

**Mental Health Care Services
for Women Veterans
Provided in the Department
of Veterans Affairs**

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MH Strategic Plan Adopted 2004

- **Implement President's New Freedom Commission on MH Report within VA**
- **Principal components:**
 - Expanding access and capacity
 - Integrating MH and primary care
 - Transforming system to focus on recovery & rehabilitation
 - Implementing evidence-based care
 - Returning veterans
 - Suicide Prevention

MHSP Implementation

- **Over \$850 million invested since FY05 in specific Mental Health Enhancement Initiatives (MHEI)**
- **Increasing basic MH funding, e.g., over \$3.2 billion total for mental health services in FY08**
- **Over \$530 million in proposed VA MHEI budget for FY09 and over \$3.8 billion in basic funding**
- **Over 3,900 new mental health staff hired since FY 2005; total mental health staff in the system almost 17,000**

Uniform MH Services Handbook

- Final step in implementation of the Mental Health Strategic Plan
- Defines mental health services that must be available for all veterans and locations for providing them (medical facilities, CBOCs, fee basis/contract care)
- Approved by the Undersecretary for Health, June 13, 2008; Full implementation mandated by the end of FY09
- Contains specific gender-related requirements

Mandates in Uniform MH Services Handbook (UMHSH)

- **Mental health services must be provided to female veterans at a level on par with male veterans at each facility. MH RRTP clinicians must possess training and competencies to meet the unique mental health needs of women veterans.**
- **Women and men being treated for military sexual trauma must have the option of being assigned a same-sex mental health provider, or opposite-sex provider if the trauma involved a same-sex perpetrator.**
- **Patients treated for other mental health conditions must have the option of a consultation from a same-sex provider regarding gender-specific issues.**
- **Special attention must be given to meeting the unique needs of women veterans, especially in the areas of SMI, sexual trauma, homelessness, and interpersonal violence.**

- **All VA facilities must have environments that can accommodate and support women and men with safety, privacy, dignity, and respect.**
- **All inpatient and residential care facilities must provide separate and secured sleeping accommodations for women.**
- **Each VISN must provide availability to residential care programs able to meet the needs of women veterans either through special programs or specific tracks in general residential care programs. A number of these programs are available as national resources; every VISN must arrange processes for referral, discharge, and follow-up.**

**VHA Action For Women
Veterans' Mental Health Services
Since 2004**

Military Sexual Trauma

- **MST Coordinator in every VA facility**
- **Mandated MST screening done in primary care**
- **Follow-up of positive screens to explore mental and physical health consequences**
- **Provide care for MST-related health problems, free of charge regardless of priority category**

National MST Recovery Team

- Provides education and mentoring to MST coordinators and providers nation-wide
- Tracks screening and follow-up provision of care
 - Of female veterans screened since 2002, 19.9% screened positive for MST
 - Of female veterans with a positive MST screen, 59.2% received treatment for a mental health diagnosis related to the MST

PTSD Care

- **Female-focused outpatient PTSD care available at all VAs**
- **Increasing number of female-focused residential care sites for PTSD available**
 - **29 sites with female-only tracks available at last count**

- **Mandated availability of evidence-based psychotherapies for PTSD at all facilities**
 - **Cognitive Processing Therapy and Prolonged Exposure Therapy**
 - **Both were developed initially for women rape victims and were successfully adapted for other stress experiences, including combat**
 - **Over 1,200 staff trained to date in at least one of these approaches; training actively ongoing**

Residential and Inpatient Environment

- **Keyless locked entry systems installed**
- **Female therapist must be available**
- **Increasing use of women-only groups as component of treatment**
- **Sites offer a chance to increase comfort in an environment for both men and women**

Moving Forward

- **Understanding more about the strengths and resilience of women veterans**
- **Learning about, being sensitive to, following closely the lifetime experience of women who have been in combat**
- **Other?**