Center for Women Veterans

Kayla M. Williams, Director
Overview

- Center for Women Veterans
  - Mission
- Women Veterans
  - History and Demographics
- Life Domains
  - Health, Housing Stability, Financial Status, Social
- Opportunities for Intervention
  - Partnerships
In 1994, Public Law 103-446 required VA to create the Center for Women Veterans. Mandated functions include advising (internally and externally) on policies, programs, and laws related to women Veterans; disseminating information; and supporting the independent VA Advisory Committee on Women Veterans.
Monitor and coordinate VA’s administration of health care and benefits services, and programs for women Veterans

Serve as an advocate for a cultural transformation (both within VA and in the general public) in recognizing the service and contributions of women Veterans and women in the military

Raise awareness of the responsibility to treat women Veterans with dignity and respect
Women Veterans History

**1945**
WWII ends:
Women = 2.3% of Active Duty

**1967**
Women's Armed Services Integration Act modified
- 2% restriction lifted
- Senior ranks opened to women

**1973**
All-Volunteer Force begins
- Military recruits more women

**1980**
Women = 8% of Active Duty

**1991**
Gulf War I:
Women = 11% of Active Duty

**September 11, 2001**

**TODAY**
Women = nearly
- 15% of Active Duty;
- 18% of Guard/Reserves
Women Veterans’ Demographics

- In FY16: 2,051,484 women Veterans, of 21,368,156 living Veterans, or 9.6% of the total Veterans population
  - By 2020, estimated to make up 10.5% the total Veteran population
- Among Veterans, women are:
  - Younger (median age of 50 vs 65 for men)
  - More ethnically diverse (66% vs 79% white)
  - More likely to have served in the Gulf War Era or peacetime
Holistic Model of Interrelated Life Domains

Health
Physical and Mental

Housing
Stability

Social Functioning
Supporter, Instrumental

Financial Status
Employment, Income

Source: RAND Corporation
Women who choose military service are more likely to have had certain adverse childhood experiences; however, a baseline level of physical and mental health is required to join.

While serving, women are disproportionately exposed to sexual harassment and assault; may also have combat and/or environmental exposure(s).

57% of women Veteran VHA patients had service connected disability rating (FY12).

Top eight domains of medical conditions in WV VHA patients:
1. Musculoskeletal
2. Endocrine / Metabolic / Nutritional
3. Mental Health / SUD
4. Cardiovascular
5. Reproductive Health
6. Respiratory
7. Sense Organ
8. Gastrointestinal

Women use more health care than men (physical and mental).
As of January 2015, women made up approximately 9% of the homeless Veteran population (4,338 people)

- Women Veterans are 2 - 4 times as likely as their non-Veteran counterparts to experience homelessness

Characteristics associated with homelessness among women include sexual assault during military service, being unemployed, being disabled, having worse overall health, and screening positive for an anxiety disorder or post-traumatic stress disorder

Protective factors were being a college graduate or married

Focused collaboration between VA and Congress, governors, mayors, private sector, philanthropic, and other partners has led to tremendous progress in reducing Veteran homelessness

Between January 2010 and January 2016, the number of homeless Veterans was cut nearly in half

- Innovations like “Housing First” have made a difference
Women Veterans’ Financial Status

- Women Veterans have slightly mixed financial status compared to men Veterans, but stronger financial status than women non-Veterans
- A higher percent of women Veterans work in management / professional occupations and in the public sector as well (compared to either group)

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Women Veterans</th>
<th>Men Veterans</th>
<th>Women Non-Veterans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median Household Income</td>
<td>$54,962</td>
<td>$58,995</td>
<td>$46,992</td>
</tr>
<tr>
<td>HH Using SNAP</td>
<td>13.0%</td>
<td>6.3%</td>
<td>17.4%</td>
</tr>
<tr>
<td>Some College +</td>
<td>78.8%</td>
<td>63.1%</td>
<td>59.8%</td>
</tr>
<tr>
<td>Enrolled in Higher Ed</td>
<td>11.9%</td>
<td>3.9%</td>
<td>9.7%</td>
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<tr>
<td>No Personal Income</td>
<td>7.0%</td>
<td>2.8%</td>
<td>14.5%</td>
</tr>
<tr>
<td>In Poverty</td>
<td>10.3%</td>
<td>6.5%</td>
<td>14.9%</td>
</tr>
<tr>
<td>No Health Insurance</td>
<td>4.1%</td>
<td>3.2%</td>
<td>9.3%</td>
</tr>
</tbody>
</table>

2015 Data
Women Veterans’ Social Support and Functioning

- Women Veterans are less likely to be married than men Veterans (49.4% vs 64.7%)
- Among Women’s Health Initiative participants (older), women Veterans are less likely to have married or given birth than women non-Veterans
- Women Veterans (like women and Veterans generally) have high levels of civic engagement:
  - Women Veterans make up over 30% of fellows and platoon members at The Mission Continues
- Women Veterans often feel invisible and unrecognized
- Maintaining social support of military peers after serving is associated with better physical health among women Veterans with and without PTSD
Intervention Opportunities

Services
Public, Private, & Nonprofit

Health
Mental and Physical

Housing Stability

Social Functioning
Supporter, Instrumental

Financial Status
Employment, Income

Source: RAND Corporation
VA Interventions and Support: Health

- Number of women Veterans using VHA health care has more than doubled since 2000; today more than 500,000 women Veterans use VA for care
- VA offers comprehensive health services to women Veterans including primary, specialty, hospice/palliative, mental health, infertility, gynecology, and maternity care services, including 14 days of newborn care
- Gender-specific care exceeds that in other systems
  - Cervical Cancer Screening: 88% VA; 74-76% private sector; 60% Medicaid
  - Breast Cancer Screening: 86% VA; 69-74% private sector; 51% Medicaid; 69% Medicare
- Each VA health facility has a Women Veteran Program Manager, Designated Women’s Health Provider, MST Coordinator, and Maternity Care Coordinator
- VA provides all MST-related care free of charge; all Veterans are screened
- VA operates a Women Veterans Call Center, created to provide women Veterans access to services for which they may be eligible; as of February 2017, WVCC had received over 47,000 incoming calls and made over 395,000 successful outbound calls
VA Interventions and Support: Housing Stability

- Supportive Services for Veteran Families (SSVF)
  - Awards grants for private nonprofits and consumer coops to provide supportive services to promote housing stability to low-income Veterans and their families residing in / transitioning to permanent housing

- Housing and Urban Development–VA Supportive Housing (HUD-VASH)
  - Interagency partnership to provide permanent supportive housing (through vouchers) and treatment services (coordinated through VA case management) for homeless Veterans and their families

- Grant and Per Diem (GPD)
  - Provides grants to community-based agencies providing transitional housing or service centers for homeless Veterans for facilities and more

- Homeless Veteran Coordinators at each Regional Office
  - Along with others who can provide specialized assistance, including Women Veteran Coordinators, Minority Veterans Coordinators, and Military Sexual Trauma (MST) Coordinators

- National Call Center for Homeless Veterans
  - Free, 24/7 access to trained counselors: 1-877-4AID VET (877-424-3838)
VA Interventions and Support: Financial Status

- Post 9/11 GI Bill education benefits
  - Accessed by 247,000 women so far

- Vocational Rehabilitation and Employment (VR&E)
  - Women were 20.6% of Veterans in VR&E in FY15

- VBA Home Loan Guarantee Program
  - Nearly 66,000 women Veterans (10% of Veterans served) were guaranteed loans totaling $16 billion in FY16; over the last 5 years, over 270,000 women Veterans received VA-backed home loans

- Disability Compensation
  - Women are 9% of all Veterans receiving compensation

  - Nearly 24% of registered eBenefits users are women (nearly 1 million) and can access women-specific information through a dedicated women’s page
Increasing number of VA systems are hosting events aimed specifically at women Veterans.

Peer Specialist program: trained and certified Veterans engaged in recovery for MH conditions hired to help peers in treatment identify and achieve specific life and recovery goals.

Adaptive Sports program for disabled men and women Veterans:
- National level: Summer Sports Clinic, Winter Sports Clinic, Wheelchair Games, and more
- Local level: Varies by facility
Burial and Memorial Benefits

- Veterans may be eligible for burial in one of 134 VA National Cemeteries in 40 states with open space
  - Dual-veteran couples may choose separate or shared grave sites
- Other burial benefits include:
  - Headstones, markers, or medallions
  - Burial flag
  - Presidential Memorial Certificate
- **Honor the service of a woman Veteran in your family!**
  - Request a medallion to affix to a privately purchased headstone or marker in a private cemetery for Veterans whose death occurred on or after Nov. 1, 1990
- More information:
  
VA’s 5 Priorities

Greater Choice for Veterans
- Redesign the 40/30 Rule
- Build a High Performing Integrated Network of Care
- Empower Veterans through transparency of Information

Modernize our System
- Infrastructure Improvements and Streamlining
- EMR Interoperability and IT Modernization

Focus Resources More Effectively
- Strengthening of Foundational Services in VA
- VA/DoD/Community Coordination
- Deliver on Accountability and Effective Management practices

Improve Timeliness of Services
- Access to Care and Wait Times
- Decisions on Appeals
- Performance on Disability Claims

Suicide Prevention
- Getting to Zero
MyVA Transformation

**BREAKTHROUGH INITIATIVES**
- Same Day Access
- Community Care
- Suicide Prevention
- Non-Clinical Frontline Training
- Claims and Appeals
- Vets.gov & Contact Centers
- Homelessness
- Human Resources
- Internal Communication
- Information Technology
  - Supply Chain
  - Financial Management
  - Shared Services
  - Electronic Health Record
  - Ent Data Management
- Strategic Operating Model

**MANAGEMENT INITIATIVES**
- Women Veterans
- VE Measurement
- Safety and Security
- PI Skills Training
  - Diffusion of Excellence
  - Innovation
- Communities
  - External Communications
  - Strategic Partnerships
  - Strategic Engagement
Ongoing VA Cultural Transformation Efforts

http://www.womenshealth.va.gov/WOMENSHEALTH/outreachmaterials/posters.asp
Opportunities for Community Support

- Raise awareness that women are Veterans, may be eligible for VA care and benefits, and should be treated with dignity and respect
  - Conduct outreach specifically targeting women
  - Feature women Veterans’ images and stories in all materials
  - Affirm that women Veterans are assets to our communities
- Partner at local level to address barriers that may prevent women Veterans from accessing VA care and benefits
  - Lack of transportation (10%) and difficulty finding childcare (42%) are challenges for some women Veterans using VHA
- Encourage the development of more affordable housing and remind prospective employers that Veterans exiting homelessness often have a wealth of knowledge and experience that can add value to many organizations
CWV Collaborative Partner: Academy Women

www.ementorprogram.org
Veteran-to-Veteran virtual program that allows any woman Veteran to participate, moderated and attended by women Veterans nationwide
  - Free tools and resources for creating successful peer mentorship
  - Face-to-face pilot circle in partnership with existing LeanIn.Org chapter in Seattle, Washington
    - Hybrid of women Veterans and non-military members, providing an environment for both to learn and share leadership skills
In collaboration with nonprofit partner VAP, VA exhibited 10 posters featuring art by women Veterans – along with their photos and stories – in 10 VA Medical Centers nationwide in March; it’s now travelling.

By displaying art by women Veterans, we can raise awareness among others of their service and sacrifice – while also making women Veterans feel more welcome and recognized by seeing themselves prominently featured.

Amy Forsythe
Amy Forsythe served four combat tours as an enlisted military journalist in the U.S. Marine Corps. She’s covered combat operations in Afghanistan and Iraq and continues to serve in the U.S. Navy reserves as a Public Affairs Officer. Her videos and photos have been featured on CNN, Fox News and MSNBC through the years. She currently works Defense Media Activity as the bureau chief in Guam covering military operations and exercises in the Pacific and can always be found with a camera in her hand taking pictures and video from her travels.

Cara Myhre
Cara Myhre served as a Cryptologic Arabic Linguist in the Army and Army Reserve from 1999 to 2011, deploying to OIF and OEF. After discovering that drawing and painting helped her to heal from traumatic experience, she decided to use her GI Bill to study Fine Art along with Psychology. She is currently volunteering in the social services and plans to earn a Master's degree in Social Work so that she might help others heal from trauma, including her fellow veterans.
Revamped CWV Website

http://www.va.gov/womenvet/
National Women Veterans Summit

- August 25-26, 2017 in Houston TX
- First national-level women Veterans summit since 2011
- Bring together key stakeholders from across a variety of sectors to identify challenges and opportunities facing women Veterans and collaborate on identifying and diffusing best practices in serving them:
  - Women Veterans; public sector partners including military, federal, state, and local agencies; VSOs and other nonprofit partners; researchers; private sector; other community partners; and VA employees, including Women Veteran Program Managers and Women Veteran Coordinators
- Plenary sessions on VA care and benefits, partner organizations, and a special “Voice of the Veteran” panel
- Breakout sessions focused on employment, mental health, entrepreneurship, military sexual trauma, reproductive health, culture change, minority Veterans, policy and health research, community engagement, and more
How to Contact the Center

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