

WOMEN VETERANS HEALTH CARE

Women Veterans' Transition Home

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Women Veterans Today



Women represent nearly 16% of today's active duty military and 18% of guard and reserve forces.

Women serve in every branch of the military.

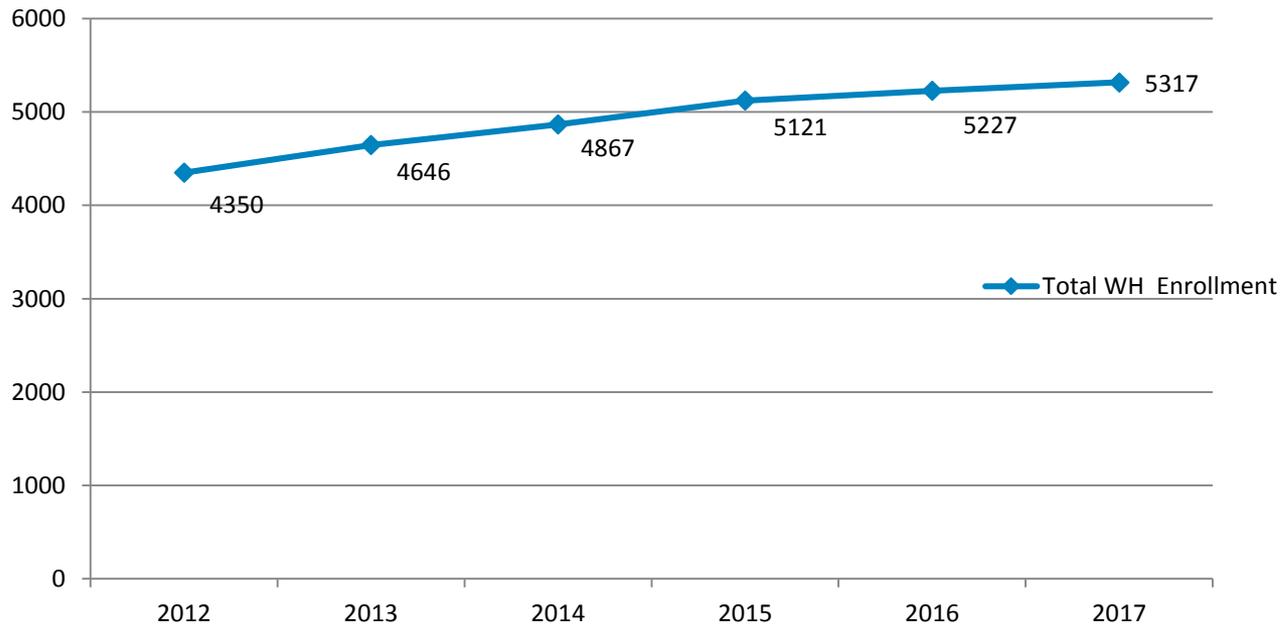
There are 2.2 million living women Veterans.

The average age of women Veterans using VA care is 48 years, compared to 63 years for male Veterans.

The number of women Veterans using VA care is expected to increase dramatically.

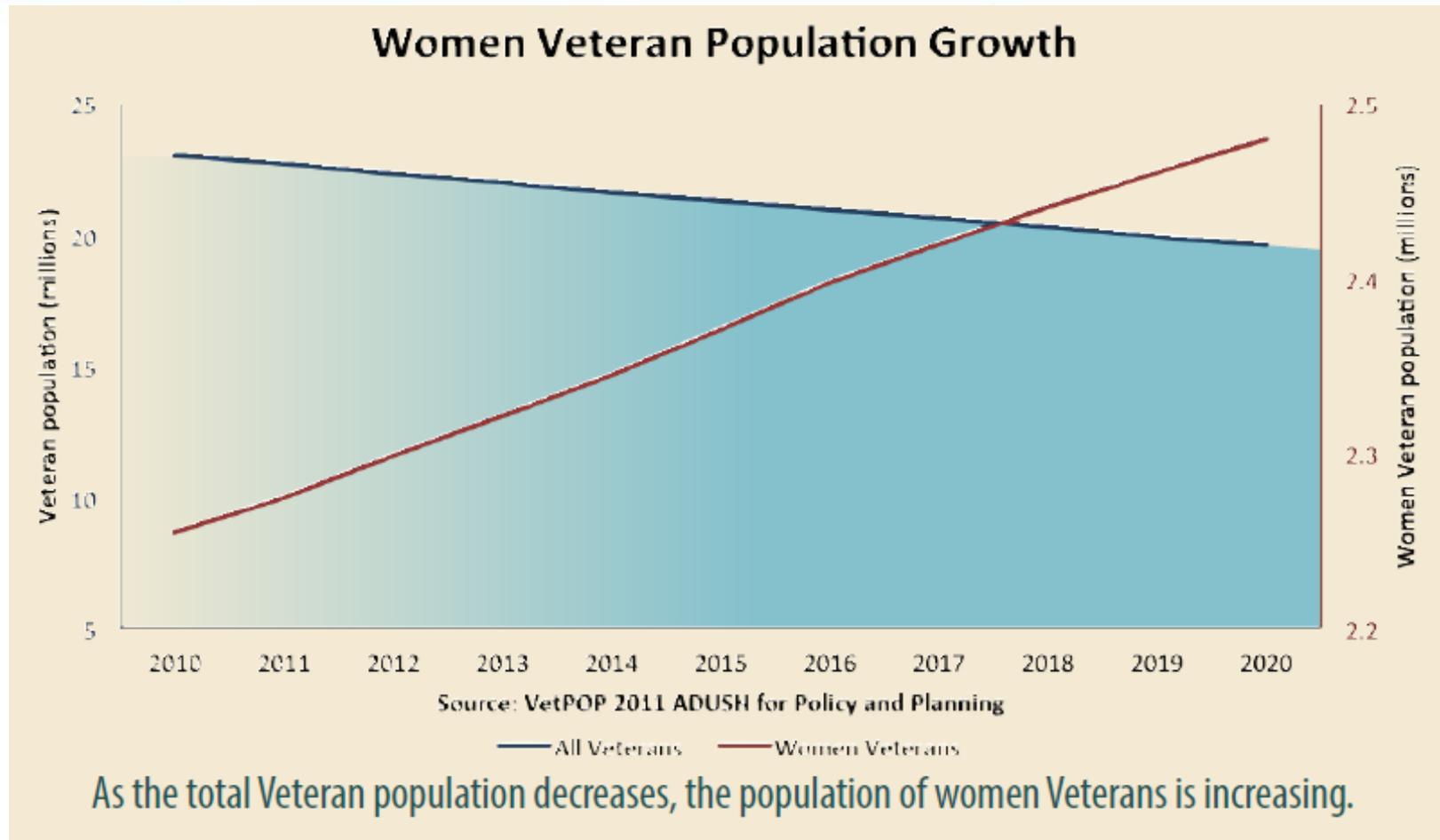
Women Veteran Enrollment at VA NJ Health Care System

Women Veteran Enrollment Priority 1 to 8D



Current women Veteran enrollment data was obtained through VHA Support Service Center (VSSC) and is complete through FY 17

Women Veteran Projected Growth



Top Transitional Challenges for Women Veterans



TOP TRANSITIONAL CHALLENGES

59% Navigating VA programs, benefits, and services

55% Finding a job

47% Financial struggles*

41% Depression*

38% Getting socialized to civilian culture

37% Skills translation

33% Contradictory information from different sources*

32% Disability

31% Understanding GI Bill benefits

30% Employment preparation



* indicates significantly higher for female service members compared to male service members

Readjustment to Civilian Life



- Physical injuries
- Mental health disorders
- Re-establishing personal and family relationships
- Unemployment and financial concerns
- Homelessness

Medical Diagnoses: 149,452 Female OEF/OIF/OND Veterans Seen in VA (2002-2015Q3)

- Musculoskeletal (MSK) 62%
- Mental Disorders 57%
- Nervous System/Sense Organs 51%
- Genitourinary System 46%
- Digestive System 41%
- Endocrine System 40%
- Respiratory 38%
- Skin Diseases 32%
- Injury/Poisoning 31%
- Infectious/Parasitic Diseases 23%
- Circulatory 21%

Common Mental Health Disorders

OEF/OIF Women Veterans (2002-2015Q3)

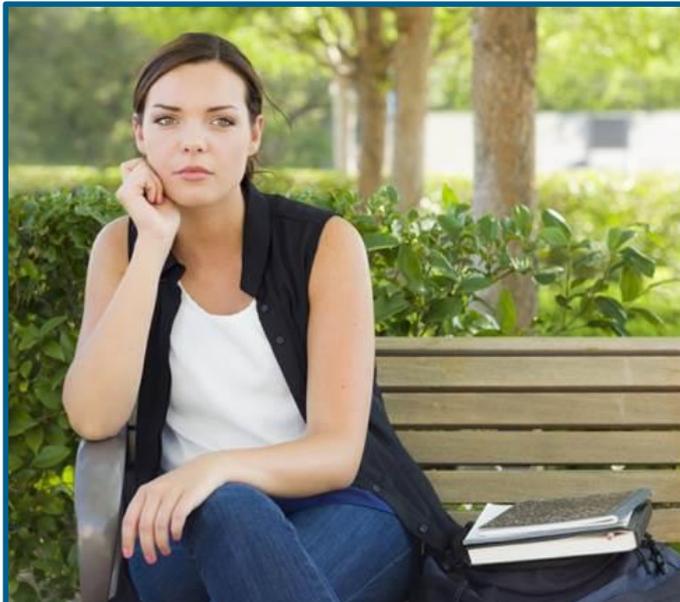
Adjustment reaction (includes PTSD)	55,205
Depressive disorders	48,919
Anxiety, dissociative, mood, somatoform disorders	45,253
Non-dependent substance abuse	28,995

PTSD Rates & Risk Factors Among Women



- 15-17% of OEF/OIF Veterans
- Co-morbid substance use, especially binge drinking
- Risky behaviors, suicidal ideation
- Re-victimization
- Presents as medical complaint/ psychosocial stressor

Depression and Anxiety in Women



- Women twice as likely be diagnosed with depression
- 2/3 of patients with GAD are female
- Women twice as likely to be diagnosed with a panic disorder

Eating Disorders

- In overweight/obese Veteran population...
 - 76% of women and 79% of men binge eat ≥ 2 times a week
- Habits develop during deployment
- Risk factors
 - MST, strict weight and physical fitness requirements, combat exposure, PTSD

Higgins et al. *Obesity*, 2013; Bartlett & Mitchell. *Int J Eat Disord*, 2015.

Military Sexual Trauma (FY2015)

Of Veterans seen at a VA facility & screened for MST by a VA provider...

- 85,003 (25.0%) of women reported MST
- 60,599 (1.3%) of men reported MST

Of VA OEF/OIF/OND outpatients screened for MST by a VA provider...

- 16,440 (23.0%) of women reported MST
- 4,850 (1.0%) of men reported MST

Addressing Reintegration Concerns

Adjusting to
civilian lifestyle

Resuming family
roles and
responsibilities

Reconnecting

Unemployment

Housing and
Finances

Redeployment

Feeling
responsible for
past duties

Unable to share
experiences;
feeling alone

Concern for
those still
deployed

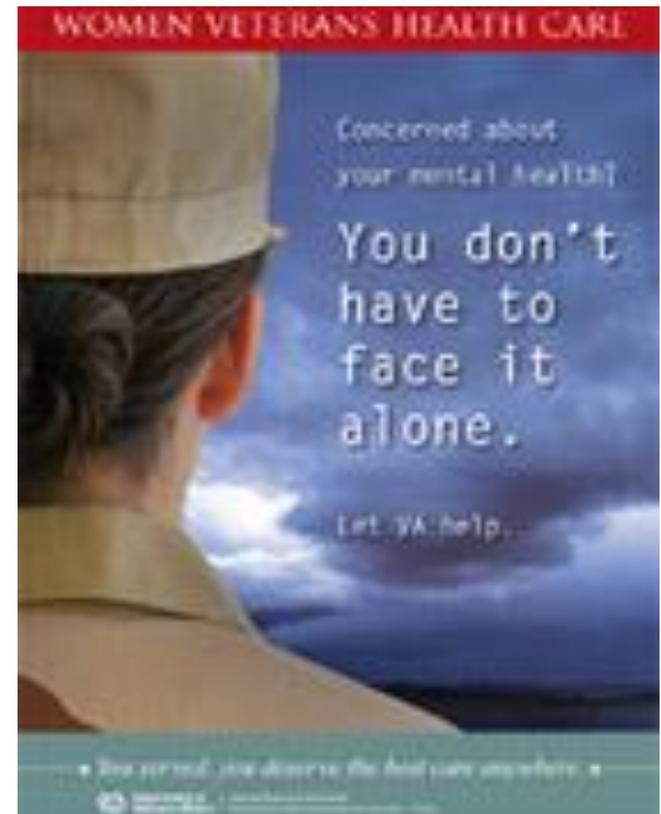
Returning Home



https://www.youtube.com/watch?v=VuZAW4dX_PA

Family and Deployments

- Leaving family behind is stressful:
- While in our culture, it may be that men are programmed to give children over to others to care for, women say that the children “never leave their mind.”
- This can create a level of constant stress that is additive and can contribute to anxiety and/or depression



Deployments Disrupt Normal Patterns



- Children can suffer from attachment issues:
 - Consider leaving a child who is 4-6 months old and returning when the child is 18 months old.
 - Children frequently develop behavioral issues as well; this is more common among National Guard and Reservists, where children are isolated from military peers.
 - Consider ‘tweens and teens, anger over missed events, school, etc.
- Family wants the Woman Veteran to take up where she left off: “as if the laundry has piled up while I was gone.”

Suicide Prevention Services

- Female Veterans commit suicide at six times the rate of female civilians.
- Women Veterans who used VA health services had significantly lower rates of suicide than women Veterans who did not use VA health services.

Suicide Risk : Firearms

Veterans are comfortable owning and handling weapons –

A higher likelihood of using firearms, which are highly lethal, as the method for suicide may explain some of the difference in suicide rates between Veteran and civilian women.

Unemployment and financial concerns



67% FEMALE VETERANS

characterized their financial transition as difficult or very difficult, compared with 47% of male veterans

37% FEMALE VETERANS

selected "loss of income" as a key transition challenge, compared with 23% of male veterans

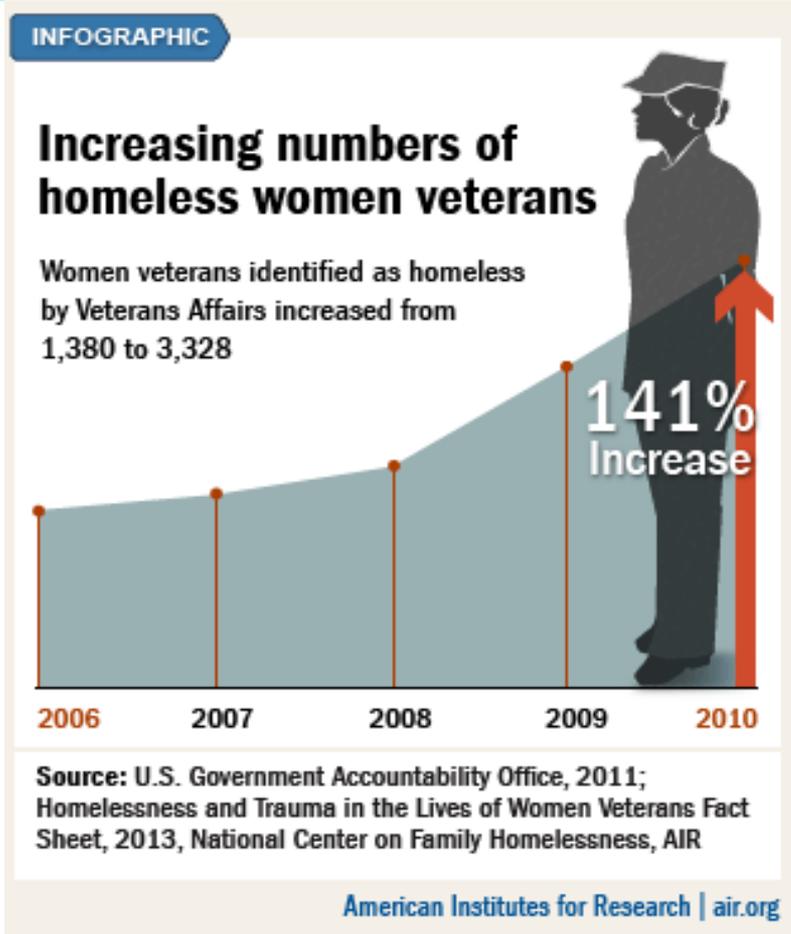


Female veterans took about **3 MONTHS LONGER** than males to find employment after transition*

Women Veteran Homelessness

- The risk of women veterans becoming homeless is four times greater than for male veterans.
- 9% of the nation's homeless veteran population is comprised of women.

<http://www.veteransinc.org/about-us/statistics/#homelessness>



I am *NOT* Invisible

“Everyone assumes my husband is the Veteran and he never served in the military”

“I feel invisible”

*Participant from the DAV Women Veterans Focus Group
August 11, 2014 (4) 1*

I SERVED MY COUNTRY.
RECOGNIZE ME. RESPECT ME. SUPPORT ME.

I AM **NOT**
INVISIBLE

WE CAN ALL HELP.

WOMEN VETERANS HEALTH CARE

VA Department of Veterans Affairs
CARE EXCELLENCE in the 21st Century
www.womenhealth.va.gov

which one
is the
veteran?

Both.

It's **our job** to give **every vet** the best care anywhere.



WOMEN VETERANS HEALTH CARE

 Department of
Veterans Affairs

Learn more at
www.womenhealth.va.gov

Assisting Women Veterans



- End Harassment Campaign
- Culture Change Campaign
- WVPM Advocacy
- MST programs
- WH-Providers
- VA Homeless Hotline
- Women Veterans National Call Center Hotline
- 1-877-WAR-VETS



WOMEN VETERANS HEALTH CARE



**To care for him who shall have borne the
battle and for his widow and his orphan“**

-Abraham Lincoln

Questions?



References

- U.S. Department of Veterans Affairs, Office of Mental health and Suicide Prevention, August, 2017. *Facts about suicide among Women Veterans*.
https://www.mentalhealth.va.gov/docs/mst_general_factsheet.pdf
- Department of Veterans Affairs, May 2015, *Military Sexual Trauma*.
- <https://heroesonthewater.org/mother-veteran/>
- Syracuse University Institute for Veteran and Military Families, March 2018
Women in the Military from Service to Civilian Life
- Shamaskin-Garroway, A. M., Knobf, M. T, Adams, L. J., and Haskell, S. (2018). “I think it’s pretty much the same, as it should be”: Perspectives of inpatient care among Women Veterans. *Qualitative Health Research Vol. 28(4)* 600-609
- Conrad P. L. and Armstron, M. L. October-December, 2017. Deployed Women Veterans: Important culturally sensitive care. *Nursing Forum Vol. 52, No. 4*.
- https://www.womenshealth.va.gov/WOMENSHEALTH/docs/Sourcebook_Vol_3_FINAL.pdf
- <https://www.dav.org/wp-content/uploads/women-veterans-study.pdf>
- Szelwach, C. R., Steinkogler, J., Badger, E. R., and Muttukumaru, R. (2011). Transitioning to the civilian workforce: Issues impacting the reentry of rural Women Veterans. *Journal of Rural Social Services*, 26 (3) pp. 83-112.
- Zabriskie A. US Army Research Institute of Environmental Medicine, 2006; Geary et al. *Occup Med* (London), 2002.
- Hayes, P. M. (2017), Veterans Health Administration Care and Benefits. Presentation presented at the 2017 National Women Veterans Summit.
- Igbal, S., Roybal, L. Polack, B. and Baier-Manwell, L. (2018) Post-deployment care for OEF/OIF/OND Women Veterans. Presentation presented at the Primary Care Women’s Health Mini Residency, 2018).