

Sexual Violence Exposures and Women Veteran's Gynecologic Health

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BACKGROUND / RATIONALE:

Background: The Women's Health Act of 1992 acknowledged women sexually victimized in the military as a priority-care population for the Department of Veterans Affairs (DVA). Subsequently, it has become a major health care provider for women whose reproductive health may be at risk. However, the long-term gynecologic health or health services utilization of military women or sexually assaulted women has not been well studied. This year (2004) the American college of Obstetricians and Gynecologists recommended decreasing the frequency with which the average women has gynecologic screening. The applicability of these preventative health recommendations for women who have been raped is unknown. In our pilot study, which reviewed charts (n=430) from a 5-year time period, 30% of women veterans had at least one cervical cytologic abnormality. This is a four-fold higher rate of abnormal findings than in the general population.

OBJECTIVE (S):

The objectives are:

- 1) To determine if the odds of current gynecologic disorders are significantly greater for sexually assaulted veterans in comparison to non-assaulted peers.
- 2) To identify if the presence and frequency of cofactors known to be associated with cervical cytologic abnormalities is greater in sexually assaulted veterans when compared to non-assaulted peers.
- 3) To determine the frequency and types of gynecologic services used by sexually assaulted women veterans in comparison to that of non-assaulted peers.
- 4) To identify and compare type and frequency of gynecologic health risk behaviors in sexually assaulted veterans with that of their non-assaulted peers.

METHODS:

A random sample of women veterans who have sought care from the Iowa City VAMC within the preceding two years will be identified. They will be mailed an information summary and asked to

participate in a study assessing gynecologic health of women veterans. Consenting participants will complete a telephone interview. This interview will assess socio-demographic variables; rape exposures; health history; gynecologic diagnoses, procedures and care utilization; health status; health risk behaviors post-rape care; post-traumatic stress; and access to care. Medical records will be reviewed for documented gynecologic diagnoses, interventions and care utilization occurring during the preceding 5 years. Statistical analyses (descriptive statistics, multiple logistic regression modeling) will be performed with SAS.

FINDINGS / RESULTS:

It is anticipated that our findings will improve evidence-based clinical practice. This study could identify a population of women for whom more aggressive screening or interventions may be appropriate.

STATUS:

This project is ongoing.

IMPACT:

Determining the associations between gynecological health, sexual violence exposures and gynecological services utilization could guide national resource allocation for a priority population and would have direct implications for DVA policies regarding women's health care. Furthermore, these results should help determine if subsequent population based or intervention studies are needed to address disparities in health care for women veterans.

PUBLICATIONS:

None at this time.