1. A current diagnosis of a hearing condition.
2. Evidence of an event that caused the condition.
3. A medical opinion linking the current hearing condition to the event in service or nexus. This could include secondary issues discussed later in this article.

Tinnitus is a ringing, buzzing, or other noise that originates in the head; it is by far the most prevalent service-connected disability among American veterans. While Tinnitus is common, there are no objective tests to diagnose the condition. Testing consists of simply asking a question during a compensation and pension exam. If the veteran answers “yes,” their response will likely grant service connection for the condition. The maximum level for Tinnitus is ten percent.

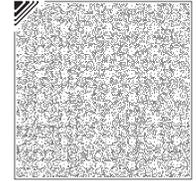
When a veteran becomes service connected for a disability, this allows the veteran to begin receiving additional benefits at VA.

There are specific tests that must be conducted per VA regulations when checking for hearing loss:

1. A state-licensed audiologist must conduct the examination for hearing impairment.
2. Tests must include a controlled speech discrimination test (Maryland Consonant Nucleus Consonant, or CNC Test) and a pure tone audiometry test.
3. VA requires test levels for the ranges of 1000, 2000, 3000, and 4000 Hz for each ear. The lower the score means the better someone can hear the sound.
4. Examinations will be conducted without the use of hearing aids.

Hearing loss is rated differently than most other bilateral conditions because it is rated by the hearing ability of both ears together rather than the right or left sides individually. VA combines the hearing ability of both ears to determine a single rating for hearing loss. Most veterans with hearing loss, even with using hearing aids, find themselves rarely rated over 10 percent. A rating of 30 percent or higher is usually indicative of severely profound hearing loss. For a 100 percent rating, a veteran must be completely deaf in both ears.

When veterans decide to file for a claim for disability compensation, we always advise that they reach out to our Resource Center so that we can properly develop the claim to increase the chance for a positive result.

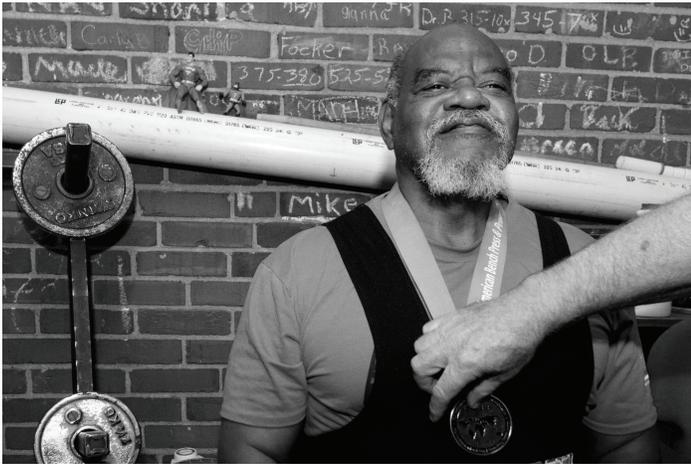


## **BVA Member Overcame Adversity To Become a Champion**

by Stephanie Farr, **The Philadelphia Inquirer**

When Charles King went blind at 39, he gave up—on life, on his pregnant girlfriend, and on himself.

“I said ‘OK God, that’s it. I quit.’ I literally quit and just went out on the streets and joined the homeless,” he said. “I hoped because I was blind, someone would kill me.”



Charles King, Pennsylvania Regional Group, defies all odds as a fit blind powerlifter at age 69.

Going blind and becoming homeless wasn’t the toughest battle King would have to face. In 2000, after he got clean and was reunited with his family, King’s 14-year-old daughter died. Five years after that, he was diagnosed with cancer.

And yet, somehow, he’s lifted himself up, both mentally and physically. Today, the 69-year-old Philadelphian is one of the oldest blind powerlifters in the world, having finished first in his weight and age class last month at the United States Association

of Blind Athletes National Powerlifting Championships in Colorado Springs with a 248-pound squat, a 236-pound bench press, and a 341-pound dead lift.

“All of a sudden I expect something of myself,” King said. “The world doesn’t expect anything of someone who is blind, but I am doing something nobody can imagine at my age.”

Retrieved from: <https://www.inquirer.com/news/blind-powerlifting-champion-lifted-himself-out-of-turmoil-20190818.html>

## **Bob Brown: Integrity, Kindness, Devotion to Fellow Blinded Veterans**

by Stuart Nelson

Last fall, on September 9, BVA lost another of its stalwart, dedicated members. The member was one who was constantly seeking out ways to serve others. In the case of Robert (Bob) Burton Brown, that dedication was matched by professionalism that was enhanced by a multitude of talents. He was a true hero to the members and national headquarters staff of the 1980s, 1990s, and early 2000s.

Many who knew Bob Brown, and recently learned of his passing at age 83, are grieving his loss. They knew him as a veteran of the U.S. Army who served in Korea after the war as a Chinese translator. Following his military service, he graduated from Georgetown University with a bachelor’s degree in Political Science. They also knew him as a man who could talk with nearly anyone or any group on their level and from their perspective outside of his own comfort zone.

Bob was the BVA Director of Development

in 1985. He worked closely with an agency that provided creative direct mail packages that raised relatively large sums. Bob wrote much of the copy for those packages, creating storylines about blinded veterans who had been helped on their road to success in life through their connection to and membership in BVA.

“He was not only an ace copywriter, but author of two books used in those fundraising efforts,” a former colleague recently reflected.

The books, self-published by BVA, were a two-volume set. The first was entitled **Our Fight Against Darkness** and the second **The Fight Goes On: Perspectives on the Blinded Veteran Experience and the Work of the Blinded Veterans Association**.

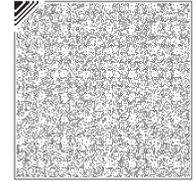


Bob Brown, third from left, was a fixture at BVA National Headquarters in the 1980s and 90s. Left to right, then Director of District 2 David May and his wife, Christina, with Bob’s wife, Joy.

“While I may have taught Bob a small thing or two about fundraising, he taught me by example about fortitude, sacrifice, compassion, loyalty, forthrightness, kindness, and the ultimate decency of human nature,” the same former colleague mused.

“More years went by and Bob retired, but I never walked past his old office without

missing him for his advice, his knowledge, his optimism, his friendship, and his spirit.”



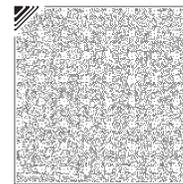
Bob moved on after his stint as Director of Development and assumed the directorship of BVA’s Field Service Programs. In that position he met frequently with those who took over the fundraising efforts. The two parties frequently met to discuss expansion of field service activities, opportunities to reach more blinded veterans, and how to better serve BVA members. He was a BVA employee from 1982 until his retirement in 1999 and attended every national convention during his tenure.

Bob was open about his own personal struggle with blindness and enjoyed speaking with student groups at George Washington University, just blocks from the Headquarters offices. He frequently took other veterans with him to such engagements. Despite the struggle, he never let adversity get the best of him as he pursued a master’s degree at George Washington, studied poetry and music as an avocation, and solved crossword puzzles—all on top of an extraordinarily hectic schedule.

Bob married Helena Joy Ueno in August 1960 and they made their home in Cheverly, Maryland. He was employed with Public Employment Service and later with the Department of Agriculture before working for BVA. He was preceded in death in 2009 by Joy, whom he cared for during a long illness. The couple is survived by two sons and two daughters.

## **BVA Members Invited For Iowa TEE**

VA and Disabled American Veterans (DAV) invite veterans with a disability to attend the 27th Annual Disabled Veterans TEE (Training, Exposure, Experience) Tournament (NDVTEE) September 13-18, 2020 in Iowa City, Iowa.



The NDVTEE Tournament is open to male and female military service veterans with qualifying disabilities. Veterans who have inpatient or outpatient status at a VA Medical facility will have priority.

This event aims to provide disabled veterans with an opportunity to develop new skills and strengthen their self-esteem through golf as well as other adaptive sports.

If you are interested in attending, please visit [www.tee.va.gov](http://www.tee.va.gov) for complete information about the NDVTEE Tournament and to register for this week-long event.

## NIH, NIST Researchers Use Artificial Intelligence for Quality Control of Stem Cell-Derived Tissues

Researchers used artificial intelligence (AI) to evaluate stem cell-derived “patches” of retinal pigment epithelium (RPE) tissue for implanting into the eyes of patients with age-related macular degeneration (AMD), a leading cause of blindness.

The proof-of-principle study helps pave the way for AI-based quality control of therapeutic cells and tissues. The method was developed by researchers at the National Eye Institute (NEI) and the National Institute of Standards and Technology (NIST) and is described in a report appearing online today in the **Journal of Clinical Investigation**. NEI is part of the National Institutes of Health.

“This AI-based method of validating stem cell-derived tissues is a significant improvement over conventional assays, which are low-yield, expensive, and require a trained user,” said Kapil Bharti, Ph.D., a senior investigator in the NEI Ocular and Stem Cell Translational Research Section.

“Our approach will help scale up manufacturing and will speed delivery of tissues to the clinic,” added Bharti, who led

the research along with Carl Simon Jr., Ph.D., and Peter Bajcsy, Ph.D., of NIST.

Cells of the RPE nourish the light-sensing photoreceptors in the eye and are among the first to die from geographic atrophy, commonly known as “dry” AMD. Photoreceptors die without the RPE, resulting in vision loss and blindness.

Bharti’s team is working on a technique for making RPE replacement patches from AMD patients’ own cells. Patient blood cells are coaxed in the lab to become induced pluripotent stem cells (iPSCs), which can become any type of cell in the body. The IPS cells are then seeded onto a biodegradable scaffold where they are induced to differentiate into mature RPE. The scaffold-RPE “patch” is implanted in the back of the eye, behind the retina, to rescue photoreceptors and preserve vision.

The patch successfully preserved vision in an animal model and a clinical trial is planned.

The researchers’ AI-based validation method employed deep neural networks, an AI technique that performs mathematical computations aimed at detecting patterns in unlabeled and unstructured data. The algorithm operated on images of the RPE obtained using quantitative bright-field absorbance microscopy. The networks were trained to identify visual indications of RPE maturation that correlated with positive RPE function.

Those single-cell visual characteristics were then fed into traditional machine-learning algorithms, which in turn helped the computers learn to detect discrete cell features crucial to the prediction of RPE tissue function.

The method was validated using stem cell-derived RPE from a healthy donor. Its effectiveness was then tested by comparing

iPSC-RPE derived from healthy donors with iPSC-RPE from donors with oculocutaneous albinism disorder and with clinical-grade stem cell-derived RPE from donors with AMD.

In particular, the AI-based image analysis method accurately detected known markers of RPE maturity and function: transepithelial resistance, a measure of the junctions between neighboring RPE; and secretion of endothelial growth factors. The method also can match a particular iPSC-RPE tissue sample to other samples from the same donor, which helps confirm the identity of tissues during clinical-grade manufacturing.

“Multiple AI-methods and advanced hardware allowed us to analyze terabytes of imaging data for each individual patient, and do it more accurately and much faster than in the past,” Bajcsy said.

“This work demonstrates how a garden variety microscope, if used carefully, can make a precise, reproducible measurement of tissue quality,” Simon said.

The work was supported by the NEI Intramural Research Program and the Common Fund Therapeutics Challenge Award. The flow cytometry core, led by the National Heart, Lung and Blood Institute, also contributed to the research.

NEI leads the federal government’s research on the visual system and eye diseases. NEI supports basic and clinical science programs to develop sight-saving treatments and address special needs of people with vision loss.

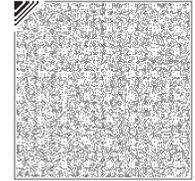
For more information, visit <https://www.nei.nih.gov>.

About the National Institutes of Health (NIH): NIH, the nation’s medical research agency, includes 27 Institutes and Centers and is a component of the U.S. Department of Health and Human Services. NIH is the primary federal agency conducting and supporting basic, clinical, and translational

medical research, and is investigating the causes, treatments, and cures for both common and rare diseases.

For more information about NIH and its programs, visit <https://www.nih.gov/>. NIH... Turning Discovery Into Health®

Retrieved from <https://www.nih.gov/news-events/news-releases/nih-nist-researchers-use-artificial-intelligence-quality-control-stem-cell-derived-tissues>.



National Institutes of Health logo

## Former BVA Staff Member Remembered

BVA National Headquarters was saddened to learn of the sudden passing of Thedra Thornhill-Johnson on February 2. Thedra was employed from November 2015 until September 2018 as a Field Service Program Administrative Assistant at the Alexandria headquarters but spent most of her time at the Board of Appeals Office in Washington, DC with both Brenda Davis and Wanda Grover.

“We were so very sorry to hear of Thedra’s passing,” said Wade Davis, BVA National Veterans Care Review Specialist. “She was sweet, knowledgeable, and dedicated to helping our veterans with claims and appeals with thoroughness and kindness—something that many veterans noticed.”

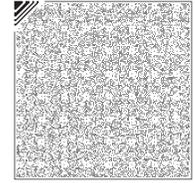
Thedra is survived by four children, who were her greatest love, along with both of her parents. Funeral services were held February 11 in Manassas, Virginia.

## Recalculating and Reframing: Blind Veterans Show the Way

The essence of the VA Health initiative aims to encourage veterans to take charge of their health and wellness. The best place to find examples of this targeted ownership is to examine the lives and trials of those who have struggled mightily with debilitating setbacks, including blindness and multiple medical challenges. Here are the values that emerged in a project of asking 32 blind veterans where they found meaning and hope:

1. Embracing their blindness and other disabilities or special needs.
2. Learning from another veterans' attitudes, often with more severe disabilities.
3. Enjoying helping others and the friendship of other veterans.
4. Expressing a strong personal faith as critical to their journey.
5. A profound appreciation of the blind rehab staff and the environment of kindness.
6. A thankfulness for the support they have at home.
7. A sense of humor in the ability to laugh

8. A growing sense of self-reliance despite visual impairment.
9. A mental and emotional acceptance or embrace of their conditions. As several put it: "We moved from 'Why me?' to 'Why not me?'"
10. A quiet joy in their discovery of an increasing self-reliance and resilience.
11. An inner peace with one's self.



If, perhaps, you have found some beauty here in these veterans' stories, or even more in a glimpse of your possibilities, then share them with others. Sharing helps us grow in resilience and love. Here are a few principles these veterans have embraced. See if any of these feel right to you—for your own journey.

- Recognize that all perception is selective. We do not see the world as it is but as we are, through the lenses of our life history and values. Our vision is always limited. We create the world we live in by what we focus upon. Becoming aware or mindful is the critical key.
- Know that you create your own world

## National Veterans Summer Sports Clinic

BVA strongly encourages veterans with sight loss to experience the adventure sports and recreational activities to be offered at the upcoming National Veterans Summer Sports Clinic in beautiful San Diego, California. Sailing, surfing, kayaking, and cycling are just a few of the opportunities that will be available at the September 20-25, 2020 event.

Registration began February 10 and will continue through May 1. The clinic promotes the value of rehabilitation utilizing

a variety of summer leisure activities and adaptive sports. Its mission is to provide a training ground for both veterans and health care providers in bringing about a strong foundation that will further each veteran's dedication to the overall rehabilitation, health, and pursuit of a healthy lifestyle.

For more information and periodic updates, visit <https://www.blogs.va.gov/nvspse/national-veterans-summer-sports-clinic/>.

by what you focus upon; find and pursue your own dreams. Accept that your own journey is very unique, unlike anyone else's. Know that it is okay to be imperfect, flawed, and different.

- In whatever you do, stretch yourself and do your best. Push your limits. Try to exceed your expectations and those of others. Remain curious.
- Persist. Expect challenges and setbacks. We learn by our missteps and mistakes, by our failures and flaws. Know that failure is part of the game of life. Develop an internal GPS that can "recalculate and reframe."
- Never ask the question "why me?" Each of us is dealt in life a different hand of cards. What counts is what we do with the cards we receive and how we play them. To complain about what happens is to sit on a "pity porch."

Source: **Blind Veterans Coping with Loss**, Amazon, 2020, Paschal Baute, free eBook

## VA National Cemetery Administration Benefits

By Lawrence A. Provost, Outreach Officer, National Cemetery Administration

Veterans deserve to be honored and appreciated by those to whom they have given so much of their lives to protect. They are owed a debt that the nation can never fully repay. VA offers one way to honor and memorialize U.S. veterans through the National Cemetery Administration's ("NCA") 142 national cemeteries.

At no cost to the family and after application and approval, burial benefits available to veterans in a VA National Cemetery include:

- Gravesite at a national cemetery for the veteran, spouse, and certain dependents

(i.e. minor children, adults under their parents' court-ordered care, etc). If the spouse passes away first, the same benefit still applies.

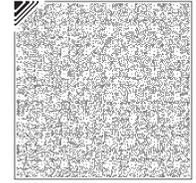
- Government headstone or marker
- Burial flag (to drape the casket or accompany the urn of a deceased veteran who served honorably in the U.S. Armed Forces)
- Presidential Memorial Certificates upon request (an engraved paper certificate, signed by the current President, for as many family members as desired)

All veterans can also receive a ceremonial salute provided by the Department of Defense or volunteer service organizations.

The opening and closing of the grave, grave liner (i.e. vault), and perpetual care of the gravesite are provided in a VA National Cemetery. Together, these benefits add up to thousands of dollars of savings for a veteran's family. If a veteran chooses to be buried in a private cemetery, the government headstone, government marker, or a bronze medallion showing the veteran's branch of service may be provided free of charge. The medallion may only be affixed to a privately purchased headstone in a private cemetery. If buried in a private cemetery, veterans are still eligible for a burial flag and Presidential Memorial Certificates.

Ideally, these benefits should be planned and secured while the veteran is still alive.

Pre-Need Eligibility is a VA program designed to help veterans and their families establish eligibility for these burial services. Once burial benefits are approved, place the letter in a safe location (safety-deposit box) and inform your family where the letter is located. Pre-Need Eligibility is the best, most effective way to establish burial or memorial benefits.



- Fill out a VA form 40-10007. You can print out a form and get more information here: <https://www.cem.va.gov/pre-need/>
- Fax the form with your DD-214 or other discharge/military paperwork to this number: **1-866-900-6417**, or mail the application and a copy of your DD-214 to the address on the form. Place a follow-up call to **1-800-535-1117**

Visit [www.cem.va.gov](http://www.cem.va.gov) for more information about VA burial and memorial benefits.

## VA BRS Issues Action Plan For Residential BRCs

Effective immediately and until further notice, all VA Blind Rehabilitation Centers (BRCs) will suspend and postpone admitting patients in order to limit COVID-19 exposure risk for veterans being treated in and traveling to or from these facilities. All future and pending BRC admissions are currently postponed.

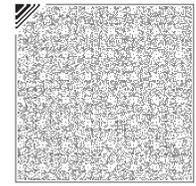
The directive was released on March 13 by Michael Williams in the Blind Rehabilitation Service National Program Office during

the stays of many blinded veterans in one of the 13 BRCs nationwide. Veterans who were inpatients at the time were evaluated and managed for proper discharge planning.

The directive included the need for a determination and provision for necessary follow-up care, as appropriate, at home by the veterans' VIST Coordinators, or through Telehealth, or other means, for all veterans discharged. It ensured that each discharged veteran be provided with resources as appropriate for their plan of care.

BRC staff members were instructed to not report to work if feeling ill in any way. They were also asked to determine plans for how time and services would be reallocated during the absence of inpatients.

Local VA Medical Center guidance was to be followed regarding infection control measures and maintaining a clean environment in BRCs and patient rehabilitation areas, operating and maintaining outpatient programs through all VA continuum of care clinics, and maintaining utilization of currently scheduled non-VA community care services for blind rehabilitation services.

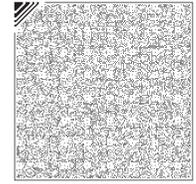


## Did You Know?

Most issues of the **Bulletin** from 1946 until 1955 ran a rather lengthy “Bulletin Board” filled with news and information about individual BVA members—promotions, degrees, marriages, personal accomplishments?

The **Bulletin** also had a mysterious secret informant named “Blinkie” who offered opinion blurbs about current events and often created fun gossip within the organization—and that editor Irv Schloss published Blinkie’s contributions without ever questioning them?

# Coronavirus Updates



Recent concerns regarding COVID-19 (coronavirus) have generated significant public attention. With several confirmed cases in Fairfax County, Virginia, BVA regrettably deems it necessary to take precautions and cancel **Light Up the Darkness** without a reschedule date.

Please find below recommendations from the World Health Organization (WHO) on how to protect yourself and your loved ones during this pandemic.

## Basic protective measures against the new coronavirus

Wash your hands frequently.

Regularly and thoroughly clean your hands with an alcohol-based hand rub or wash them with soap and water.

Why? Washing your hands with soap and water or using alcohol-based hand rub kills viruses that may be on your hands.

### **Maintain social distancing.**

Maintain at least one meter (three feet) distance between yourself and anyone who is coughing or sneezing.

Why? When someone coughs or sneezes, they spray small liquid droplets from their nose or mouth which may contain the virus. If you are too close, you can breathe in the droplets, including the COVID-19 virus if the person coughing has the disease.

### **Avoid touching eyes, nose, and mouth.**

Why? Hands touch many surfaces and can pick up viruses. Once contaminated, hands can transfer the virus to your eyes, nose, or mouth. From there, the virus can enter your body and can make you sick.

### **Practice respiratory hygiene.**

Make sure you, and the people around you,

follow good respiratory hygiene. This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze. Then dispose of the used tissue immediately.

Why? Droplets spread virus. By following good respiratory hygiene you protect the people around you from viruses such as colds, flu, and COVID-19.

### **If you have fever, cough, and difficulty breathing, seek medical care early.**

Stay home if you feel unwell. If you have a fever, cough, and difficulty breathing, seek medical attention and call in advance. Follow the directions of your local health authority.

Why? National and local authorities will have the most up-to-date information on the situation in your area. Calling in advance will allow your health care provider to quickly direct you to the right health facility. This will also protect you and help prevent spread of viruses and other infections.

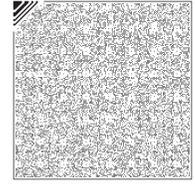
### **Stay informed and follow advice given by your healthcare provider.**

Stay informed on the latest developments about COVID-19. Follow advice given by your healthcare provider, your national and local public health authority, or your employer on how to protect yourself and others from COVID-19.

Why? National and local authorities will have the most up-to-date information on whether COVID-19 is spreading in your area. They are best placed to advise on what people in your area should be doing to protect themselves.

Retrieved from: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

# VA Launches Changes to VHIE



In accordance with the VA MISSION Act of 2018, VA will begin seamlessly and securely sharing health information with individual community providers who are involved in a veteran's care.

The sharing of such information will occur electronically through the already existing Veterans Health Information Exchange (VHIE). Its objective is better health outcomes and higher quality care as a result of better-informed treatment decisions.

Passage of the VA MISSION Act of 2018 was based on the premise that continuity of care is vital and that electronic health information sharing is essential to ensuring that all veterans feel a sense of trust that providers know them and their health issues.

Veterans still have the choice to opt out of VHIE if they prefer that their information not be shared. Prior to the MISSION Act, they needed to opt in or elect to participate in VHIE information sharing.

Health Information Exchanges like VHIE are a common tool used across the healthcare industry to improve continuity of care, reduce duplicative tests, and avoid clinical errors when patients see health care provider from different practices or healthcare networks. VHIE complies with all federal patient privacy laws including but not limited to the Health Insurance Portability and Accountability Act, more commonly known as HIPAA.

The benefits of the new roll out are three-fold:

- An expansion of veterans' access to community care and VA's network of community providers.
- Elimination of the need to send

paper medical records by mail or for veterans to carry their records with them to appointments with community providers.

- Sharing of veterans' medical records by VA via VHIE only when veterans have a scheduled appointment with community providers.

Opting out of VHIE can be accomplished by completing and submitting VA Form 10-10164 to a VA facility's Release of Information Office. The form may also be submitted online through My HealtheVet. Choosing to opt out will not affect one's access to care from community providers although the action could limit their ability to treat effectively if they cannot receive paper copies of a record prior to administering a treatment.

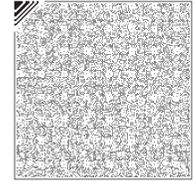
To learn more about what VA is doing under the MISSION Act of 2018, visit [www.MissionAct.VA.gov](http://www.MissionAct.VA.gov).

## Did You Know?

Are you feeling restless? Do you feeling anxious and stressed right now?

Visit <https://emergency.cdc.gov/coping/selfcare.asp> for tips on managing your emotional health.

# Caregiver Corner



## Laughter is the Best Medicine

By Helen Hunter, ACSW, LSW,  
Today's Caregiver

When was the last time you had a really good laugh? The scientific definition of laughing is a “successive, rhythmic, spasmodic expiration with open glottis and vibration of the vocal cords, often accompanied by baring of the teeth and facial expression.” That doesn't begin to tell the story of what laughing does for us, however. The bottom line is that laughing is medically beneficial.

Laughter establishes or restores a positive emotional climate and a sense of connection between two people. In fact, some researchers believe that the major function of laughter is to bring people together – the more social a person is and the more social support a person receives, the more likely that laughter will result from that social connection. Mutual laughter and play are an essential component of strong, healthy relationships. By making a conscious effort to incorporate more humor and play into your daily interactions, you can improve the quality of your relationships.

### What are the Physical Effects of Laughing?

Laughing makes people feel good for a reason. Studies have shown that laughter boosts the immune system and triggers the release of pleasure-inducing neurochemicals in the brain. The immune system, which contains special cells that are responsible for defending the body against infection, has been shown to increase during the act of laughing. In the Central Nervous System, the brain releases powerful endorphins as a result of laughing. Endorphins are natural, morphine-

like compounds that raise the pain threshold, produce sedation, and induce euphoria (commonly called a “natural high”). In other words, we feel better when we laugh because endorphins reduce physical and mental pain. While this may be a wonderful feeling, laughing has other benefits as well:

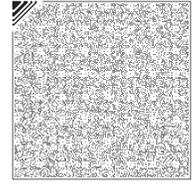
- During a laugh, respiration, heart rate, and blood pressure temporarily rise. This causes oxygen to surge through the bloodstream that then results in lower blood pressure.
- Laughter improves the function of blood vessels and increases blood flow, which can help protect against a heart attack and other cardiovascular problems.
- Laughter reduces pain and allows toleration of discomfort. Laughter reduces blood sugar levels, increasing glucose tolerance in diabetics and non-diabetics alike.
- Laughter relaxes the whole body, relieving tension and stress. It has been shown that following a good, hearty laugh, muscles in the body are relaxed for up to 45 minutes afterward.
- Laughing burns calories – laughter is sometimes referred to as “inner jogging”. A hearty laugh gives the muscles of the face, chest, shoulders, stomach, and diaphragm a good workout.

Laughter helps to create a positive mood. It allows the expression of happiness and the release of anxiety. Humor eases tension and is a great antidote to a stressful situation. Laughter is often seen as a temporary vacation

from everyday problems, bringing us to a paradise in which worries do not exist. Humor and laughter are natural safety valves that shut off certain hormones that are released during stressful situations. In fact, your sense of humor is one of the most powerful tools you have to make certain that your daily mood and emotional state support good health. Here are some ways to bring more humor and laughter into your life:

- **Smile:** Smiling is the beginning of laughter. Like laughter, it's contagious. When you look at someone or see something even mildly pleasing, practice smiling!
- **Count your blessings:** Literally make a list. The simple act of considering the good things in your life will distance you from negative thoughts that are a barrier to humor and laughter!
- **When you hear laughter, move toward it:** People are always happy to share something funny because it gives them an opportunity to laugh again and feel the humor in it. When they hear laughter, they seek it out and ask: "What's funny?"
- **Spend time with fun, playful people:** These are people who laugh easily, both at themselves and at life's absurdities, and who routinely find humor in everyday events. Their playful point of view and laughter are contagious!!
- **Bring humor into conversations:** Ask people: What's the funniest thing that happened to you today? This week? In your life?
- **Laugh at yourself:** Share your embarrassing moments.
- **Attempt to laugh at situations rather than bemoan them:** Look for the humor in a bad situation, the irony and absurdity

of life. This will help improve your mood and the mood of those around you.



- **Surround yourself with reminders to lighten up:** Keep a toy on your desk or in your car. Put up a funny poster in your office. Choose a computer screensaver that makes you laugh. Frame photos of you and your family having fun.
- **Keep things in perspective:** Many things are beyond our control, so make the best of a situation and find the positive in the situation.
- **Deal with stress:** Stress is a major impediment to humor and laughter.
- **Pay attention to children and emulate them:** They are the experts on playing, taking life lightly, and laughing!!

Here is a simple prescription for a healthy life: Thirty minutes of exercise at least 3 times a week and 15 minutes of laughter on a daily basis. The bottom line – laughter may just be the best medicine on the market today.

Retrieved from: <https://caregiver.com/articles/laughter-is-the-best-medicine/>

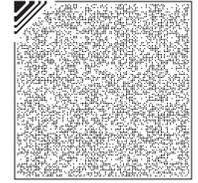
## Did You Know?

Some scientists believe that laughter was used as a way for humans to relate to one another millions of years before they developed the lung strength for language.

Retrieved from <https://www.rd.com/culture/laughter-facts/>

# In Remembrance

The Blinded Veterans Association deeply regrets the passing of the following blinded veterans.



## **Florida RG**

Martin Abrams  
Raymond Bigsby  
Jackie Brees  
Clarence Rafeld

## **Georgia RG**

John Daniels  
Cheryl Ellis-Love  
Elbert Martin  
Heartland RG  
Michael Dixon  
Howard Kinsey  
George Strahlem

## **Illinois RG**

Terry Dodge  
Clifford Evenson  
Walter Lopienski  
William Maune  
Raymond McCarthy  
James Riley  
Eugene Sheridan  
Anthony Santucci  
Robert Swaney  
Nathaniel Wallace

## **Long Beach-Orange County RG**

Howard Payne  
Louisiana-Mississippi RG  
Robert Everitt  
Rodney Gautreaux  
James Gills  
Isaac Leon Thomas

## **Maine RG**

Richard Miller

## **Mid-Atlantic RG**

James Allen  
Breyon Keith Berlack  
Michael Stepp  
Albert Terrell

## **Montana RG**

E. Frank Davis  
Juanita Maehl

## **New Hampshire RG**

John Andriopoulos  
Albert Derosiers  
Peter Duffy  
Frank Fralinger  
Lawrence Guay  
Robert Sherrod  
Ronald Williams

## **New Jersey RG**

Michael Busichio

## **New York RG**

Seymour Brandler

## **Northern California RG**

William McGee

## **Ohio, Kentucky, Indiana RG**

James Gann  
Bobby White

**Puerto Rico RG**

Luis Quiles-DeLeon

**Rhode Island & S.E. Mass. RG**

Francis Sisco

**Rio Grande RG**

Wilbur Stilwell

**South Carolina RG**

Felix Cooper

Harry Glover

Patricia Mintz

**Tennessee RG**

Eugene Current

Samuel Jenkins

**Washington RG**

Kenneth Fox

Donald Flaherty

Jerome Krismer

Verna Selden

David Wright

**Western Mountaineer (Utah) RG**

Paul Bulman

Clarence Hatfield

James Huber

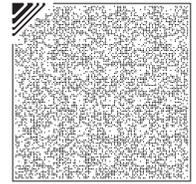
**Wisconsin RG**

James Burke

William Crawley

James Kopp

Kenneth Minsch



**Did You Know?**

All attendees of BVA 75th National Convention will be able to visit the Washington National Cathedral, a popular tourist attraction of the Nation’s Capital and an American cathedral of the Episcopal Church. The National Cathedral is the third largest church building in the United States and the fourth tallest structure in Washington. State funerals for four American presidents have been held at the Cathedral, also the burial place for such notables as Woodrow Wilson and Helen Keller.

**Caption:** The Washington National Cathedral is lit up in the arches at the entrance.



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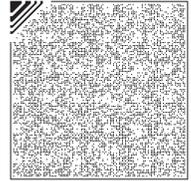
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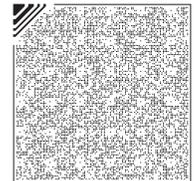
**Please Return to:**

BLINDED VETERANS ASSOCIATION  
1101 King Street, Ste. 300  
Alexandria, VA 22314

**FREE MATTER FOR  
THE BLIND OR  
HANDICAPPED**

**CHANGE SERVICE REQUESTED**

Handle as **FIRST-CLASS MAIL**  
Domestic Mail Manual Sec. 703.5.1-2



## **Final Thought**

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BVA's annual testimony before a joint session of the House and Senate Veterans Affairs Committees has been anything but an isolated event over the years.

The year 2020 was no exception. The Association's current Legislative Committee, Government Relations Department, and a special envoy from Blind Veterans UK teamed up for a series of Washington, D.C. visits at the VA Central Office, DoD's Defense Health Agency, the British Embassy, Walter Reed National Military Medical Center, and with Members of Congress, their office staffs, and VA Committee staff.

