

2026-2027

Proposed AMVETS Resolutions

Each Department should review the proposed Resolutions during their Department conventions in May or June. The convention floor should vote whether to endorse each Resolution. The Department should then notify National Headquarters (via media@amvets.org) of any Resolutions the Department has endorsed. All Resolutions endorsed by at least one Department will be brought to the National Convention floor for a vote on whether to adopt or not.

Draft Resolution 27-01

SUBJECT: Support Statehood for Puerto Rico

Source: AMVETS National Legislative Committee

WHEREAS, the people of the U.S. Territory of Puerto Rico have voted to join the Union by becoming the 51st State; and

WHEREAS, the U.S. Constitution provides for Statehood through its territories in Article 4, Sect. 3 by vote of the consent of Congress; and

WHEREAS, the people of Puerto Rico have fought for the American way of life against the enemies of America since WWI; and

WHEREAS, AMVETS has strengthened its legislative capabilities by creating the position of 3rd Vice Commander for its National Headquarters and its related subordinate membership organizations; and

WHEREAS, AMVETS Membership Department seeks to open the first AMVETS Post in Puerto Rico; now therefore be it

RESOLVED, that AMVETS supports Statehood for Puerto Rico in its activities with the U.S. Congress.

DEPARTMENT RECOMMENDATION:

DEPARTMENT of _____ ADOPT AMEND REJECT NONE

Draft Resolution 27-02

SUBJECT: Mental Health and Suicide Prevention in the VA and Armed Forces

Source: AMVETS National Legislative Committee

WHEREAS, federal law requires the VA to administer significant grant programs to community-based and nonprofit organizations, as well as to develop and implement innovative pilot programs aimed at reducing veteran suicide; and

WHEREAS, veteran and servicemember suicide remains a national crisis, requiring sustained, coordinated action across the VA, the Department of Defense (DOD), and Congress; and

WHEREAS, Congress has demonstrated interest in strengthening oversight and coordination of suicide prevention efforts; and

WHEREAS, there is a need for the DOD to take a more proactive role in equipping servicemembers with the tools, education, and resilience-building strategies necessary to support mental wellness and lead meaningful, fulfilling lives; and

WHEREAS, increased congressional oversight of the VA is necessary to better understand the extent to which veterans who die by suicide have previously interacted with VA services, and to ensure that resources are effectively allocated toward evidence-based and innovative suicide prevention strategies; now, therefore, be it

RESOLVED, that AMVETS supports Mental Health and Suicide Prevention in the VA and Armed Forces; and be it further

RESOLVED, that AMVETS supports increased congressional oversight to ensure accountability, transparency, and the effective use of resources in addressing veteran and servicemember suicide; and be it further

RESOLVED, that AMVETS supports legislation and policies that expand community-based partnerships, promote innovation through pilot programs, and improve access to comprehensive, evidence-based mental health care for veterans and servicemembers; and be it further

RESOLVED, that AMVETS supports efforts by the Department of Defense to proactively provide servicemembers with training and resources that promote resilience, purpose, and overall well-being.

DEPARTMENT of _____ ADOPT AMEND REJECT NONE

Draft Resolution 27-03

SUBJECT: Support Increased Oversight of the VA Mental Health Budget & Related Outcomes

Source: AMVETS National Legislative Committee

WHEREAS, the VA administers a substantial and growing mental health budget, including funding for community-based grants and partnerships with nonprofit organizations to support veteran mental wellness; and

WHEREAS, the VA is also directed by law to develop and implement pilot programs and innovative approaches aimed at reducing veteran suicide and improving mental health outcomes; and

WHEREAS, despite significant federal investment, veteran suicide rates and mental health challenges persist, raising concerns about the effectiveness, coordination, and accountability of existing programs; and

WHEREAS, there is insufficient transparency regarding how which VA mental health programs produce measurable outcomes; and

WHEREAS, effective oversight requires clear data, consistent reporting, and measurable performance metrics that link funding decisions to outcomes in suicide prevention, access to care, and overall veteran well-being; now, therefore, be it

RESOLVED, that AMVETS urges Congress to strengthen oversight of the VA's mental health budget to ensure funds are allocated efficiently, transparently, and in a manner that demonstrably improves veteran outcomes; and be it further

RESOLVED, that AMVETS supports congressional action to require independent evaluation of VA mental health programs, including grant programs and pilot initiatives, to identify best practices and eliminate ineffective or duplicative efforts; and be it further

RESOLVED, that AMVETS supports policies that align VA mental health funding with evidence-driven practices and strategies that improve access to care, quality of services, and suicide prevention outcomes.

DEPARTMENT of _____ ADOPT AMEND REJECT NONE

Draft Resolution 27-04

SUBJECT: Legislation to Modernize Traumatic Brain Injury Care

Source: AMVETS Legislative Committee

WHEREAS, hundreds of thousands of veterans have sustained traumatic brain injuries (TBI) since 2000, injuries that frequently lead to long-term cognitive impairment, increased suicide risk, and strained family dynamics; and

WHEREAS, traditional VA treatment models have historically relied on medication-centered approaches that often treat the symptoms of TBI rather than the underlying neurological injury, leaving significant gaps in veteran recovery and wellness; and

WHEREAS, the BEACON Act of 2026 (H.R. 6993) seeks to modernize the VA’s approach by expanding access to innovative, evidence-driven, non-pharmacological therapies and integrating civilian and academic research into the VA treatment pipeline; and

WHEREAS, the Veterans TBI Adaptive Care Opportunities Nationwide Act of 2025 (S. 3130) directs the Secretary of Veterans Affairs to award grants for the development and evaluation of neuro-rehabilitation treatments specifically for chronic mild TBI through rigorous clinical trials; now, therefore, be it

RESOLVED, that AMVETS formally endorses and urges Congress to pass the BEACON Act of 2026, ensuring the VA establishes robust grant programs to accelerate the adoption of non-pharmacological treatments for mild to moderate TBI; and be it further

RESOLVED, that AMVETS supports the swift passage and implementation of the Veterans TBI Adaptive Care Opportunities Nationwide Act of 2025 to ensure the VA utilizes randomized control trials to validate neuro-rehabilitation methodologies that improve long-term health outcomes; and be it further

RESOLVED, that AMVETS urges the VA to utilize the authorities granted by these Acts to strengthen partnerships with community providers and academic institutions to provide a “whole-of-nation” approach to brain health; and be it further

RESOLVED, that AMVETS advocates for the inclusion of specialized clinician training and family outreach as mandated by these bills, recognizing that successful TBI recovery requires a support system that is as informed and resilient as the veteran.

DEPARTMENT of _____ [] ADOPT [] AMEND [] REJECT [] NONE

Draft Resolution 27-05

SUBJECT: Comprehensive Modernization of VA Healthcare Access & Provider Standards

Source: AMVETS Legislative Committee

WHEREAS, the Department of Veterans Affairs is responsible for establishing National Standards of Practice to ensure a uniform standard of care across the Veterans Health Administration that remains consistent regardless of state borders; and

WHEREAS, the success of the VA healthcare system depends on the ability of all licensed healthcare practitioners to practice to the fullest extent of their education and training; and

WHEREAS, any standard of practice that limits these practitioners' ability to perform the full range of medical services allowed by their licensure would negatively impact veteran wait times and clinical outcomes; and

WHEREAS, modernized access to care must include the permanent expansion of telehealth services and remote patient monitoring to ensure that rural and homebound veterans receive timely medical attention without the burden of excessive travel; and

WHEREAS, the availability of over the counter hearing aids provides an essential opportunity for the VA to streamline hearing health services and provide faster relief for those with mild to moderate hearing loss; and

WHEREAS, a comprehensive approach to veteran wellness requires the integration of these modern access points alongside a workforce that is empowered to use every skill for which they are professionally certified; now, therefore, be it

RESOLVED, that AMVETS urges the VA to finalize National Standards of Practice that authorize all healthcare professionals to provide the full scope of care permitted by their professional licensure and training; and be it further

RESOLVED, that AMVETS supports the permanent codification of telehealth flexibilities and the integration of over the counter hearing aid options into the VA prosthetic benefit package to enhance the accessibility of rehabilitative services; and be it further

RESOLVED, that AMVETS advocates for a VA healthcare model that prioritizes the removal of administrative barriers to care, ensuring that every veteran has access to the highest quality medical services through a combination of empowered practitioners and cutting edge delivery methods.

DEPARTMENT of _____ [] ADOPT [] AMEND [] REJECT [] NONE

Draft Resolution 27-06

SUBJECT: Advancing equity and quality care for women veterans in the Department of Veterans Affairs' health care system

Source: Department of California

WHEREAS there are approximately 2.1 million women veterans in the United States, representing about 11-12% of the total veteran population, and they are one of the fastest-growing segments of VA users;

WHEREAS more than 900,000 women veterans are currently enrolled in VA health care, with hundreds of thousands requiring gender-specific and reproductive health services;

WHEREAS women veterans are disproportionately affected by complex health conditions, with studies showing high rates of chronic illness and mental health needs, including 41% screening positive for PTSD, 32% for anxiety, and 27% for depression;

WHEREAS a significant number of women veterans report exposure to trauma, including findings that up to 62% have experienced military sexual trauma (MST), necessitating specialized, trauma-informed care;

WHEREAS, women veterans face elevated social and economic challenges, with research indicating that 61% experience multiple health-related social needs, impacting their access to consistent and preventive care;

WHEREAS disparities in outcomes persist, including data showing that the suicide rate among women veterans is over 160% higher than that of non-veteran women, highlighting urgent gaps in mental health care and support systems;

WHEREAS, despite improvements, VA infrastructure remains inconsistent, with only a portion of facilities offering fully dedicated women's health clinics and specialized providers nationwide;

WHEREAS women veterans still face obstacles to receiving care, such as extended wait times, a shortage of providers with expertise in women's health, insufficient privacy and safety provisions, and uneven access to comprehensive services at VA facilities;

WHEREAS disparities in diagnosis, treatment, and health outcomes continue to affect women veterans, particularly those from underserved and minority populations, who make up a growing share of the women veteran community;

WHEREAS research and data collection specific to women veterans' health needs are essential to inform policy, improve care delivery, and ensure accountability within the VA system;

WHEREAS AMVETS is committed to advocating for equitable, high-quality, and accessible health care for all veterans; now, therefore, be it

RESOLVED, that AMVETS urges the Department of Veterans Affairs and the United States Congress to prioritize funding and policy initiatives that ensure equitable access to comprehensive, gender-specific health care services for women veterans across all VA facilities; and be it further

RESOLVED, that AMVETS supports the expansion and standardization of women's health services at all VA medical centers and clinics, including the availability of full-time women's health providers and access to specialty care; and be it further

RESOLVED, that AMVETS advocates mandatory training of VA health care staff in gender-specific care, cultural competency, and trauma-informed practices, particularly related to military sexual trauma; and be it further

RESOLVED, that AMVETS calls for improved infrastructure within VA facilities to ensure privacy, safety, and dignity for women veterans receiving care; and be it further

RESOLVED, that AMVETS urges the VA to enhance data collection, transparency, and reporting on women veterans' health outcomes to identify disparities and drive continuous improvement; and be it further

RESOLVED, that AMVETS supports outreach and education efforts to ensure women veterans are aware of and able to access the benefits and services available to them; and be it further

RESOLVED, that this resolution be submitted to the appropriate authorities within AMVETS, the Department of Veterans Affairs, and members of Congress for consideration and action.

DEPARTMENT of _____ [] ADOPT [] AMEND [] REJECT [] NONE

Draft Resolution 27-07

SUBJECT: improving equity, access, and recognition of women veterans' and minority veterans' claims within the Department of Veterans Affairs' disability compensation system

Source: Department of California

WHEREAS, there are over 2.1 million women veterans in the United States, representing one of the fastest-growing veteran populations, with projections showing continued growth in coming decades;

WHEREAS, more than 700,000 women veterans currently receive VA disability compensation, reflecting increasing reliance on the VA claims system for service-connected conditions;

WHEREAS, women veterans are more diverse than the overall veteran population, with approximately 43% of women VA health care users identifying as racial or ethnic minorities, highlighting the intersection of gender and minority status within the claims system;

WHEREAS, military sexual trauma (MST) remains a significant issue, affecting approximately 1 in 4 women service members, and is frequently underreported, resulting in challenges when filing disability claims;

WHEREAS, MST-related disability claims face systemic barriers, including higher denial rates compared to combat-related PTSD claims, with 27.6% of MST-related PTSD claims denied versus 18.2% for combat-related claims;

WHEREAS, despite improvements, disparities persist in MST claims processing, with historical data showing that up to 40% of MST-related claims were improperly denied, underscoring ongoing concerns about consistency and fairness;

WHEREAS, although VA has improved MST-related grant rates to approximately 72% in recent years, the complexity of evidence requirements and trauma-related reporting barriers continue to disadvantage survivors;

WHEREAS, women veterans often experience unique and under-recognized service-connected conditions—including reproductive health complications, pregnancy-related disabilities, and chronic conditions linked to MST—that are not consistently or adequately evaluated within the VA Schedule for Rating Disabilities;

WHEREAS, research shows that military sexual trauma is associated with long-term socioeconomic impacts, including reduced employment and increased health challenges among women veterans, which may compound difficulties navigating the claims process;

WHEREAS, systemic inequities, implicit bias, and lack of standardized training contribute to disparities in claims adjudication outcomes for women and minority veterans;

WHEREAS, limited transparency and insufficient disaggregated data on claims outcomes by gender, race, and trauma type hinder accountability and targeted improvements within the VA system;

WHEREAS, AMVETS is committed to ensuring that all veterans receive fair, equitable, and just consideration of their claims and access to the benefits they have earned; now, therefore, be it

RESOLVED, that AMVETS urges the Department of Veterans Affairs and the United States Congress to review and modernize the VA Schedule for Rating Disabilities to ensure the inclusion, accurate evaluation, and appropriate rating of conditions that disproportionately affect women veterans, minority veterans, and survivors of military sexual trauma; and be it further

RESOLVED, that AMVETS calls for the establishment of standardized, trauma-informed protocols for evaluating MST-related claims, including expanded guidance on acceptable evidence and markers to reduce the burden of proof on survivors; and be it further

RESOLVED, that AMVETS advocates for mandatory, recurring training for VA claims processors, adjudicators, and Compensation & Pension (C&P) examiners on gender-specific conditions, implicit bias, cultural competency, and trauma-informed assessment practices; and be it further

RESOLVED, that AMVETS supports increased access to accredited Veterans Service Officers (VSOs), legal assistance, and claims navigation support for women veterans and veterans from marginalized populations; and be it further

RESOLVED, that AMVETS urges the VA to improve outreach and education efforts to ensure that underserved veterans are aware of their eligibility, rights, and the claims process; and be it further

RESOLVED, that AMVETS calls for enhanced data collection and public reporting on VA claims decisions, disaggregated by gender, race, ethnicity, and condition type, to identify disparities and drive accountability; and be it further

RESOLVED, that AMVETS supports the development of specialized claims processing teams or centers of excellence focused on women veterans and MST-related claims to ensure consistency, expertise, and sensitivity in adjudication; and be it further

RESOLVED, that this resolution be submitted to the appropriate authorities within AMVETS, the Department of Veterans Affairs, and members of Congress for consideration and action.

DEPARTMENT of _____ ADOPT AMEND REJECT NONE