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Veteran Care in New Hampshire: Analysis of Interest Group Theory

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Veteran Care in New Hampshire: Analysis of Interest Group Theory and Related Influences
INTRODUCTION

The military has had a presence in America even in the earliest days of its history. From the Revolution to the War on Terrorism, struggles have ended, only to make room for new ones to begin. Stemming from these conflicts, are the men and women who have survived their military careers; these people face a plethora of unique problems, many regarding health care and other types of treatment. While many efforts have been made, those who advocate for the rights of American veterans, be they individuals or groups, have struggled to create a smooth system; as a result, millions of veterans continue to suffer long after they leave the armed forces.

However, with the growth of globalization, technology, and communication capabilities in the 21st century, Americans are faced with a stronger opportunity to take better care of our veterans. In studying the politics of interest groups and policy entrepreneurs, it becomes evident that, under a new analysis, veterans’ rights can be furthered in the United States. The political characteristics of interest groups and related actors, including theories based on usefulness, transparency, and mobilization highlight potential solutions to the problems faced by American veterans; indeed, some of these solutions are already beginning to form. The state of New Hampshire can be studied in detail, as multiple interest group actors attempt to make the state the start of the cataclysm needed to change the system for veterans.

New Hampshire makes an interesting case for this potential role. Its unique positioning as the first-in-the-nation primary gives it important political tout. Beyond this, however, is a base of people, both groups and individuals, who exemplify the role of interest groups striving to make a difference. Whether these interests are in government
or out of it, each type of action attempts to change a system that is at a standstill. However, despite only the best of intentions, it is ultimately found that where New Hampshire stands today leaves something to be desired.

To briefly summarize this paper, the first section will examine interest group theory from a literary and scholarly viewpoint. This is essential, as these notions will become useful in the analysis of today’s political climate. This section will include research by notable political scholars, and will discuss issues such as the effectiveness of interest groups, various types, the assortment of methods used by these groups, and more. Following this, there will be two sections outlining an historical overview of the U.S. Department of Veterans Affairs, one at the federal level, one at the state level in New Hampshire.

The next section will continue to narrow the focus to New Hampshire, detailing the state’s comparative status to its peers; statistics regarding numbers of veteran citizens, as well as state spending, will be discussed. Following this section, the next will explore issues and actors specific to New Hampshire, and the various individuals and groups who exemplify different elements of the previously mentioned interest group theory will be introduced.

Lastly, in the conclusion, interest group theory will be applied directly to the goings-on of New Hampshire, and effectiveness will be examined. All things considered, this paper aims to prove the point that, in order to give the strong effort to veterans’ rights that is so desperately required, an emphasis on interest groups and other, more non-conventional actors, is taking place in New Hampshire. While this is not a long-term
progressive model, as it highlights the need for more potent government action, it presents an excellent platform for takeoff.

**LITERATURE REVIEW**

From the most basic of viewpoints, the American system of government is a system of groups. Whether it be party politics, the three branches, Congressional committees, or the varying levels of jurisdictions exemplified in federalism, the democratic republic is a system of interests. In a nation with such a strong emphasis on freedom, almost every American citizen is aware of the multiplicity of unique issues that are faced, confronted, and managed. Interest groups are one of the many ways in which the individual, by joining with others, can holster the power to address problems in the political arena.

The study of interest groups in the United States is crucial in understanding the system as a whole. These groups are just one of many actors who, through various methods, have the potential to make a difference in a plethora of political realms. Additionally, these interests act as an easy-to-access theater for citizens to comprehend, and possibly even engage in, the system of American democracy itself in order to push forward interests that matter to them.

The nature of interest groups, as well as the varying opinions of their roles, has been debated by scholars for as long as American governance has been a concept. While some argue that interest groups aid in the social association and the involvement in government, others claim that the division of interests has the potential to clog up the political machine. In addition to the origins and judgments of interest groups, there has
been similar discussion on methods used and how these methods have changed temporally. While these differ from group to group, it is important to analyze the overall system, so as to understand the foundation of these influential actors in American government.

At the very basis of the literature on interest groups lies James Madison’s “Federalist No. 10.” Published in 1787, Madison, writing as “Publius,” wastes no time in warning the readers of the dangers of factions. Madison defines factions as “a number of citizens…who are united and actuated by some common impulse of passion, or of interest, adverse to the rights of other citizens, or to the permanent and aggregate interests of the community” (Madison 18). Merely from his syntax, it is clear that Madison’s viewpoint is that factions have the potential to cause harm. This is affirmed as he goes on to say that these human passions have “divided mankind into parties, inflamed them with mutual animosity, and rendered them much more disposed to vex and oppress each other than to cooperate for their common good” (Madison 19).

While Madison’s work lies as the precursor for a plethora of scholars pitted against a pluralist system, there are other bodies of early writings whose authors take a polar stance on the role of interest groups in government. In “Political Associations in the United States,” Alexis de Tocqueville highlights the importance of social association in American government. He claims that “in no country in the world has the principle of association been more successfully used or applied to a greater multitude of objects than in America,” where there are “a vast number of [associations] formed and maintained by the agency of private individuals” (Tocqueville 24).
Association, which is defined as dedication by individuals to specific doctrines and the vigor with which these individuals employ when spreading these doctrines, comes with three degrees in exercising. The first is that association goes along with the freedom of the press. In regards to the press, the zeal of association is furthered through the cohesive formation of an “exact and explicit form,” where the association “unites into one channel the efforts of divergent minds” (Tocqueville 24). The second degree in the exercise of association is the power that lies in meeting, where centers are created as points of power to increase influence. Finally, the last degree is the uniting of partisans in “electoral bodies” before choosing delegates “to represent them in a central assembly” (Toqueville 25).

It is through Toqueville’s piece that associations or interests groups can be seen as vitally connected to the way that the government is structured. Additionally, the influence of these interest groups is itself furthered by American staples of freedom, such as power of the press. In an attempt to address the importance of interest groups in American government, it is key to mention the fact that they act as a way for citizens to enter into the political arena. By doing so, Americans not only gain a more crucial understanding of the issues that plague them, but also of the system of their government itself.

Before examining the role of interest groups at a completely systematic level, the notion of inter-group rationality must be addressed. Mancur Olson discusses the activity within these groups, and the popular notion that individuals act upon a rational self-interest. According to Olson, “groups of individuals with common interests are expected to act on behalf of their common interest as much as single individuals are often expected to act on behalf of their personal interests” (Olson 96). This idea has political relevance,
placing its weight into the workings of group theory. Under this notion, individual group members act in a way that supports the group as a whole, by acting upon the “premise [of] rational, self-interested behavior” (Olson 96).

In Olson’s argument, he discredits this opinion, claiming that these rational individuals will, in fact, not act to achieve the common interests of the group. He claims that the group will only advance together as a whole if there is a completely separate motivation to do so, and that this incentive must be separated from the common interest of the group. However, he does make the claim that smaller groups may act more upon voluntary action; but yet, they too face difficulty working this to the “optimal level for the members of the group as a whole” (Olson 97).

While Olson’s argument for the potential power in smaller interest groups is relevant, other scholars disagree with his main point regarding the unification of group goals. As pluralist scholarly works have become more and more integrated into the study of American politics, it has become increasingly accepted that these institutions clearly play a substantial role. Scholars such as David Truman argue that interest groups have the potential to become stronger institutions if they are allowed to thrive. Truman attains that “the persistence and dispersion of such organizations indicate that we are dealing with a characteristic aspect of our society” (Truman 50).

However, despite this fact, citizens are still concerned over the activities of interest groups and their happenings. Questions over finances, lobbying, and congressional pressure leave the “impression that any group can get what it wants in Washington by deluging officials” (Truman 51). In these fears, played upon by various political advertisements and rival groups, the American public is pummeled by a
depiction of government loaded with corruption caused by secret groups with specific, individual agendas.

And yet, if we look through history, group pressures not only have a long-running trend in government, but also play a part in many beneficial policies. Was the Philadelphia Convention itself, resulting in the United States Constitution, not an example of a group effort? As Truman claims, a new perspective is needed to allow interest groups to truly thrive. Any worry citizens have over these institutions cannot be controlled “until we have arrived at a conception of politics that adequately accounts for the operations of political groups. We need to know what regular patterns are shown by group politics before we can predict [and address] consequences” (Truman 51).

In response to the argument presented by Truman, E.E. Schattschneider brings out the notion of conflict stemming from these groups. One source of issue is, interestingly enough, found not within the group, but as a result from the public reaction to their endeavors. Schattschneider contends that “every fight consists of two parts: (1) the few individuals who are actively engaged at the center, and (2) the audience that is irresistibly attracted to the scene,” who can “play the decisive role” (Schattschneider 62-63). The outcome of whatever cause the group is fighting for is tied directly to the extent of the involvement of the people, or the crowd. This is Schattschneider’s idea of scope of conflict and of contagion; the severity of a conflict is tied to the number of people involved.

It is through this methodology that Schattschneider plays on the previously mentioned fears of the public. Because of the urge for groups to avoid public conflict, privatization may be seen as preferable in comparison to socialization. Not only does this
underground-type of work hide goings-on from the public eye, it can also allow groups to get their potentially harmful agendas achieved faster, with little opposition from the public. This can perpetuate a stigma of inequality, where those who are privileged attain a greater ability to achieve their goals through groups, as compared to those who are deprived.

One must admit that Schattschneider raises interesting and fair points. Inequality is an issue in America that has plagued much more than just politics. However, his argument’s validity only seems to help the argument, made previously by Truman, that there is a need to understand more about groups and their political activities. By doing so, there is a perpetuation not only of a system with stronger values of equality, but also of an American population with a greater understanding of the workings of its government.

In studying the patterns or different formations mentioned by Truman, various scholars have made categorizations about interest groups, as well as their associations, methods of organization, and types. Jack Walker, for example, discusses three modes of political mobilization in the American political system, which he describes as permeable. The first mode of organization is to “base an association upon a tightly knit commercial or occupational community in the profit sector,” with the goal of “protecting or advancing” the economic interests of the group (Walker 172). These groups are usually supported through systems such as the payment of membership dues, and include programs such as the American Petroleum Institute.

Another type of political association organization is “also rooted in occupational communities,” but resides in the nonprofit sector (Walker 172). Examples of these types of organizations include the Association of American Medical Colleges, or the National
Association of State Alcohol and Drug Abuse Directors. Walker’s third type of organization is most relevant to the previous mention of the ties to free speech, and discusses groups who “tap [into] the enthusiasm and energy of social movements…and are based on the commitment of individuals attracted by a cause” (Walker 173). Examples of these types of groups include the Wilderness Society and Common Cause.

Other differences made by pluralist scholars include the distinction between groups and institutions, as made by Robert Salisbury. Salisbury makes an argument claiming that a plethora of groups are not groups due to the fact that they lack legitimate members. Instead, these groups are merely parts of institutions. Again, this is another scholarly attempt to point out the fact that group politics, which are so crucial in the American system, need a more refined focus and study. In his distinction, Salisbury says that “institutions have interests that are politically and analytically independent of the interests of particular” members of that institution (Salisbury 187). Additionally, institutions are organizations that are managed and have characteristics of hierarchy and official authority, with a “greater latitude to enter the political arena,” and less of a need to “justify their political efforts” (Salisbury 188).

As with any enigma of the social sciences, statistics play a role in attributing value to the role that interest groups play in the realm of politics. As America progressed into the second half of the twentieth century, the growth of interest groups increased substantially. This is important because, as previously noted, these groups give citizens the chance to see, and even participate in, the American political system. In an article by Kay Schlozman and John Tierney, it is said that those who favor group politics make note of the fact that “it enhances the mechanisms of representation, guaranteeing to ordinary
citizens an effective voice in the halls of government;” on the other hand, those against it claim that these groups “usurp public authority, [and cause] the boundaries between public and private spheres [to] erode” (Schlozman and Tierney 202).

While there is clearly an illusion of the growth of activity in the interest group sector, statistical evidence is necessary to confirm. In the mid to late 1900s, there was an explosive growth of interest group action, with “40 percent of organizations [having] been founded since the beginning of the 1960s; in fact, 25 percent have been founded since the beginning of the 1970s” (Schlozman and Tierney 204-205). Additionally, interests groups are not only growing in number, but are growing internally, as well. In a sample of 175 interests groups taken by Schlozman and Tierney, “sixty-one percent…have opened a Washington office since 1960,” and “38 percent since 1970” (205).

Interestingly enough, this statistical study is also helpful in shedding light on some of the methods used by interest groups, and how these methods, too, have changed over time. Using the same sample, Schlozman and Tierney created a list of 27 techniques of influence used by interest groups. The list includes tactics such as testifying at hearings, contacting government officials, entering into coalitions, aiding in the drafting of legislation, and so on. Although certain types of groups are likely to focus more on specific methods and less on others, the list is indicative of the fact that there is a wide spectrum of activity.

However, even more interesting than the types of methods used is the growth of how specific tactic usage has changed over time. In examining this, Schlozman and Tierney take the same list of 27 methods and list them from ones that have been used by
interests groups more than they have in the past. The pair makes the claim that while other factors have clearly played into the growth of some of these techniques, two main ones account for the most substantial growth. Specifically, “two of the principal changes in our larger political environment – the revolution in electrical technologies and a reinforcement of the nexus between the congressman and his district” have played a part in generating “entirely new kinds of activity” and in “enhancing [the] salience of [existing] forms of activity” (Schlozman and Tierney 203).

Out of the list of 27 methods, Schlozman and Tierney related six methods to technology. These methods included things such as talking to the press and media, mounting grassroots lobbying efforts, email fund-raising, and the like. Calculating the mean percentage of groups from the sample that used these techniques more often, electronically-relevant techniques came in at a 50% increase in usage. Schlozman and Tierney also related five of these methods directly to a stronger bond between representatives and constituents. These methods included making influential constituent contact with congressmen and alerting congressmen to the effects of a bill on individual districts, among others. After calculations, the mean percentage of groups using these techniques more often came in at 53%.

In summary of Schlozman and Tierney’s study, the growth of interest groups has increased quite dramatically, especially in the mid to late twentieth century. This growth can be accounted for by many reasons, but those tied to the technological boom and a stronger bond between government representatives and their constituents have been especially impressive. Not only does this link the growth of interest groups to the technological world, but also directly to government itself, perhaps indicating that, as
time goes on, the role of interest groups in government is becoming more and more solidified.

It is important to note that these interests groups are potent at all levels of government, not just within the federal government or as a philosophical ideal. In fact, interest groups can be seen as most active at the state level. In making this claim, author Anthony J. Nownes and his colleagues discuss the concepts of state interest groups systems and the diversity of interests that they represent, and the just as equally diverse networks they act within.

In discussing this concept, the state interest group system is defined as “the array of groups and organizations, both formal and informal, and the lobbyists who represent them working to affect government decisions within a state” (Nownes 100). However, with the fifty states that make up the U.S., it is alarmingly clear that there is no standard system for state government. Therefore, there cannot be a set arrangement for interests groups and their related activities. Indeed, the nature and role of interest groups varies greatly between states; these variations can be linked, according to Nownes, to various characteristics.

First, there is the notion of the economy of a state playing a role in the capacity of interest groups. As a general rule, “the larger a state’s economy is, the more interests groups it has” (Nownes 104). This has to do with the fact that these larger economies have more firms and sponsors of specific causes and organizations, therefore creating a more substantial market for interest group activity. Additionally, economic well-being not only plays into creating a bigger sphere for interest groups, but also a more diverse one.
Secondly, political culture also can be responsible for differences in the systems of state interest groups. To be specific, states with a more “moralistic political culture,” such as New York, help to circulate the idea that “citizen participation is viewed by many as legitimate,” therefore increasing interest group activity (Nownes 105). On the other hand, a lack of or decrease in the involvement of citizens can account for less diverse interest groups, leaving the majority of the arena to be contended by business firms and similar organizations.

A third factor that accounts for variation in interest groups systems is the activity of the government itself. This can be defined as “the extent to which a state’s government is active in the lives of the state’s citizens” (Nownes 105). This can be measured by looking at statistics, such as spending per capita by the government. Certain states spend more on certain programs and regulate more activities than other states do. This is important, as “scholars have found that government activity often acts as a spur to group activity,” where people and organizations try and stay ahead of incoming government regulations (Nownes 106).

Although the role of interest groups in the states is diverse, there are some general concerns that apply to their responsibility in state governments in a general manner. These worries include: interest groups not representing all societal groups equally, the correlation between money and success, and the potential for goal-achievement through illegal means when issues come down to the wire. However, lobby-laws help to play a part in easing these fears, ensuring that groups continue to exert however much or little influence they wield in their particular states. These laws include “conflict-of-interest and personal financial disclosure provisions, [which] require public officials to disclose their
financial connections to outside individuals and organizations” (Nownes 122). Additionally, campaign finance regulations also require public disclosure and act as a way to limit contributions to political campaigns. These laws do make a difference despite the variations in levels of state interest group activity; they make it easier for citizens to find out who is lobbying what, which is useful no matter what interest group is being analyzed.

When it comes to analyzing particular states and the roles that interest groups play in their political arenas, New Hampshire is considered to be one of the states with “the least stringent [lobbying] laws” (Nownes 123). Perhaps in correlation with the “live free or die” slogan, or the fact that New Hampshire has the largest state legislature, interest groups are of great number and variety, representing thousands of distinct causes. One of these causes is the fight for the bettering of the rights, benefits, and quality of life of military veterans.

In assessing the level of completion and efficiency of these groups, different types of groups must first be discussed. First, there are traditional membership groups, which are “groups made up of individuals promoting economic, social, or political concerns” (Nownes 99). Groups that fall into this categorization could be small non-profit groups. However, before these are discussed, the notion of institutional interests must be considered. These groups are not groups at all, but are “non-membership organizations such as business firms, local governments, hospitals, state and federal agencies” and the like (Nownes 100).

As the idea of pluralism becomes researched and conversed more and more in scholarly dialogue, so do the roles of these multiple actors themselves. In analyzing these
responsibilities, the idea of policy entrepreneurship becomes important. Michael Mintrom and Phillipa Norman, in their discussion, hold that “policy entrepreneurs distinguish themselves through their desire to significantly change ways of doing things” in a particular area of interest (Mintrom and Norman 650). These characters can be inside or outside of government, for it is not their position that defines them, but their “willingness to invest their resources” (Mintrom and Norman 651). This willingness can depict itself through the presence of four elements, which are: the displaying of social acuity, defining problems, building teams, and leading by example.

In terms of social acuity, the use of policy networks and the understanding of ideas and motives of others in a policy-related context create a suitable environment. Problem definition is key, due to the fact that it “affects how people relate specific problems to their own interests,” which allows for more people to become involved, tying into the aspect of building teams (Mintrom and Norman 652). This is important because, as always, there is strength in numbers. Lastly, leading by example allows policy entrepreneurs to take actions intended “to reduce the perception of risk among decision makers,” which allows for more general policy development (Mintrom and Norman 653).

Although the characteristics of policy entrepreneurs are important, Mintrom and Norman also argue the significance of policy streams, or how and why certain issues get attention at certain times. In an effort to address certain areas of policy, linking problems with agendas is key in “moving [that] policy in directions [that the entrepreneurs] desire” (Mintrom and Norman 655). Arguably, different actors have varying levels of ability to link the public agenda to their area of interest; one’s influence depends on a diverse set of factors, such as social and political networks. One could make the argument that an
elected official presents a strong case for policy entrepreneurship in this aspect. With the ability to push for growth of legislation and public awareness of a cause, Mintrom and Norman’s argument for incrementalism, or a small series of changes over a period of time, can depict elected officials as beneficial agents of change.

In a further explanation of policy entrepreneurship, Adam Sheingate discusses the fact that the role of policy entrepreneurs “prompts us to move beyond mainstream ways of getting things done” (Sheingate 185-186). Sheingate identifies three attributes in his rather precise definition of policy entrepreneurship. The first of these is the ability to shape the terms of political debate. In a more casual explanation, the defining and framing of political topics allows the entrepreneur to push the policy in the ways they desire. The second attribute describes the policy entrepreneur as a source of innovation, as an actor to invest “resources and create new things” (Sheingate 188). Lastly, Sheingate makes the claim that entrepreneurs turn “innovations into lasting change” (Sheingate 188).

Adding onto the notion of agenda, Laurence O’Toole argues that agenda setting is something that varies contextually, but that “public administrators should prepare to play major roles” nonetheless (O’Toole 228). The effectiveness of the roles played by these administrators also varies, depending on characteristics such as “time, jurisdiction, and substantive issue” (O’Toole 230). However, as a general rule, public administrators are able to strengthen the positions they play in agenda setting by doing a number of things; these can include developing routines that seek to find and address problems, developing efforts aimed at sustaining systematic efforts, as well as articulating public concern, and “ironing out differences within the policy or the professional community before seeking
agenda status at some broader level” (O’Toole 232). Overall, these efforts allow policy entrepreneurs to narrow their focus to their own specialty areas of policy, while simultaneously broadening their impact.

In outlining the basic framework of advocacy coalitions and policy-oriented goals, Paul Sabatier holds that understanding policy change requires a long-term perspective, as change is incremental and not very often fast-paced. Sabatier’s main point is that “while policy-oriented learning is an important aspect of policy change…changes in the core aspects of a policy are usually the results of…[factors such as] the rise of a new systemic governing coalition” (Sabatier 134). Sabatier highlights the importance of sub-systems as easy places to identify the presence of policy change, which helps to incite the important progresses made in individual policy areas, such as veteran benefits.

In the discussion of the fight for veteran rights, it goes without saying that the U.S. Department of Veterans Affairs, commonly known as the VA, plays the most politically significant part. In the next section, the history of the VA at the federal level will be examined, followed by a brief history of the organization’s involvement in New Hampshire, as well as the condition of affairs regarding veteran care in the state itself.

HISTORICAL OVERVIEW – UNITED STATES

Prior to the formal unification of the United States, there were identifiable efforts to help the people who served their nation. Before the Revolutionary war, pensions were provided for colonial soldiers who defended their people against Native Americans. In 1636, Plymouth became the first colony to enact a law providing money to those disabled in these efforts. Thus began the first inkling of American veteran assistance.
Early efforts to take care of military veterans included the failed pension system after the Revolutionary War, where only a few thousand soldiers were granted their payments, thanks to a state-controlled payment plan. Due to the fact that the states either varied in their interests or their capabilities to take on the job of paying their veterans, “the first Congress assumed the burden of paying veterans’ benefits” after the 1789 ratification of the United States Constitution (“VA History in Brief” 3). For decades following this, the Bureau of Pensions, under command of the Secretary of War, created laws to assist veterans, as well as their dependents. Later to be known as the Department of War, the Bureau noted that from “1816 to 1820, the number of pensioners increased from 2,200 to 17,730” (“VA History in Brief” 4).

Despite the increase in the number of veterans receiving benefits, the end of the Civil War brought in an additional 1.9 million veterans. Of these, no Confederate soldiers received benefits, until the last survivor was granted them in 1958 after being pardoned by Congress. During the Civil War, the General Pension Act of 1862 granted benefits to soldiers, as well as their families, both during times of war and times of peace. Less than a decade before this act, additional establishments designed to provide veterans with care based on medical needs were created in 1853 and 1855, adding to the already established Naval Home of 1812.

As the number of veterans in need continued to grow, so did the Bureau of Pensions’ efforts to aid them. In 1873, the Consolidation Act revised the legislation surrounding pensions, and began to pay “on the degree of disability rather than the service rank” (“VA History in Brief” 5). In 1890, the Dependent Pension Act granted the Bureau a greater scope to identify eligible veterans by. Instead of serving only those who
had been discharged for illness or disability due to service, pensions could now be granted to veterans who were or had become incapable of manual labor. Finally, the Sherwood Act of 1912 granted pensions to all veterans of the United States military.

As the early years of the 20th century passed, so came the First World War. With 4.7 million Americans fighting, approximately 116,000 lost their lives, while 204,000 were injured. Prior to the U.S. entering the war, Congress “passed the War Risk Assurance Act of 1914,” originally insuring American ships and the cargos they contained; this was later revised to protect against the loss of life or injury of American soldiers by enemy forces (“VA History in Brief” 7). A provision of the Act allowed for the establishment of rehabilitation and vocational resources for veterans, which eventually, through the Vocational Rehabilitation Act of 1918, led to the Federal Board for Vocational Education.

In 1921, Congress created the Veterans’ Bureau in an attempt to consolidate the work being done by other branches of veterans’ organizations. However, the first Director, Col. Charles Forbes was imprisoned on charges of conspiracy to defraud the government, spinning the organization into corruption-based dissolution only nine years later. With the arrival of the Great Depression, veterans were left even more helpless at the hands of their government. In an effort to help, Congress passed the World War Adjustment Compensation Act in 1924, offering bonuses to World War I veterans. Under this legislation, the amount granted depended upon the length and location of the veteran’s service. However, if these payments exceeded a specified amount, they were only good in the “form of an endowment policy made payable 20 years from the date of issue” (“VA History in Brief” 9).
In a time where money was a scarcity, veterans began to demand immediate dispersal of their bonus payments. In early 1932, small marches of veterans began in Oregon, eventually travelling to Washington, D.C. The movement took off, leading to the creation of a force of veterans known as the Bonus Expeditionary Forces. With the quick growth in numbers, came a deterioration of living conditions as the groups travelled along. In an effort to battle concerns about disease, the Veterans Administration, which had been established in 1930 to unite the Veterans’ Bureau, the Bureau of Pensions, and the National Homes for Disabled Volunteer Soldiers, built and opened an emergency hospital.

With violence escalating, especially after the failure of a bill addressing the immediate dispersal of payments in June, marching veterans became angry and violence began to escalate. President Hoover ordered General MacArthur to use force to remove about 3,500 veterans, and bricks and clubs injured many, although no gunshots were fired. Although Congress approved VA-funded transportation for these marchers, early payments were not dispersed until five years later, in June of 1937.

Following the attack on Pearl Harbor in 1941 and the American entry into World War II, many VA workers were called upon or volunteered for service in the military. In an effort to re-staff these open positions, minimum age and physical requirements were reduced. Ultimately this lead to a “drain on VA hospital staffs [that] came at the same time as a rapid increase in the number of veterans needing immediate medical treatment” (“VA History in Brief” 13). Despite this struggle, public sentiment to aid in the transition of American soldiers of Word War II back into domestic life was strong. In response to
this, Congress came up with the Servicemen’s Readjustment Act in 1944, better known as the GI Bill.

Signed into law by President Roosevelt in June of that year, the law was composed of three main parts. The first granted veterans up to four years of education or job training, including money for fees, and also a monthly subsistence. The second provision gave veterans home, farm, or business loans, federally funded and with no down payment. Lastly, unemployment compensation was also provided for a period of up to 52 weeks. The GI Bill was greatly received by veterans and civilians alike, and granted the very real possibility of “higher education and home ownership…[to] millions of veterans and their families,” therefore contributing “more than any other program in history to [their] welfare, and to the growth of the nation’s economy” (“VA History in Brief” 14).

Perhaps in the relation to the plethora of WWII veterans returning home with a need for prosthetics, the years following the war were focused on the advancement of medical care for veterans. With the retirement of longtime VA administrator Frank Hines came his replacement, General Omar Bradley, who brought on chief surgeon Major General Paul Hawley to oversee VA medicine. Hawley’s efforts included “the formation of a separate department of medicine, outpatient treatment for veterans with disabilities not related to military service, and the creation of resident and teaching fellowships in VA hospitals,” as well as “a policy of affiliating new VA hospitals with medical schools” (“VA History in Brief” 15). Despite Hawley’s efforts to open almost one hundred more hospitals, the increase in veteran claims caused existing hospitals to be filled to the brim,
with waiting lists being created for new establishments. In an effort to deal with this, VA staff was increased.

With the dawn of the new decade came the Korean Conflict in June of 1950. In 1952, a Korean GI Bill, formally called the Veterans’ Readjustment Assistance Act, was formulated. The Act provided many of the same benefits as the original GI Bill did, except for the fact that it reduced financial education benefits and imposed new restrictions, such as a shorter length of time for education for veterans to access after the war.

Due to the ever-increasing flow of patients, the VA reorganized into three departments in 1953 to tackle different issues; these departments were the Department of Medicine and Surgery, the Department of Veterans Benefits, and the Department of Insurance. Towards the end of the decade, the first of these departments focused on addressing chronic-care problems of aged veterans, which Congress agreed was an important issue.

With the end of the Vietnam War came a new wave of troubles for veterans who returned home. With a strong anti-war movement, the “culture shock of suddenly being back in civilian life caused veterans greater adjustment difficulties,” and “many veterans reported feeling isolated and alienated from their peers, and society in general” (“VA History in Brief” 18). In response to these issues, Congress passed the Veterans’ Readjustment Benefits Act in 1966, bringing back the previous strength of veterans’ educational benefits. About 76% of eligible veterans participated in the Vietnam GI Bill’s educational program, compared to 50.5% and 43.4% of veterans from World War II and the Korean Conflict, respectively. Additionally, Servicemen’s Group Life Insurance was
established when the VA purchased a group policy from a commercial insurance company, granting veterans more benefits and options than they previously had.

This was also the time where the VA began to expand in ways that were crucial, but not related to direct policies. New measures of outreach were created, aimed at informing veterans of their benefits. The VA created veterans assistance centers, and placed them in 21 cities in the mid 1960s, in order to assist servicemembers both before and after discharge, run telephone services, direct counseling services, and keep in contact with other centers and with stationed military personnel.

However, in other areas, VA care took a relatively long time to keep up with the special needs of Vietnam veterans. Agent Orange exposure has been linked to causes of a plethora of diseases, such as various cancers and liver diseases. In the late 1970s and early 1980s, VA care for Vietnam vets with unidentified health reasons was minimal, and Agent Orange-specific claims only were allowed for complaints of skin rashes. In 1991, claims for various sarcomas and non-Hodgkin’s lymphomas were accepted, but veterans suffering from Hodgkin’s disease, a liver disease known as porphyria cutanea tarda, and various respiratory cancers, weren’t granted disability payments until 1993.

In 1978, Congress passed the Veterans’ and Survivors’ Pension Improvement Act to help deal with the rising number of veterans, as those who fought in World War II grew closer to reaching their pension payments. Under this law, the total of all family members’ income was counted towards eligibility. Because of this, many World War II veterans were not entitled to pensions.

In 1979, Vet Centers were set up across the United States, providing services in counseling, especially for veterans with post-traumatic stress disorder. Originally
intended to take care of the special needs of Vietnam veterans, these became open to veterans of Middle Eastern wars in 1991, and veterans of World War II and Korea in 1996.

In the late part of the twentieth century, the debate about the potential elevation of the VA to Cabinet-level status peaked. Those who supported this movement shared arguments that were based upon the size and scope of the VA; backers claimed that it was “the largest independent federal agency in terms of budget and was second only to the Defense Department in the number of employees,” and that “one-third of the U.S. population was eligible for veterans benefits” (“VA History in Brief” 26). With President Reagan’s signature on March 15, 1989, the VA officially became the Department of Veterans Affairs.

Compared with the anti-war sentiment that surrounded the Vietnam War, when the Persian Gulf War commenced in 1990, military personnel overall found themselves part of a nation that supported them and the strengthening of their benefits. In 1991, Congress passed the Persian Gulf Supplemental Authorization and Personnel Benefits Act, which determined that the conflict was a war, by the standards used to determine eligibility for veterans’ benefits.

Near the turn of the century, the scope of veteran medical care began to grow, with combat veterans becoming eligible for free VA care, as well as care from outpatient centers or nursing homes. Additionally, in 2001, family coverage became available under the aforementioned Servicemembers’ Group Life Insurance provided by the VA. Following this, a three-year process known as Capital Asset Realignment for Enhanced Services, or CARES, brought in more hospitals, spinal cord injury centers, clinics, and
other medical centers to help with changes in the “geographic concentrations of veterans and new methods of medical treatment” (VA History in Brief” 30).

Despite the comprehensive and seemingly proactive history of the VA, it appears that today the organization is clouded in connotations of scandal and deceit. In fact, it can be argued that “scandal, controversy, and veterans care in the United States have gone hand-in-hand for virtually as long as there’s been a republic” (Pearson 1). Indeed, following the end of the Revolutionary War, only a few thousand veterans received payments that were promised to all soldiers by Congress.

What can be determined as the start of modern-day VA scandal occurred in 1930, when the Veterans Bureau, which was the then-current organization that aimed to grant benefits to World War I veterans, was abolished after only nine years. Following the establishment of the Veterans Administration, care was still lagging, as can be seen with the struggle of the Bonus Expeditionary Forces, who were left with no other option than to march to Washington for the payment of their promised bonuses. Despite this, the straggling productivity of the VA prevailed, and marchers were literally forced out of Washington, made to wait a whole five years for payments to start.

These medical and hospital related problems that the VA seems to be known for today continued in 1945, when the then-Administrator of the VA, Frank Hines, resigned amidst a series of reports discussing the shoddy care system found in VA hospitals. After a few more decades filled with Administrator resignations and veteran frustrations on lacking care with issues such as Agent Orange complication in Vietnam veterans, President Nixon launched a formal investigation into the VA in 1974. Things intensified after Vietnam veteran Ron Kovic launched a well-publicized hunger strike to protest the
poor treatment of veterans in the VA hospital system, claiming that he and many others “gave America [their] all, and the leaders of this government threw [them] away to rot in their VA hospitals” (Pearson 4). Shortly after, in 1976, more investigations into VA hospitals in Denver and New Orleans found great amounts of shortcomings in VA care.

Events and investigations similar to these continued throughout the end of the twentieth century. Some notable instances can be seen; one example includes the office of the VA Inspector General’s 1986 finding that 93 working VA physicians had sanctions against their licenses to practice medicine. In a 1991 publication by the Chicago Tribune, it was found that VA doctors in the city were known to ignore test results, fail to treat patients efficiently and punctually, and even to perform surgeries that were unnecessary.

These problems were not all related to specific VA hospitals, either. In 2000, the U.S. Government Accountability Office found what it deemed “substantial problems” with the VA, including their handling of research trials that involved human subjects. Another finding of the GAO a mere year later addressed the failure of a 1995 goal to reduce the vast waiting period for primary care and specialty appointments. While veterans were supposed to have access to these appointments within 30 days of scheduling, it was found that they were still made to wait more than two months on average. In 2003, a special commission under the Bush Administration found that approximately 236,000 veterans had been waiting six months or more for follow-up visits, once again indicating the severe backlogging problem suffered by the VA.

Problems with the VA in the early 2000s gained extensive media coverage. In 2006, a severe breach of security occurred when the names and Social Security numbers of approximately 26.5 million veterans were stolen from the home of a VA worker, who
was not authorized to handle the materials. A year later, it was found that despite the backup of thousands of veterans’ cases, numerous bad reviews, and other horror stories plaguing VA hospitals, multiple VA officials were receiving bonuses of upwards of $33,000 a year.

Medical care continued to be a problem in 2009, when the VA officially disclosed that about 10,000 veterans from the states of Tennessee, Florida, and Georgia who underwent routine colonoscopies were exposed to viral infections; 37 patients were tested positive for hepatitis and six for HIV. Two years later in 2011, nine veterans in Ohio also tested positive for hepatitis, but this time after receiving dental care. Following an investigation, it was found that “a dentist at the VA medical center [in Ohio] acknowledged not washing his hands or even changing gloves between patients for 18 years” (Pearson 7). Disease continued to be an issue, as a VA hospital in Pennsylvania suffered from an outbreak of Legionnaires’ Disease, which took the lives of at least five veterans over the course of the next two years.

Legal and governmental investigations also continued to plague the VA. In 2013, a VA Director was indicted on charges of taking bribes to grant VA contracts to a specific company. In April of the following year, a high-profile scandal at the Phoenix Veterans Affairs Health Care system took place when it was discovered that at least forty veterans passed away while waiting for appointments. Upon investigation, it was found that these patients were on secret lists that aimed to hide the lengthy delays from Washington officials. The next month, emails were discovered that indicated a VA employee out of Cheyenne, Wyoming was manipulating the system, also to cover up long
waiting times. Around the same time, similar situations continued to arise in San Antonio, Texas and in Durham, North Carolina.

Inspection into VA-related scandal makes it very clear that the organization has a serious problem in providing adequate, timely, and sanitary care to the veterans of the United States. Regretfully, what was supposed to be a strong-armed friend of veterans has come to be seen as a group that causes much more harm than it should. Not to say that all VA action is negative by any means, but it is clear that veterans of the armed services deserve more – but where and who this comes from is yet to be seen.

HISTORICAL OVERVIEW – NEW HAMPSHIRE

State-funded care for New Hampshire veterans has existed since the late 1800s. In 1875, the New Hampshire Veterans Association was formed with the first reunion of veterans of the Civil War in Manchester, New Hampshire. After an additional meeting in 1878 at what was then known as Weirs Landing, land was “made available to the New Hampshire Veteran’s Association at the Weirs for 43 years” (“History”). This land was granted by the Boston, Concord, & Montreal Railroad. Finally, in 1881, the New Hampshire VA was formally incorporated by the state, with a temporary headquarters being established, until a formal one was constructed in 1885.

In terms of structural integrity of the Association, the early-to-mid twentieth century brought a fair amount of destruction. In 1924, a fire struck The Weirs, and destroyed the 3rd Regiment Building. Following this, a strike of lightning destroyed the Civil War Soldier statue that had been erected on New Hampshire Ave. in 1894. Yet again, in 1938, Association property was ruined by a hurricane that “destroyed the 8th and
13th Regiment Building, National Veterans Association Building [and] the Convention Pavilion,” among others (“New Hampshire Veterans Association History”). This theme of devastation continued into the later part of the century, where fires destroyed buildings in the 1970s, 1980s, and 1990s.

At the same time of the introduction of the New Hampshire Veterans Association came the birth of the New Hampshire Veterans Home. Aimed at a more medical-based means of aid, “the first legislation directing assistance in establishing and providing operational costs for state-operated Soldiers’ Homes was passed by Congress in 1888” (“Fun Facts and History”). In 1889, New Hampshire Governor David H. Goodell formed a Board of Managers, comprised of prestigious citizens of New Hampshire, with the goal of choosing a location to establish a home for veterans in need. Charles E. Tilton, a member of the board himself, offered a 30-acre plot, known as Savage Farm. This offer was accepted on November 8, 1889, with dedicating ceremonies taking place on December 3 of the next year. Three days following these ceremonies, the home admitted its first veterans of the Civil War.

**NEW HAMPSHIRE’S COMPARATIVE STATUS**

The connotations surrounding current veteran care in the United States are not usually ones that are associated with beneficial, helpful services. As previously mentioned, there have been outbreaks of scandal across the country in various state-run veteran hospitals that bring outrage and anger to the public, as well as continued frustration to the millions of veterans trying to access benefits that they rightfully deserve.
In terms of figuring out where exactly New Hampshire lands in terms of the desolation of veteran care, it is helpful to compare where the state stands among its peers. In an analysis conducted by John Kiernan of Evolution Finance, each state and the District of Colombia was rated one through fifty-one for which was most “conducive to a comfortable military retirement” (Kiernan). Criteria used included: veterans per capita, job opportunities for veterans, the number of specific types of health facilities, and more. In the rankings, New Hampshire was rated number seven out of fifty-one. In comparison to the worst-case scenario, Rhode Island was ranked last.

In an order to compare these cases more closely, looking at specific government studies is key. In 2016, the National Center for Veterans Analysis and Statistics, under the U.S. Department of Veterans Affairs, published summary reports on each of the states, detailing quantitative information regarding veteran care and benefits. First, in addressing the situation in Rhode Island, the 2015 VA expenditures totaled 0.55 billion dollars, and funded large categories such as compensation and pensions, medical care, education and vocational rehabilitation and employment, general operating expenses, and the like. In the state, there are an estimated 70,000 veterans, with 36,000 being the age of 65 years or older. Looking at facilities, there is one inpatient care site and three outpatient care sites. Out of the 70,000 veterans in the state, 11,951 receive compensation for disability, 886 receive pensions, and 1,164 are Dependency and Indemnity Compensation, or DIC, beneficiaries. In regards to health care, 28,210 of the 8,965,923 veterans enrolled in the VA health care system in the United States live in Rhode Island.

In comparison, New Hampshire’s total expenditures for the same year fell at 0.7 billion dollars for the same categories. New Hampshire came in at an estimated 111,000
veterans, with 53,000 being 65 years or older. Like Rhode Island, New Hampshire has one inpatient care site, but has seven outpatient care sites. 18,544 of those New Hampshire veterans receive disability compensation, 903 receive pensions, and 1,561 are DIC beneficiaries. 43,767 New Hampshire veterans, out of the previously mentioned national total, are enrolled in the VA health care system.

When it comes to spending, New Hampshire spent more in nearly every category than Rhode Island did. Although this can be accounted for by the difference in budget, there were some areas where Rhode Island did spend more. In terms of general operating expenses, Rhode Island spent $25,055 in 2015, while New Hampshire spent only $6,587. This is interesting to note, as New Hampshire has seven outpatient care sites and two vet centers, compared to the three outpatient canters and one vet center of Rhode Island’s. Additionally, Rhode Island spent $2,427 on construction in 2015, while New Hampshire spent $555. While these numbers themselves are not conclusive, it does seem that continuance of general upkeep and operation seem like worthy causes to maintaining a beneficial veteran system.

Going past finances and looking at the services themselves, the number of beneficiaries in the two states seems relatively close, especially when a 40,000-veteran difference separates the two states. For having 40,000 more veterans in the state, New Hampshire only has 17 more veterans receiving pension than Rhode Island does, and only 397 more beneficiaries of DIC.

While New Hampshire does have more resource centers for veterans to use, a bigger overall budget, and more veterans enrolled in the VA health care system, it is evident that, when compared with a struggling state such as Rhode Island, the disparity
between the two is not enormous. Although New Hampshire has not suffered from any crippling reports about its system, such as other states like Arizona, Pennsylvania, Tennessee, and Georgia, it can be seen that there is definitely room for improvement.

Following a national audit in 2014, the New Hampshire Veteran Affairs system, ran out of Manchester, was not red flagged. However, follow-up reports by other sources, such as news station WMUR, show that there is still need to help New Hampshire veterans. While “the mostly positive report on the VA in Manchester meant it wasn’t linked with a wider national scandal over veterans dying as they waited for medical care,” there are still examples of inadequacy, as with retired Air Force Major Jim Dwyer, who was on a waiting list for 17 months (Sexton 1).

In terms of national averages, New Hampshire had about 500 out of 20,000 scheduled appoints with veterans waiting longer than 30 days to see a physician. This comes out to two percent, with the national average being four percent. But while New Hampshire statistically is faring better than other states, the waits themselves have proved to be individually trying for people who deserve a timely system of care.

NEW HAMPSHIRE TODAY – ISSUES AND ACTORS

As previously stated, most American connotations of the VA are not overly positive, with no shortage of striking stories on malpractice, negligence, and highly-paid, highly criticized officials. While these problems have not plagued the state of New Hampshire quite as severely as they have in other states, New Hampshire has had its fair share of controversy. In March 2016, problems that afflicted VA centers all over the country made their way to the Granite State with the release of a report by the VA Office
of Inspector General. The report, which focused on the Manchester VA Medical Center, and the Medical Center in White River Junction, Vermont, claimed that the centers “manipulated records to make wait times for appointments appear shorter than they actually were” (Biello). In the case of the Manchester VA, some veterans were waiting as long as a year for access to some treatments, and there were some, albeit unsubstantiated, claims of the existence of secret waiting lists. Although no veteran made reports of harm at the hospital, the report brought to attention the need for further work within the state.

Following the release of the report, New Hampshire Senator Kelly Ayotte began to attend regular meetings with the Director of the Manchester VA Medical Center, Danielle Ocker. According to Ocker, newly made Director in May 2015, these scheduling issues described in the report preceded her tenure, and are being repaired by “procedures that have been since put into place prior to her arrival, as well as more recent efforts” (Alden). In their discussion, both Director Ocker and Senator Ayotte publically agreed that more accurate information regarding wait times and appointment preferences is key, along with a simpler and more transparent system to create ease of use for patients.

Although involvement in response to the problematic VA report is important, New Hampshire Senator Ayotte, along with Senator Jeanne Shaheen, have also worked proactively to help increase the quality of care for veterans within the state and beyond. Both serve on the Senate Armed Forces Committee, and have been extremely active in legislating different options for veterans seeking care. Together, the two Senators have put together the Veterans Choice Program, which aims to give veterans more choices in just where exactly they get their treatment.
In early 2014, Senators Ayotte and Shaheen began to promote the idea of Veterans Choice as a new program that allows “veterans to see a doctor outside the Veteran Affairs system,” and have since “introduced legislation to make the program permanent in several states” (Kime 1). Veterans Choice was approved by Congress in August 2014, and is designed to reduce the lengthy wait that veterans often face when trying to access VA-provided medical care. Despite intentions for the program, Senators Ayotte and Shaheen fear that Veterans Choice is currently underutilized because of a lack of understanding, and a lack of awareness. This system could be especially important to states with no full-service VA hospital, which, in addition to New Hampshire, includes Hawaii and Alaska.

The Veterans Choice Program, while designed to make care and treatment easier for veterans by allowing them to “receive care in their communities, rather than at VA hospitals,” has had some roadblocks (Sutherland). A central tenet of Veterans Choice is that it uses a private contractor, Health Net, to manage the healthcare payments of the program. Since the fruition of Veterans Choice, users have voiced their complaints about the program, and Health Net specifically, citing the issue of complexity, as well as “delays in payments from Veterans Choice” (Sutherland).

In April of 2016, Senators Ayotte and Shaheen wrote a letter to the CEO of Health Net in order to make progressive changes to improve the access of care for veterans. The letter emphasizes the disappointment regarding the fact that Health Net’s “implementation of the VCP [Veterans Choice Program] has thus far failed to adequately deliver veterans in the state of New Hampshire…access to care as envisioned by the law” (Heath 1). Specifically, the letter discusses the problems of poor quality calls,
inadequately trained representatives, and insufficient recordkeeping that make participation in the program difficult for veterans. At a public forum on the subject, held by the aforementioned Director Danielle Ocker later that same month, she discusses these efforts, telling veterans that the Medical Center is “working very closely with Health Net” to resolve challenges based on the demand of payments, and that both groups “are working very closely with [their] Congressional partners” to continue the efforts toward ease of care (Sutherland).

In looking to additional recent events, the 2016 Senatorial race between Republican incumbent Ayotte and then-Governor Maggie Hassan continued to highlight veterans issues and New Hampshire government actors’ proposed dedication to them. Kelly Ayotte, wife of an Iraq War veteran, used her bipartisan experience with Democratic Senator Shaheen to run on the platform of her previous accomplishments regarding Veterans Choice. This program, her campaign asserted, is especially important to New Hampshire, a state where the “large veteran population” is forced “to travel long distances and across state lines to receive treatment,” due to the fact that there is “no full-service VA hospital” (“Veterans”). Senator Ayotte also focused her efforts on improving the access that veterans living in the northern areas of New Hampshire have to care, claiming that “her efforts led the VA to approve the opening of VA health care cites in Colebrook and Berlin,” which “will help serve more than 2,500 veterans” (“Veterans”). Additionally, Senator Ayotte also cited her various acts helping veterans with brain injuries and mental health care; these efforts, she asserted, would not dwindle in the face of another term in office.
Governor Maggie Hassan, the eventual winner of the Congressional race, focused not only on her accomplishments, but also on her military supporters; with the creation of the Veterans for Maggie Leadership Council, military leaders such as retired Major General Ken Clark and retired Brigadier General Jim Smith, a former US Ambassador to Saudi Arabia, threw their support behind Governor Hassan. Additionally, Governor Hassan brought to light the fact that she signed a budget allowing for “the expansion of the dementia wing at the State Veterans home, secured funding for an additional veterans service officer at the state Office of Veterans Services,” and signed legislation that permanently legitimized a PTSD commission (“RELEASE: Maggie for NH”).

In terms of moving into the future after Governor Hassan’s victory, she has promised to prioritize the continuation of VA reform, as well as the efforts “to eliminate VA wait list errors, protect whistleblowers who bring VA problems to light, push for ongoing random audits of VA hospitals, and hold accountable those responsible for problems at the VA” (“RELEASE: Maggie for NH”). Overall, she highlights the importance of holding the VA responsible and increasing the accessibility and ease of use regarding programs that already exist for veterans.

Although the stances and actions of elected officials are important in the fight to improve veteran care in New Hampshire, these politicians are not the only actors who are involved. Special types of lobbying take place in a context that is not within the governmental system; this is known as outside lobbying. This “occurs when organized interests attempt to influence elected representatives indirectly by influencing the attitudes and/or behavior of citizens” who are involved in the policy issue (Hall and Anderson 399). In an attempt to mobilize citizens and related audiences, these efforts can
include endeavors such as: public ad campaigns, education programs, and various web-based approaches, to name a few.

Examples of outside lobbying can be found in the array of interest groups throughout New Hampshire that help to do a part. One of these is the Easter Seals program called Veterans Count; this group pledges to serve military members, veterans, and their families, and to respond “rapidly, efficiently, and effectively to the unmet needs” of these people in order “to ensure that they can thrive in their communities” *(Veterans Count)*. The organization holds various events such as auctions, races, and dinners in order to raise funds, awareness, and volunteer participation for veterans across the state.

An additional group that aims to serve this population is Liberty House, which is located in Manchester, New Hampshire. The house, which opened in 2004, aims to help homeless veterans in the transition to rejoining communities and living fulfilled lives. Made of a team of employees and volunteers, “veterans at Liberty House…work together to rebuild confidence, enhance their skills, and lead fulfilling, substance-free lives” *(Liberty House)*. The organization also holds various food drives and fundraisers, such as a veteran’s breakfast, to collect money and to spread the word about veterans in need.

As previously stated, the types of actors who aim to make a difference in this area of interest in policy are not limited by any means; in addition to elected officials and interest groups and organizations, individual people and their efforts also play a role. One such example can be found in Roger Wilkins, the Director of the New Hampshire Branch of Concerned Veterans for America. At a local level, Wilkins has been especially active in problem areas, helping Concerned Veterans for America to host various events, like
barbeques and campaigns with local businesses. In addition to this, Wilkins has voiced his concerns regarding problems at the bigger level. In his analysis, when “realizing the massive scale of the problem,” it becomes clear that reforms requiring an “increase [in] transparency” as well as employee accountability are crucial in increasing VA care not only in New Hampshire, but in the United States, as well (Wilkins). In these efforts, Wilkins and his state branch of Concerned Veterans for America have helped to project important information, not just regarding current happenings, but also focusing on the fundamental wrongdoings that make veteran care such a broad, challenging issue.

Another example of individual actors in the realm of veteran care in New Hampshire can be found in publically-dubbed “power couple” Dan and Renée Plummer. In an effort to help veterans suffering from addiction problems, the couple launched “an endowment fund” in early 2016 “to provide money needed to ensure that veterans have access to substance abuse services” (McMenemy). A cooperative effort with other actors such as Easter Seals and Senator Ayotte, the fund aims to raise half a million dollars. In addition to the endowment fund, Renée Plummer has also teamed up with radio host and former WMUR Director Jack Health to form Hospitals for Heroes.

The idea of Hospitals for Heroes is built upon the strong private and nonprofit health sector in New Hampshire. With a robust health infrastructure made up of approximately 33 hospitals, many “have been screaming for years that they want to serve our veterans” (Chidester). As a result, some of these hospitals have been brought together to help “gather the medical community together and advocate for change” and the public knowledge of non-VA healthcare options that may be closer to home (Chidester). Hospitals for Heroes, while still technically in the making, aims to increase the efficiency
of Health Net in approving appointments and coverage in a timely manner, as well as making sure that veterans have a choice in where they receive the care that they need. Additionally, one thing that sets Hospitals for Heroes apart is the focus on creating “an aggressive public outreach to let local veterans know they are accepted for care and their providers are pre-approved for coverage” (Chidester).

CONCLUSION – THEORY VERSUS REALITY

Before jumping into the advantages found in interest group theory, some negatives must first be discussed. If public opinion is any indicator, it is clear that the VA is an organization that has, both historically and recently, been pummeled with corruption and distrust. In regards to previously discussed theory, Schattschneider’s opinion of a group’s audience as a decisive force seems particularly relevant. In claiming that outcomes of group agendas are tied to the severity of public involvement, it goes without saying that the case of veteran rights is one that is important to many people. Therefore, the conflict becomes more severe. With this comes a public fear that has been more than realized, with the finding of secret lists, agendas, and various types of medical and administrative malpractice. Under this logic, it would seem to be true that in avoiding conflict with a very dependent public body, the VA and its branches have turned to privatization as opposed to open, transparent operations.

No amount of scholarly arguing or evidence-gathering can nullify the harm done by many bodies of the VA. In short, what is done is done. However, in examining the future, one does not have to be bound by Schattschneider’s rather negative view of interest group politics. Many transparent, smaller actors, whether publically elected
officials, devoted interest groups, or benevolent individuals have helped to bring into light the behind-the-scenes wrongdoings; it is here that Truman’s argument regarding the strength and importance of interest groups flourishes. With the allowance of time, organization, and unification, groups are allowed to plan, discuss, and socialize with each other and with the concerned public, including the veterans themselves. Under these conditions, and learning from past experiences, both scholars and citizens can learn more about the political activities of interest groups, and all levels of government can learn how to benefit from their actions; this pinpoints the usefulness of interest group theory in regards to a positive shift of policy.

In reference to the growth of interests groups themselves, as studied by Schlozman and Tierney, their findings are qualitatively proven. With the progression of technology, globalization, and communication, various groups aimed at addressing individual causes continue to pop up. Once only addressed by the VA, the fight for veterans’ rights is now furthered by groups like Veterans Count, Liberty House, and Concerned Veterans for America. Additionally, these groups use a plethora of methods regarding public outreach and communication, varying from public awareness campaigns, to dinner fundraisers, and everything in between. Of course, with the growth of the Internet and social media, awareness of the events and of the groups themselves can only continue to grow. While more conventional actors also have access to these resources, the plethora of groups acting at specific, local, highly-individualized levels can bring together people of all types more effectively.

In discussing Nownes’ work on state level interest groups, his point regarding political cultures playing a role in interest activity can be seen, and it is here that the
notion of New Hampshire as a change-maker is demonstrated. As discussed in a previously-cited 2016 editorial by Jeff Chidester, New Hampshire can be seen as a ground for leadership in veteran care; a lot of the reasons that Chidester cites can be tied to political culture, as discussed by Nownes. First, Chidester claims that New Hampshire’s lack of a full-service VA hospital makes veteran care a more dire issue in New Hampshire than it is in other states, as veterans are forced to travel far distances. The lack of a full-service VA hospital has definitely been a hot topic within veteran-related politics in New Hampshire, and has become a spark for more and more calls for change.

Additionally, Chidester makes claims that New Hampshire’s first-in-the-nation primary, as well as its Senatorial ties to relevant committees, such as the Senate Armed Forces Committee, give the state great political leverage in championing the catalytic action for veterans that the United States needs. Furthermore, as mentioned in the discussion regarding Hospitals for Heroes, New Hampshire’s strong, non-profit health infrastructure allows for increased qualifications regarding the advancement of veteran care. In Chidester’s analysis, Nownes’ ideas of political cultures and interests groups can clearly be seen, emphasizing the fact that New Hampshire is a prime place for veteran care to grow. The diverse blend of characteristics is a platform that is unique to the state, and makes the role of these homegrown actors even more effective.

Lastly, in the examination of policy entrepreneurs, an argument can be made for elected officials as agents of this type of change. As Mintrom and Norman claim, these actors can be in government or out of it; the importance is not in their position, but in
their devotion to the cause and how they express it. In examining the efforts of Senators Ayotte and Shaheen, their roles as policy entrepreneurs are legitimate.

Mintrom and Norman’s first element that depicts policy entrepreneurs is social acuity. It is clear that both Senators have worked in a bipartisan manner, taking time to comprehend and understand ideas from a variety of sources. In reference to the second element, problem definition, Senator Ayotte especially has used both her professional perspective as a U.S. Senator, and her personal perspective as a military dependent to relate problems to her own interests. One could argue that this relation has played a part in her influential involvement, both in creating legislation, and in regularly visiting the New Hampshire VA Medical Center. This has also helped to fulfill the third element of Mintrom and Norman’s idea of a policy entrepreneur, which is building teams. In short, the more involved one is at different levels, the more connections one makes, therefore expanding the team. Lastly, the fourth element of policy entrepreneurs is that they lead by example; in their endeavors, Senators Shaheen and Ayotte have lead not only New Hampshire, but the United States, in creating and sponsoring legislation for veterans all across the country, with their Veterans Choice Program. It is here that we see that policy entrepreneurs, no matter the weight given to their professional role, all have the potential to be associated with interest group theory, as they fight to pursue the strengthening of their cause.

After analysis, scholarly thought can be seen as applicable to the environment of veterans’ rights in New Hampshire and around the country; additionally, many pluralist theories emphasize the fact that the role of these interest-based actors makes a significant difference where other, conventional actors struggle to progress. While the actions of
these interests are without a doubt beneficial and based in benevolent intentions, it brings to light the overall issue. Grassroots groups or individuals who conduct outside lobbying tactics help the cause – but they should not be taking the brunt of the responsibility.

Unfortunately, it seems that this is the case as of late. Veterans Choice, though intended to make the plight of veterans easier, has acted as a clogged system thus far. In addition, as seen through both historical and contemporary records of the VA, problems continue to plague federal efforts. While groups and coalitions such as Veterans Count, Liberty House, and Hospitals for Heroes help veterans at individual levels or aspire to do so in the future, certain aspects, such as funding, are simply not at the prevalent level to make the difference that is ultimately needed. This is not meant to belittle or demean the efforts of these actors; on the contrary, they are admirable in the face of government and bureaucratic struggle. However, they cannot be counted on to carry this responsibility for much longer, both for their own sake, and for the sake of New Hampshire veterans.

After discussion, it is clear that the scholars of interest group and pluralistic political theory make claims that uphold the relativeness of the fight for increased veterans’ rights. Additionally, under this analysis, it can be seen that New Hampshire is an excellent place for potential change to take off, despite the aforementioned challenges. With political characteristics as broad as being the first primary in the nation, and ties as individual as Senatorial family military involvement, when combined with the spark of interest-group involvement, New Hampshire depicts a cooperative environment with great room for change, and even more room for compassion.


O’Toole, Laurence J. “The Public Administrator’s Role in Setting the Policy Agenda.” *Kennesaw State University*, www.ksuweb.kennesaw.edu/~uzimmerm/Notes/


