



Fact Sheet

March 2012

Women's Health Research at VA

Background: With increasing numbers, women have served in the military and played critical roles in our Nation's recent conflicts in Iraq and Afghanistan. It is estimated that by 2018, 10 percent of the Veteran population will be comprised of women. Moreover, women Veterans are among the fastest growing segments of new health care users, with as many as 44 percent electing to use VA health care.

In response to this changing demographic, the VA health care system has rolled out a wide variety of initiatives to improve access and quality of care for women Veterans. Along with clinical advances, VA women's health research has dramatically accelerated. In fact, more research on the health of women Veterans was published between 2004 and 2008 than in the previous 25 years combined. This is attributed, in part, to VA's Office of Research and Development (ORD) putting forward a comprehensive research agenda on women's health in 2004 that spanned biomedical/laboratory, clinical sciences, rehabilitation, and health services research, which led to a growing VA research portfolio. To further accelerate this research agenda and the impact of research on VA care for women Veterans, ORD's Health Services Research and Development Service (HSR&D) funded the VA Women's Health Research Network with a mission to provide technical consultation, education/training, and mentorship support to augment the efforts of a now substantial group of VA researchers focused on women Veterans' health.

VA's investment in women's health services research is unprecedented; enhanced by strong research-clinical partnerships with leaders in VA Central Office (e.g., VA's Women Veterans Health Strategic Health Care Group, Office of Mental Health Services, and Office of Patient Care Services). In fiscal year 2011, VA research funded 60 studies on women's health for a total investment of more than \$12 million.

VA also has promoted multi-site research through the inaugural sites. This expanded number of VA Women's Health Practice-Based Research Network sites is designed to facilitate the recruitment of women Veterans nationwide into the VA health care system, ensure their inclusion in a wider array of VA research, expand clinical-research collaborations, and foster the design and testing of interventions addressing the health and care of women Veterans.

Key Activities and Studies:

Women's Health Issues Journal: Focus on Women Veterans

Among the many accomplishments of the VA's Women's Health Research Network was publication of a special supplement to the *Women's Health Issues* journal. The supplement

featured 18 original peer-reviewed articles summarizing health services research findings about women Veterans and women in the military. The topics included tailoring primary care to women Veterans, offering mental health care services specifically for women Veterans, military sexual trauma (MST) and patient perceptions of VA health care, gender differences in smoking cessation, and homelessness among women Veterans. All articles are accessible regardless of subscription status and can be found at www.whijournal.com/content/supplements.

Health Outcomes of Women Vietnam Veterans

In the most comprehensive look yet at the long-term health outcomes of women Veterans from the Vietnam era, VA researchers are studying the needs of female Veterans as they age. The five-year study, which began in 2011, is expected to include 10,000 women Vietnam Veterans who receive their health care from VA and elsewhere. The study assesses the prevalence of Post-traumatic Stress Disorder (PTSD) and other mental and physical health conditions, and the relationship of PTSD to deployment experiences, disability, and functioning.

Status of Women Veterans' Access to Care and Health Care Needs

A recent Congressional Report summarizing the results of the National Survey of Women Veterans, led by a VA investigator, was completed. Using data from this survey, researchers identified 3,508 women Veterans who provided information regarding delayed health care or unmet need. Findings showed that, overall, almost one in five women Veterans (19 percent) delayed health care or went without needed care in the prior 12 months. VA health care users comprised 21 percent of those *with* and 13 percent of those *without* delayed health care or unmet needs. Women Veterans with delayed care or unmet need were more likely to be Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND) Veterans, in a high-priority group for VA enrollment, and have experienced military sexual assault.

Women as Resilient to Combat-Related Stress as Men Following Return from Deployment

As a consequence of women's changing role in a war zone, as well as the evolving nature of modern warfare, female Servicemembers have experienced unprecedented levels of combat exposure in Afghanistan and Iraq. While women are still barred from direct ground combat positions, they serve in a variety of positions that places them at risk for combat exposure. VA conducted a study that examined gender differences in various dimensions of combat-related stress and associated consequences for post-deployment mental health in a nationally representative sample of male and female OEF/OIF/OND Veterans (340 women and 252 men) who returned from deployment between October 2007 and July 2008. Study results suggest women OEF/OIF/OND Servicemembers may be as resilient to combat-related stress as men in the first year following deployment. There were no significant interactions between combat-related stressors and gender in the prediction of post-traumatic stress symptomatology, mental health functioning, or depression.

Gender Differences among Veterans with PTSD

Little is known about gender differences in health care use among newly returning Veterans with PTSD. This study examined gender differences in rates of VA health care use among 159,705 OEF/OIF/OND Veterans with PTSD, with and without co-occurring depression and alcohol use disorders, who sought VA health care from October 2001 through December 2010. Findings show that overall, female OEF/OIF/OND Veterans with PTSD were more likely to have slightly higher mental health, primary care, and emergency care utilization compared to male Veterans with PTSD. Women Veterans with both PTSD and depression were 12.5 times more likely to

have a mental health inpatient hospitalization compared to their female counterparts without depression and were twice as likely to have a mental health hospitalization compared to male Veterans with both PTSD and depression. Diagnoses of comorbid PTSD and depression were present in 72 percent of women and 57 percent of men.

In another study of MST and mental health disorders in Veterans who had PTSD, researchers found a greater-than-four-fold increase in PTSD in women Veterans when they had experienced MST (and a nearly-three-fold increase in men). Additionally, researchers found that approximately 75 percent of women Veterans with PTSD and MST had depression, more than 30 percent had another anxiety disorder, and four percent were diagnosed with an eating disorder.

Women Veterans and Homelessness

According to a VA study of nearly 200 women in Los Angeles, unemployment, disability, and unmarried status are among the strongest predictors of homelessness for women Veterans. Homeless women Veterans were more than four times as likely to have experienced MST, and five times as likely to screen positive for PTSD. The homeless women Veterans in the study were just as likely as housed women to have a regular health care provider, and twice as likely to have used VA health care in the past year. Researchers suggest findings illustrate the impact of VA's homeless outreach – and represent an opportunity for further interventions to help this population.

In another study, investigators sought to study whether gender played a role in accessing a VA homeless program. Overall, researchers found no substantial difference in gender-specific risk of using a VA homeless program; in other words, women Veterans were just as likely as males to use a homeless program.