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Barriers to Women Veterans Accessing Veteran Affairs Health Care

Women veterans face many barriers in securing health care benefits and in order to diminish these barriers, better policies and best practices must be crafted. It is of the utmost importance to ensure women who have served their country are able to easily access equitable and gender-specific health care benefits.

Scope of the Problem

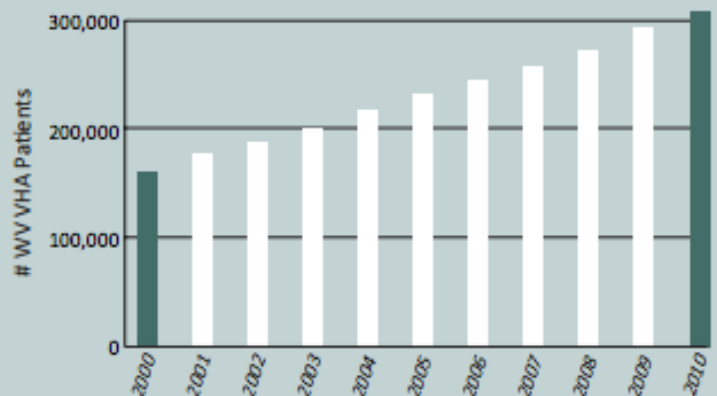
Women comprise the fastest growing segment of veterans today. In the U.S., women currently make up 20% of new recruits, 15% of soldiers serving in active duty capacities, and 18% of the National Guard and reserve forces (DAV 2014). As women leave service due to the increased influx of recruits, women veterans have come to make up around 8% of all veteran members and it has become clear that current healthcare services are insufficient in fully meeting the specific needs of this population. This is especially a problem as there is so little research and little adequate data collected to fully understand this demographic and its barriers to healthcare coverage.

Gender-specific services unique to women include breast cancer screening, gynecology specialty care, prenatal and obstetrical care, neonatal care and infertility services. The Department of Veterans Affairs (USVA) is struggling to provide gender-specific services to the growing segment of women veterans. As a result of this struggle, the VA has increased its coverage by outsourcing certain gender-specific services that are not able to be fulfilled at VA clinics or hospitals. This was done in order to

ensure that gender-specific services are available to women veterans through VA coverage, even if the VA does not provide the services directly at their locations (USVA).

Aside from access to services, there are still many challenges that women veterans face in securing equitable healthcare coverage. Women

Number of women Veteran VHA patients in each year, FY00—FY10



face greater obstacles in attaining and benefiting from VA health services due to perceived stigma, “red tape” and eligibility requirements, lack of information, and juggling responsibilities at home. It is important for women veterans that policy concerning veterans guarantees easy access to

comprehensive healthcare benefits that are tailored to the specific needs of women, which may drastically differ from the needs of male veterans.

Eligibility Barriers

One of the most significant barriers in securing healthcare benefits through the VA is the process to gain eligibility. There are many hurdles to becoming eligible for VA healthcare benefits, and simply serving in the armed forces does not guarantee access to benefits. To receive benefits, applicants undergo a rigorous process of qualification. One requirement of qualification stipulates that women veterans must have served up to twenty-four consecutive months after 1981, or the full time of their service period, to be considered eligible (USVA). The only exception to this is if someone was discharged due to an injury that was a result of their military service. To be eligible for VA services after a discharge, veterans must be discharged honorably. Veterans who did not serve the full stipulated period, or received a dishonorable discharge, remain ineligible for VA healthcare. Veterans that served as members of the

reserves or National Guard who were not called to serve as active duty are also not eligible for healthcare (USVA). VA

healthcare eligibility standards are stringent and specific in the process of determining who is eligible, for example women who have served after 1980, must to serve at least 24 consecutive months before they are eligible. With other barriers women veterans face in securing healthcare benefits, potential applicants and

recipients may be discouraged from seeking VA health services (USVA 2015).

Information Barriers

The lack of transparent information is another significant problem women veterans face in securing VA healthcare benefits. There is often confusion surrounding healthcare coverage veterans are entitled to after their service. Of all women who receive healthcare through VA services, only 67% previously knew they had benefits available to them prior to receiving the benefits (USVA 2015). Which means that 33% of healthcare beneficiaries, were unaware they were previously eligible (USVA 2015). Among non-VA users, only 21% were aware they could access healthcare services through the VA (USVA 2015). Studies also show that 79% of female veterans do not take advantage of their eligibility because they do not realize they have access to the healthcare offered through the VA (USVA 2015). The lack of information has led to many misconceptions regarding VA healthcare benefits.

Childcare Barriers

Finding adequate childcare also

poses a barrier for women veterans when making healthcare appointments. Up to 42% of women veterans who utilize VA services expressed having a hard time, or a very hard time, finding childcare services to make their appointments (USVA 2015). Without proper childcare women may have to cancel their doctor's visits all together, or bring their children with them to their appointments, which could disrupt the nature of the appointment. Another concern is that certain information may be

which one
is the
veteran?

Both.
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deemed inappropriate for a child to hear, making it very difficult for the veteran to speak with her doctor. A recent program sponsored by the VA, called the VA Child Care Subsidy Program, provides subsidized childcare at certain childcare locations (USVA). However, its still a relatively small program in its reach. In NY there are only 5 available childcare centers and other small states often have none (USVA). Lack of adequate and affordable childcare makes it difficult for women to come to the doctor because they have to make sure the needs of their children are met.

Stigma Barriers

Besides the overt barriers that make it more difficult for women veterans to access VA healthcare, there remains more elusive barriers that are significant in discouraging women from taking advantage of their VA benefits. For many women, the moment they step into a VA hospital or clinic, they are faced with barriers to accessing their benefits. Women veterans, in settings such as the VA hospitals, can often suffer from



mental health

conditions, and are presumed to be fine due to their physical looks (USVA 2015). This presumption alone is detrimental to women veterans because there is a considerable difference between the perceived consideration given to men and women veterans.

Women veterans often feel that they are not given equal consideration by VA healthcare providers (DAV 2014). Simple stigma may discourage women veterans from pursuing healthcare benefits. Although stigma is not an overt barrier, it remains a sociological problem and a

barrier that may be significant in discouraging women from pursuing their VA health care benefits. 24% of all user and non-user veterans have cited their discomfort in VA clinics and hospitals, as well as, a perceived difference in consideration by staff between men and women veterans (USVA 2015). In order to remedy these less overt challenges, VA hospitals and clinics need to maintain their conscientious efforts to overcome old stereotypes and change the idea who a typical VA user is.

Gender-Specific Services

Perhaps the greatest barrier to women veterans in securing VA healthcare is the lack of gender-specific services in VA locations. It is estimated that only 1 in 3 VA locations have a full-time gynecologist on staff (DAV 2014). OB-GYN services are even more rare. The Albany, NY VA Hospital is an exception in that it is one of the VA locations that does have a full time gynecologist on staff. However, this is rarely the case in other locations.

Many VA clinics or hospitals have a gynecologist on staff part time, or have no gynecologist on staff at all (DAV 2014). There is often little attraction or incentive for practicing gynecologists to work at VA clinics where they would most likely serve as the only member of the gynecology staff.

While there has been some research about these barriers, it is essential to understand the specific barriers that face women veterans in the realm of healthcare. It also remains equally important to determine best practices and policies in order to diminish these barriers for women who have earned health care coverage through their service to their country.

Key Organizations

Coordinating efforts between organizations is extremely impactful in areas of policy that affect US veterans for both men and women. Although there have been efforts by all of these organizations to push for more accessible and equitable healthcare for female veterans, much more can be done to increase the ease of women veterans securing these benefits.

- **DAV (Disabled American Veterans):**

DAV is a nonprofit organization with a mission to assist veterans through targeted programs that lend a helping hand to veterans in their everyday lives and long-term assistance; like connecting veterans with meaningful employment. DAV is a strong advocate for expanded government benefits for veterans and lobbies on behalf of the interests of veterans benefits.

- **NYS VA Council:**

The NYS VA Council is an extremely active group in the veteran community and advocate on behalf of veterans on issues that affect veterans. The NYS VA Council organizes lobbying efforts and programmatic efforts in order to affect positive change for the veteran community.

- **USVA (U.S. Department of Veterans Affairs):**

The United States Department of Veterans Affairs implements and develops most of the policies that have a direct impact on US veterans. The VA has conducted extensive studies pertaining to the barriers that women veterans face in accessing and securing adequate VA healthcare benefits.

Policy Options and Recommendations

Drop-In Childcare

The University of Rochester Hospital offers drop-in childcare services to children of both women who have appointments. The Wegmans Child Life program offers these services free of charge for a maximum of 3 hours (URMC). This specific program is run by a paid childcare staff assistant and volunteers. Childcare acts as a significant barrier to women trying to secure appointments. If the VA were to adopt a similar program in which a drop-in childcare was established at VA clinics and hospitals, then it would be much more feasible for many veterans who are also mothers to make their appointments without worrying about arranging for childcare.

Federal Collection of Data of Veteran Demographics Taking Advantage of VA programs

In 2017, it is difficult to currently analyze how many women are taking advantage of their VA benefits. It would offer important insight into understanding how the VA may reach out more successfully to a certain demographics due to the little data available. If the federal government were to collect concrete data pertaining to the demographics of veterans taking advantage of VA benefits it would be highly beneficial. In an omnibus legislation package called the Health Services Act, the federal government expanded funding for previous studies pertaining to barriers facing women in accessing their VA healthcare benefits (Congress). These studies did not gather specific data involving veteran demographics that take advantage of their benefits. A more targeted outreach approach for VA healthcare users could be developed as a result of the study's findings. This approach would diminish information barriers by providing insight to the VA who is less likely to be aware of their VA healthcare benefits and strategically target those veterans.

Increase Gender Specific Services

Currently, only 1 in 3 VA clinics and hospitals have a gynecologist on staff. In order to increase the accessibility of gender-specific services it is imperative that VA clinics and hospitals have at least one full-time gynecologist. Gynecology is an important area of a woman's health and not having access to it can have severe effects on a woman's health (ACOG 2015). In order for VA clinics and hospitals to truly claim that the VA offers gender-specific services, the VA should adopt a policy in which at least one full-time gynecologist is on staff. The problem of not having enough gynecologist and other gender-specific doctors is not only an issue of funding, but of interest. The VA can take steps to make the field more attractive to practicing doctors, specifically gynecologists and OB-GYNS, through a targeted outreach to the medical community.

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Community Policy Institute

The Community Policy Institute builds capacity surrounding policy within the Capital Region. We provide researched-based policy information to our community partners who use the information to modify best practices and advocate for policies that will further the development and effectiveness of direct community engagement.

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