Women Veterans: A New Era

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Women Veterans Program Manager
Phoenix VA Health Care System
Women are the fastest growing cohort within the Veteran community
Women Veterans

★ 1.8 (or 8%) of the 22 million Veterans are Women

★ Anticipate the number of Women Veterans will increase from 1.8 million in 2011 to 2 million in 2020 and will make up a total of 10.7% of the total Veteran population

Department of Veterans Affairs, VetPop07
Women Veterans

- Fully 14% of Active Duty and 18% of the National Guard and Reserve forces are women.

- In 2010, the estimated median age of female Veterans was 48, compared to 62 for male Veterans.
Women Veterans - By the Numbers

- Alabama - 34,902
- Alaska - 8,406
- Arizona - 46,992
- Arkansas - 19,496
- California - 167,086
- Colorado - 37,699
- Connecticut - 15,297
- Delaware - 6,365
- District of Columbia - 3,881
- Florida - 139,474
- Georgia - 75,198
- Hawaii - 11,495
- Idaho - 10,371
- Illinois - 56,656
- Indiana - 33,015
- Iowa - 14,744
- Kansas - 17,844
- Kentucky - 24,372
- Louisiana - 26,958
- Maine - 10,230
- Maryland - 48,615
- Massachusetts - 26,473
- Michigan - 45,371
- Minnesota - 23,077
- Mississippi - 17,723
- Missouri - 37,287
- Montana - 7,921
- Nebraska - 11,198
- Nevada - 21,133
- New Hampshire - 8,793
- New Jersey - 28,438
- New Mexico - 16,379
- New York - 65,116
- North Carolina - 68,380
- North Dakota - 4,567
- Ohio - 60,704
- Oklahoma - 26,221
- Oregon - 25,226
- Pennsylvania - 63,593
- Puerto Rico - 7,216
- Rhode Island - 5,053
- South Carolina - 34,915
- South Dakota - 5,873
- Tennessee - 38,669
- Texas - 152,571
- Utah - 10,740
- Vermont - 3,696
- Virginia - 90,234
- Washington - 55,060
- West Virginia - 11,700
- Wisconsin - 28,023
- Wyoming - 4,400
- Territories/Foreign - 9,355

TOTAL WOMEN VETERANS SERVED: 1,824,198
Women Veterans and the VA

- Enrolled Women Veterans represent 6.7% of the total enrolled Veteran population in the VA Health Care System

- Approximately 55% OEF/OIF/OND Women Veterans currently use the VA

VHA Health Care Utilization among OEF/OIF/OND Veterans
Cumulative from 1st Qtr FY2002 – 2nd Qtr FY 2012,
Released June 2012
Population Explosion

Source data supplied 7/9/10 by the Office of the Actuary, Office of Policy and Planning, Department of Veterans Affairs
Women VA Patients: Three Peaks

Age distribution among women Veteran VHA patients (#), FY00 and FY09

Source: Women’s Health Evaluation Initiative (WHEI) and the Women Veterans Health Strategic Health Care Group; Sourcebook: Women Veterans in the Veterans Health Administration V1: Sociodemographic Characteristics and Use of VHA Care, 2011.
Age Demographics at the PVAHCS*

Under 25: 185
25-29: 650
30-39: 1,363
40-49: 1,399
50-59: 1,699
60-69: 795
70-79: 392
80-84: 98
85+: 385

*currently enrolled in the Phoenix VAHCS
## Top 25 Diagnosis at the PVAHCS

<table>
<thead>
<tr>
<th>Diagnosis</th>
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<tbody>
<tr>
<td>Post Traumatic Stress Disorder</td>
<td></td>
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<tr>
<td>Depressive Disorder, NOS</td>
<td></td>
</tr>
<tr>
<td>End Stage Renal Disease</td>
<td></td>
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<tr>
<td>Unspecified Essential Hypertension</td>
<td></td>
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<tr>
<td>Lumbago</td>
<td></td>
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<tr>
<td>Other and Unspecified Hyperlipidemia</td>
<td></td>
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<tr>
<td>Diabetes Mellitus Without Mention of Complication, Type II or Unspecified</td>
<td></td>
</tr>
<tr>
<td>Major Depressive Affective Disorder, Recurrent Episode, Unspecified</td>
<td></td>
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<tr>
<td>Allergic Rhinitis, Cause Unspecified</td>
<td></td>
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<tr>
<td>Pain in Joint involving Shoulder Region</td>
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<tr>
<td>Pain in Joint involving lower leg</td>
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<tr>
<td>Anxiety State, Unspecified</td>
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<tr>
<td>Obesity, Unspecified</td>
<td></td>
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<tr>
<td>Multiple Sclerosis</td>
<td></td>
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<tr>
<td>Osteoarthritis, Unspecified whether generalized or localized</td>
<td></td>
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<tr>
<td>Tobacco Use Disorder, Unspecified Use</td>
<td></td>
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<tr>
<td>Esophageal Reflux</td>
<td></td>
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<tr>
<td>Nonallopathic Lesions of Cervical Region, not elsewhere classified</td>
<td></td>
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<tr>
<td>Bipolar I Disorder, Most recent episode (or current) unspecified</td>
<td></td>
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<tr>
<td>Cervicalgia</td>
<td></td>
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<tr>
<td>Nonallopathic Lesions of Lumbar Region, not elsewhere classified</td>
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<tr>
<td>Backache, unspecified</td>
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</tr>
<tr>
<td>Nonallopathic Lesions of Thoracic Region, not elsewhere classified</td>
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<tr>
<td>Schizoaffective Disorder, Unspecified</td>
<td></td>
</tr>
<tr>
<td>Unspecified Acquired Hypothyroidism</td>
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</tbody>
</table>

*Often related to Military Sexual Trauma
OEF/OIF/OND

Updated Roster of OEF/OIF/OND Veterans Who Have Left Active Duty through February 29, 2012

1,478,370 OEF/OIF/OND Veterans have left active duty and become eligible for VA health care since FY 2002

821,318 (~56%)2 Former Active Duty troops

657,052 (~44%)2 Reserve and National Guard

VHA Health Care Utilization among OEF/OIF/OND Veterans
Cumulative from 1st Qtr FY2002 – 2nd Qtr FY 2012,
Released June 2012
Distribution of OEF/OIF Veterans Relative to VA Medical Center and Military Hospital Locations

VA Hospital
MTF Hospital
OEF/OIF Veterans by county
- 0 - 50
- 51 - 300
- 301 - 1,000
- 1,001 - 10,000
- 10,001 - 27,000

Source: VAST as of 06/30/06; OEF/OIF as of Aug. 09.
OEF/OIF/OND and the VA

Among all 1,478,370 separated OEF/OIF/OND Veterans, 804,704 (~54%) have obtained VA health care since FY 2002 (cumulative total).

821,318 Former Active Duty in DMDC roster
451,494 (~55%) have sought VA health care since FY 2002 (cumulative total).

657,052 Reserve/National Guard in DMDC roster
353,210 (~54%) have sought VA health care since FY 2002 (cumulative total).
## OEF/OIF/OND and the VA

### % OEF/OIF/OND (n=804,704)

<table>
<thead>
<tr>
<th>Sex</th>
<th>Male 88.0</th>
<th>Female 12.0</th>
</tr>
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<tbody>
<tr>
<td>Unit Type</td>
<td></td>
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<tr>
<td>Active Duty</td>
<td>56.1</td>
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<tr>
<td>Reserve/Guard</td>
<td>43.9</td>
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<tr>
<td>Branch</td>
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<tr>
<td>Air Force</td>
<td>12.5</td>
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<tr>
<td>Army</td>
<td>60.3</td>
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<tr>
<td>Marines</td>
<td>13.8</td>
<td></td>
</tr>
<tr>
<td>Navy</td>
<td>13.3</td>
<td></td>
</tr>
<tr>
<td>Rank</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enlisted</td>
<td>91.2</td>
<td></td>
</tr>
<tr>
<td>Officer</td>
<td>8.8</td>
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</table>
Most Common Conditions for Women

- Back problems
- Joint Disorders
- Post Traumatic Stress Disorder (PTSD)
- Reproductive Health Conditions
- Mild Depression
- Musculoskeletal Problems
- Adjustment Disorders
- Skin Disorders
- Major Depression
- Hearing Disorders

Source: Haskell, 2011, Women’s Health Issues
How many women OEF/OIF Veterans Have TBI? (Iverson, 2010)

OEF/OIF Screened Veterans
N = 327,633

Females
N = 40,448
Had Comprehensive TBI Evaluation
N = 1,912
Confirmed Deployment-related mTBI
N = 654

Males
N = 287,185
Had Comprehensive TBI Evaluation
N = 31,873
Confirmed Deployment-related mTBI
N = 11,951
New Directions in Care of Combat Veterans

- formalize the notion of post-combat care
- standardize approaches to post-combat care
- integrate post-combat care services (both within VA, interagency and community-wide) to enhance care for returning OEF/OIF/OND Veterans
- enhance post-combat care for Veterans from earlier conflicts
- establishing systems of care for Veterans of future conflicts
Post-Deployment Integrated Care

- Combat injury
- Non-combat injury
- Environmental exposure illness
- Non-combat illness
- TBI
- Marital/family financial difficulties
- Post-combat symptoms
- Spiritual / existential struggles
- Hearing loss tinnitus
- Mental health
- C&P needs

WOMEN VETERANS HEALTH CARE

You served, you deserve the best care anywhere.
Women Veterans Across the Spectrum
Higher Physical and Mental Health Needs

- A higher proportion of female Veterans (22%) are diagnosed with mental health problems than male Veterans.

- 31% of Women Veterans have both medical and mental health conditions compared to 24% of male Veterans.
Trauma

Research suggests that 81-93% of women Veterans have been exposed to some type of trauma.

Rates of trauma are significantly higher than the civilian population.

Often times, these experiences begin prior to military service.

Researchers have found that more than half of women Veterans experience some type of trauma or abuse before joining the military.

(Zinzow et al., 2007)

(Guarino, 2011)
Higher Incidence of Military Sexual Trauma

★ One in five Women Veterans who use the VA for health care screen positive for MST

★ FY2011 data reveals 19.4% of OEF/OIF/OND female Veterans reported a history of MST
Medical conditions more common in sexual trauma survivors

- Arthritis
- Obesity
- Diabetes
- Breast Cancer (older women)
- Hypertension
- Hyperlipidemia
- Myocardial Infarction
- Chronic Lung Disease
- Thyroid Disease (older men)
- Endometriosis
- Miscarriage
- Infertility
Setting the Stage

- Acknowledge that the exam can be stressful (normalize and validate)
- Reassure her
- Elicit preferences (what has worked or not worked)
- Explain processes and next steps
- Be sensitive to responses
- Know your resources
Women Veterans are up to **four times** more likely to be homeless than non-Veteran women.

(Foster, 2010)
Homelessness Among Women Veterans

Women Veterans comprise 5% of nation’s homeless Veteran population.

Of the estimated 107,000 currently homeless Veterans, 7,000 are female. 23% of these women have children under the age of 18.

(United States Department of Veterans Affairs; U.S. Dept. of Veterans Affairs Center for Women Veterans, 2010; Mulhall, 2009)
Phoenix Area Programs

★ UMOM and SSVF

★ Ozanom Manor (Contract)

★ US VETS (Grant Per Diem)

★ Crossroads for Women (Contract)

★ HUD/VASH
Objectives

★ Learn about the U.S.DOL, Women’s Bureau

★ Provide overview of Trauma-Informed Care Guide for women veterans experiencing homelessness

★ Explore how to use the Guide in your workplace

(Irwin, June 2012)
What They Learned

★ Women veterans often don’t self-identify as being veterans

★ Women veterans are “socialized not to seek help”

★ Lack of integrated communication and delivery of veteran services/benefits

★ Women veterans don’t access benefits (don’t understand, don’t feel safe)

★ Military mental health issues often related to MST and/or PTSD

(Irwin, June 2012)
Creating a Safe and Supportive Environment

- The program incorporates military-related decorations and materials that include and are relatable to women veterans.
- Creating an environment where women can tell their “war stories.”
- Material is posted about available benefits for women veterans.
- Material is posted about what it means to be a “Veteran.”
- Use Motivational Interviewing techniques.
- Offering choice and control.
- Always honor their service.
- Validate their perspective.
- Empower veteran to make changes for themselves — *let them teach you*

*(Guarino, 2011)*
Suicide-Related Ideation & Behaviors
Brief Review

★ Suicide is the 3rd leading cause of death for 18-military and civilian women (WISKARS 2009)

★ Female veterans are 79% more likely to die by suicide than civilian women

Ghahramanlou-Holloway 2011
Suicide-Related Ideation & Behaviors
Clinical Recommendations

- Assess for suicide-related ideation
- Be mindful of stigma
- Negative perceptions of women
  “Women are still seen as weak, whiny, hormonal and incapable”
- Be mindful of fears of MH and involuntary hospitalization when making a referral to MH
- Assess for access to “lethal means”

Ghahramanlou-Holloway 2011
Women Veterans Program

- Full time Women Veterans Program Manager
- Development of services to meet both mental health and physical needs of Women Veterans
- Education and Outreach
- Community Partnership
Considerations

★ Women Veterans are the fastest growing Veteran population
★ Understanding Women Veterans unique needs
★ Impact on care
★ VA and community response
Please don’t call me mister.
Think twice about how you address her.
It’s our job to give her the best care anywhere.

Mr. Conner, we’re ready for you now…Mr. Conner…?