



# Mission Unaccomplished: Understanding the Health Needs of our Women Veterans

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Newswise — Women are the fastest growing segment in the US military, already accounting for approximately 14 percent of deployed forces. According to statistics from the Department of Veterans Affairs (VA), 20 percent of new recruits and 17 percent of Reserve and National Guard Forces are women. As the number of women continues to grow in the military, so does the need for health care specifically targeted to their unique concerns.

Historically, lower rates of female veterans have used the VA system. “Research has shown that women didn’t define themselves as veterans in the past, and this is changing,” said Antonette Zeiss, PhD, a clinical psychologist and Acting Chief for Mental Health Services at the VA Central Office in Washington, DC.

Now, “Women are among the fastest growing segments of new VA users with as many as 44 percent of women returning from Iraq and Afghanistan electing to use the VA compared to 11 percent in prior eras,” said Sally Haskell, MD, Acting Director of Comprehensive Women's Health, at the VA Central Office.

This change is due in large part to the wars in Iraq and Afghanistan, and the different military service opportunities available to women there. Although women are technically prohibited from participating in front-line combat, they have served in counterinsurgency operations in large numbers. Women are also often in convoys, which may be attacked, leading to serious injuries resembling those of their male counterparts.

“We found in the cohort of veterans of Iraq and Afghanistan using VA care in their first year after deployment that the most common conditions in female veterans were back problems, joint disorders, post traumatic stress disorder (PTSD), mild depression, musculoskeletal disorders, adjustment disorders, skin disorders, major depression, ear and sense organ disorders and reproductive health disorders,” said Haskell.

In addition, female veterans are more likely than their male counterparts to be confronted with childcare issues. “Women veterans may also need to reestablish childcare when they return home,” said Zeiss. “The VA is increasing family-oriented services and offering options to include the family in healthcare, if the veteran wants.”

According to a recent study in the journal *Women’s Health Issues*, female veterans had similar rates of physical conditions in the first year after combat, but higher rates of certain mental disorders, including depression and adjustment disorders. Men had slightly higher rates of PTSD.

According to the National Institute of Mental Health, PTSD is a condition that develops after a distressing ordeal that involved physical harm or the threat of physical harm. PTSD can cause a multitude of symptoms including: flashbacks, bad dreams, frightening thoughts, avoidance, difficulty remembering things, stress, anxiety, anger, being

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## Description

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easily startled, and sleep and eating disturbances. Among military personnel serving in Operation Iraqi Freedom and Operation Enduring Freedom, more than 17 percent of service members screened positive for PTSD.

There are some notable gender differences when it comes to PTSD. According to survey results from PTSD in Women Returning From Combat – a report by the Society for Women’s Health Research, clinicians treating female patients reported more depressive symptoms in women, while men exhibited more irritability and anger, nightmares and flashbacks.

The report also revealed that female patients were more receptive to psychotherapy, while male patients expressed a stronger preference for medication. One key sex difference that almost 65 percent of doctors noted was that sexual trauma (previous or otherwise) was an issue in the treatment of their female patients but not at all for male patients.

Military Sexual Trauma (MST), a term coined by the VA, is the experience of sexual assault, or severe, repeated sexual harassment experienced during military service. MST can be experienced by both women and men and many VA facilities have designated a Military Sexual Trauma Coordinator to oversee the screening and treatment referral process.

When it comes to MST, “many women would like to have women providers,” said Zeiss. “Every facility needs to find out what gender providers are available, especially with sensitive topics. In my experience, men who experience sexual trauma also request women providers.”

Growing numbers of women in the military have posed challenges and sparked changes in VA services. “We are changing the treatment environment so women feel safe, supported and get the care they need,” said Zeiss.

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Jennifer Wider, M.D., is a medical advisor for the Society for Women’s Health Research (SWHR) [www.swhr.org](http://www.swhr.org), a national non-profit organization based in Washington D.C., widely recognized as the thought leader in research on sex differences and dedicated to improving women’s health through advocacy, education, and research.

Dr. Wider is a graduate of Princeton University and received her medical degree in 1999 from the Mount Sinai School of Medicine in New York City. She is frequently published in newspapers, magazines, and websites and has been a guest on the Today Show, CBS News, Fox News, Good Day New York, and a variety of cable channels. Dr. Wider hosts “Paging Dr. Wider,” a weekly segment on Sirius satellite radio for the Cosmopolitan magazine channel.

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