Supplementary written evidence submitted by Anglia Ruskin University

The Unique Needs and Experiences of Mental Health and Well-Being Support in Female Veterans

Issue

1. Further to the oral evidence provided to the Defence Select Committee evidence session on Armed forces and veterans mental health, held on 27 March 2018, the Veterans and Families Institute for Military Social Research (VFI) at Anglia Ruskin University have been asked to provide further evidence of the unique needs and experiences of female veterans accessing mental health support.

2. The following brief report has been prepared by Dr Lauren Godier, Research Fellow, VFI.

Do female veterans have specific support needs?

3. The majority of the literature exploring the unique support needs of female veterans originates from the United States. US female veterans are reported to be more likely to develop symptoms of PTSD, and to experience military sexual trauma (MST), service-related disabilities, and homelessness. However they are less likely to access the services of the Veterans Health Administration (VHA) (Baechtold and De Sawal, 2009, DiRamio and Jarvis, 2011, Mattocks et al., 2012, Street et al., 2007). Furthermore, they report experiencing gender-based disparities in health care quality, and are less likely to seek help than their male counterparts (Baechtold and De Sawal, 2009, DiRamio and Jarvis, 2011). Research carried out in the US also suggests that female veterans struggle to adapt on transition back to civilian life due to the development of an atypical gender identity whilst in the military. Despite a strong desire to fulfil what they see as their traditional gender roles, the masculine nature of the military identity creates challenges in readapting back to these traditional gender identities (Suter et al., 2006, Jones and Hanley, 2017).

4. Whilst there is a lack of literature exploring these issues in the United Kingdom, there is some indication of the gender-related differences in mental health diagnoses in UK veterans. In a 2014 review, the Ministry of Defence concluded that female veterans experienced more mental health problems than their male counterparts (Ministry of Defence, 2014). Indeed, Rona et al (2006) found that female were more frequently diagnosed with common mental health disorders such as anxiety (other than PTSD) and mood disorders, but less likely to be diagnosed with PTSD (Rona et al., 2006). This is supported by research with veterans of the Australian Defence Force have also found women are more likely to suffer from depression.
and panic attacks than their male counterparts (Neuhaus and Crompvoets, 2013). Female veterans in the UK are also more likely to show particularly excessive alcohol consumption in comparison to the general population (Fear et al., 2010, Fear et al., 2007). Differences in vulnerability to different mental health disorders are likely to translate to differences in support needs for female veterans. For example, common mental health problems require different types of support to more complex problems such as PTSD. Additionally, female veterans have been shown to have less extensive social support networks than male veterans (Rona et al., 2006). As such they may have less opportunity to access informal support, and rely more heavily on formal types of mental health care support (e.g. NHS services, charities, and private mental healthcare).

5. Much more research is required in the UK to ascertain the unique mental health and well-being support needs and vulnerabilities of female veterans in order to develop effective strategies and support services that meet these needs.

Is gender-specific support available for female veterans?

6. In the UK we were unable to identify any gender-specific mental health or well-being support for female veterans. However, a Parliamentary Inquiry into Mental Health Services in 2016 recommended that a government inquiry be established to identify the mental health and support needs of female veterans¹. As a result of this Forward Assist, a charity that aims to reduce social isolation and support physical and mental health in UK veterans, has campaigned for the development of gender-specific support for female veterans with mental health problems. Forward Assist are currently running a project called ‘Salute Her’ which aims to identify the nature of social disadvantage facing women veterans during their transition from military service to civilian life². They hope to develop tailored support for women using the results from this project.

7. In the US gender-specific healthcare support is available for female veterans via the VHA. In 2010, the VHA rolled out the provision of gender-specific primary care for female veterans. This now includes women’s primary care clinics or separate providers for women veterans, co-location of gender-specific mental health and gynaecological care, and access to female chaperones (Department of Veterans Affairs, 2017). Each branch of the VHA much also have a Women Veterans Program Manager to ensure ‘privacy, security, and dignity and improves the overall quality of care provided to women Veterans’ (Department of Veterans Affairs,

² [https://www.forward-assist.com/salute-her/](https://www.forward-assist.com/salute-her/)
Steps have also been made to educate healthcare workers within the VHA of gender-specific needs (Vogt et al., 2008).

8. In other countries such as Australia and Canada, the needs for gender-specific or gender-sensitive support services has been recognised (Neuhaus and Crompvoets, 2013, Beck, 2017), but services have yet to be developed or implemented.

**What are female veterans’ experience of gender-specific and non-gender specific support services?**

9. Most of the research evaluating female veterans’ experience of support services is again from the US and in relation to VHA services. Despite the VHA policy discussed above, this research suggests that negative experiences of the VHA were largely driven by a lack of gender-specific treatment options and resources (Kehle-Forbes et al., 2017). Female veterans describe the VHA as a predominantly male environment that is unwelcoming for women, and falls short of meeting women’s needs (Kehle-Forbes et al., 2017).

10. A study of female veterans using mental health services (including the VHA and other services) found that over half felt as though their care needs had not been met (Kimerling et al., 2015). Additionally, one in five women reported feeling uncomfortable in their mental health treatment because of their gender. Frequently reported gender-related access problems for female veterans in this study were a lack of access to designated women’s mental health treatment and women-only therapy groups. Furthermore in women who had discontinued access to VHA services, their reasons centred on feeling unwelcome, feeling as though providers were not skilled at treating women, and were not sensitive to female veterans concerns (Hamilton et al., 2013).

11. Suggestions for improvements to services for female veterans in the US included women-only waiting rooms, more female doctors and service providers, increased female-only peer-support groups, and tackling logistical barriers to attending appointments such as providing child friendly environments, flexible appointment times, and access to parking (Koblinsky et al., 2017, Kehle-Forbes et al., 2017).

12. No literature exploring gender-specific experience of healthcare services was found for female veterans in the UK. As such, it is important that we consider these findings in relation to the different healthcare contexts of the US and UK. As veterans in the UK will access civilian healthcare provision following transition out of the military, they may not experience these services in the same way to veterans accessing veteran-specific services in the US. Research is required in the UK to explore the experiences of support accessed by female
veterans and to ascertain whether there is a need for gender-specific services to address their needs.

Next Steps

13. Given the paucity of research into the experiences of UK women veterans accessing mental health support services, the VFI are working in collaboration with the Centre for Mental Health\(^3\) to develop research and investigation in this important area.

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References


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\(^3\) https://www.centreformentalhealth.org.uk/


