



History of the Department of Veterans Affairs Part 9

In response to the growth in the number of women veterans, VA has expanded medical facilities and services for women and increased efforts to inform them that they are equally entitled to veterans benefits. The Veterans Health Care Act of 1992 provided authority for a variety of gender-specific services and programs to care for women veterans.



VA's [Center for Women Veterans](#)

The proportion of women among the veteran population has risen steadily since World War I. That war produced approximately 25,000 women veterans, principally serving in the Army Nurse Corps.

Women veterans in World War II numbered 319,000, or about 2.1 percent of that war's veteran population. When Congress passed the Veterans Preference Act of 1944, giving veterans employment preference, the bill included a provision, the first ever granted by

Congress, for female members of the armed forces. They were entitled to employment preference, along with the husbands or widowers of the ex-servicewomen.

Women veterans represented 4.1 percent of the veteran population by 1990 and 7.0 percent by the end of 2005. Their proportion of the total veteran population is projected to continue to grow as a result of the growing female population in the armed forces.

VA's Center for Women Veterans was established in November 1994. The center's mission is to ensure that women veterans have the same access to VA benefits and services as do male veterans, that VA programs are responsive to gender-specific needs of women veterans, to improve women veterans' awareness of services, benefits and eligibility criteria, and to insure that women veterans are treated with dignity and respect.

In 1997, the Women Veterans Health Program Office was established within the Office of Public Health and Environmental Hazards and the first full-time director of the Program was appointed. VA established eight Comprehensive Women's Health Centers and four Stress Disorder Treatment Centers.

Within VA, there were notable advances by women. In 1962, Irene Parsons was the first woman to be appointed head of a major VA office when she became director of personnel services of the Department of Veterans Benefits. She was later named assistant administrator for personnel at VA's Central Office in 1970.

Dorothy L. Starbuck served as chief benefits director of the Department of Veterans Benefits from 1977 to 1985, which set a record for longevity in the office. Mary Lou Keener, a Navy nurse in the Vietnam War, was the first woman to be named VA's top lawyer. She was confirmed as General Counsel from 1993 to 1997.

To assist minority veterans, the Center for Minority Veterans was authorized by Congress in 1994. The Center promotes the use of existing programs by minority veterans and proposes new programs, benefits and services to meet the specific needs of minority veterans.

The Veterans Home Loan Program Amendments of 1992 were the most significant changes in the loan guaranty program in more than two decades. The new law authorized the Secretary of Veterans Affairs to let interest rates be negotiated between veterans and the lenders, with the payment of discount points being negotiated among the veteran, the seller and lender.

The new home-loan law also authorized the testing of a VA-guaranteed, adjustable-rate mortgage modeled after the Federal Housing Administration's adjustable-rate mortgages.

And for the first time, home-loan guaranties were extended to individuals who had completed at least six years of honorable service in the Selected Reserves or the National Guard. Other features included reduced fees for refinancing loans and direct loans to Native American veterans living on Trust Lands.

On the medical front, VA's hospitals in 1995 were grouped into 22 Veterans Integrated Service Networks. This reorganization was part of the Veterans Health Administration's response to changes in health-care delivery. Critical elements of this transformation included population-based planning, decentralization, universal availability of primary care, a shift to outpatient care from inpatient care, and an emphasis on measuring health-care performance on the outcome of patient treatment.

In 1997, acting on legislation enacted the previous year, the department began enrolling most veterans in the VA health-care system and made eligibility criteria the same for inpatient and outpatient care. VA began establishing community-based outpatient clinics across the country to increase points of access to health-care.

Since 1998, veterans who served in a combat zone or in comparable hostilities have been eligible for free VA hospital care, outpatient services and nursing home care for two years after leaving active duty for illnesses and injuries that may be the result of their military service. In 2000, VA established the Benefits Delivery at Discharge program at military discharge sites to assist service members separating from the military.



Combat veterans are eligible for VA health care for two years after leaving the service.

At the dawn of the 21st century, VA moved aggressively to combat hepatitis-C, to make pain measurement and management integral treatment tools and made applications for compensation, pension, rehabilitation and health care benefits available to personal computer users. Family coverage became available for the first time under the Servicemembers' Group Life Insurance program in 2001 and VA medical programs garnered numerous awards for excellence, including quality of service, patient safety and patient satisfaction. Since 2000, VA has led the way in the use of bar coding to improve accuracy and reduce errors in the administration of medicines. Still, it was clear that significant changes were needed for the department to meet the needs of an increasingly mobile veteran population.

VA's health care system was originally designed and built to meet the needs of America's veteran population of the mid-20th century, when inpatient care, with long admissions for diagnosis and treatment, was the primary focus. However, by 2002, changes in geographic concentrations of veterans and new methods of medical treatment called for a re-examination of where and how VA's assets needed to be focused. A comprehensive process called CARES (Capital Asset Realignment for Enhanced Services) was undertaken to bring the nation's largest, but aging, health care system into the 21st century.



The three-year CARES study called for new hospitals in Orlando and Las Vegas, more than 150 new community clinics around the country, several new spinal cord injury centers and

blind rehabilitation centers and expanded mental health outpatient services nationwide. The CARES plan also called for transferring care from antiquated facilities to more modern or better located VA facilities or contracting for care in local communities. By 2005, VA was operating 157 medical centers and more than 850 community-based outpatient clinics.

Working closely with the Department of Defense and in partnership with state and local government benefits counselors and veterans service organization representatives, VA annually briefs about 200,000 service members around the world before discharge to help prepare them for civilian transition and VA benefits. The department operates benefits offices at more than 130 military installations to help service members with conditions arising during service prepare to begin receiving VA compensation promptly after discharge.

On July 21, 2005, VA celebrated its 75th Anniversary. It had grown from the Veterans Administration with an operating budget of \$786 million serving 4.6 million veterans in 1930 to the Department of Veterans Affairs with a budget of \$63.5 billion serving nearly 25 million veterans. Throughout its 75 years, VA evolved with the times to meet the needs of a changing society and veterans population. Unchanged throughout its history has been VA's dedication to fulfill Lincoln's call to "care for him who shall have borne the battle and for his widow, and his orphan."

End of Part 9

VA operates hundreds of medical facilities, issues millions of checks for education, disability and pensions, and supervises 120 national cemeteries. With approximately 236,000 employees, VA is America's second largest federal agency. When eligible dependents and survivors are included, approximately 63 million people -- about one-quarter of the nation's population -- are eligible for VA benefits and services. On July 21, 2005, VA celebrated 75 years of serving America's veterans. VA is providing this 10-part "History of the VA" to help observe this 75th Anniversary year.