From: veteran@veteranswithcancer.com

Subject: Veterans with Cancer Need Your Help

Date: July 10, 2024 at 10:29:27 AM

To: Jim Hutton jim.hutton@me.com



Advocacy and Awareness on Behalf of ...

Veterans with Cancer

www.VeteransWithCancer.com

NOT-FOR-PROFIT INCORPORATION NUMBER 1619282-3

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James Hutton
Royal Canadian Legion
British Columbia Command
393 3rd Street West
Owen Sound, ON

July 10, 2024

Dear Mr. Hutton,

We are a group of veterans with cancer which is the result of our exposure to chemicals while serving. Many veterans with cancer, who served in the 1960s and 1970s, are now in their seventies and eighties. Some of our members have cancers that have metastasized and they are terminally ill. Some veterans have already died from a cancer that was the result of their exposure to chemicals during service. Time is not on our side.

Therefore, we are requesting your assistance to inform veterans with cancer that their cancer may be service related. You can help by emailing the attached poster to your District counterparts with a request that they distribute it to their Branches for posting on Branch bulletin boards. We also request that your Command ask your local MP to lobby the Minister of Veteran's Affairs to remove the systemic barriers presented to veterans with cancer and that you pass down a similar request to the Districts and Branches.

Convincing large bureaucracies, like Veterans Affairs Canada (VAC), of the need for change is an enormous challenge which can only succeed if there are sufficient voices echoing the same message. This is why we need your support in getting our message out to all Members of Parliament. This message is outlined in the following paragraphs.

The current disability claims process at Veteran's Affairs Canada (VAC) was designed for physical injuries sustained in the field and continues to follow procedures that work very well for these injuries. However, as designed, they present a systemic barrier to our members whose injures were sustained in field but were not manifested until many years later. These types of delayed injuries are not easily forced into the mold that was designed for traditional veteran injuries. For example, if a veteran sustained a wound from enemy fire and in retirement the site of that wound precipitated a new medical problem, a doctor would not have a problem determining that the new issue was the result of the veteran's service.

However, if a veteran, with no family history of prostate cancer, develops prostate cancer and had worked extensively with a known carcinogen, such as Carbon Tetrachloride, while in service, it would be very difficult for most doctors to say with any certainty, that the cancer was related to service. Some of our members have been successful in obtaining a physician"s opinion confirming that the cancer was service-related, however, the existing process forces veterans to 'doctor shop' in search of a physician with sufficient background to make a similar declaration.

The specific changes we are requesting are:

- 1. Treat veterans with the same cancers as a group and of those, treat veterans with the same exposure as a subgroup. By recognizing that these claims are identical, the process time will be shorten for all veterans.
- 2. Apply Regulation 50(g) more liberally to the benefit of veterans with cancer. In doing so reduce the emphasis on Doctors Letters. However when a Doctors Letter exists tying a specific cancer to a specific exposure that letter should be applied to all veterans with the same cancer and exposure.
- 3. VAC must refer to VRAB and VAC past decisions when claims involve delayed injuries like cancer. When presented with claims with the same cancer and exposure as in a past VRAB or VAC decision, they must recognize and apply Judicial Precedent. Do not make veterans with identical cancers and exposures to individually jump through the same hoops.

As a group we are making in-roads in our efforts to persuade VAC to remove these systemic barriers. So far this year we have seen two veterans with cancer be awarded five-fifths disability pensions. One of these is our group's founder, Randy Hladun, who has terminal prostate cancer.

However our job is just beginning. We have met with the Chair of the Veterans Review and Appeal Board, Chris McNeil, who we found to be a strong supporter of our cause. He has invited us to present our concerns and inform Board members of the environmental conditions that service men and women served in during the 1960s and 1970s at a training session this October. We have also had productive discussions with the Bureau of Pension Advocates at the Director level and have stimulated the interest and support of the Chair of the National Council of Veteran Organizations who we hope to meet with in the coming weeks.

We will be continuing our lobbying efforts in the months to come and won't stop until we see concrete changes at Veterans Affairs Canada. Our more difficult problem is spreading awareness among veterans that their cancers may be service-related. Many are not computer literate and are not on social media. This is why we are reaching out to you with this email in the hope that you will use your distribution network to help us spread the word by distributing our poster.

On behalf of all veterans with cancer who will benefit from our efforts I thank you for considering our request for assistance.

Sincerely,

James P. Hutton, rmc, CD, BSc, MSc, MBA

Commander (retired)

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Attachments: 1



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Jim Hutton Owen Sound, ON Read my Biography



