



OREGON DEPARTMENT
of VETERANS' AFFAIRS

Women Veterans Health Care Study



Rede Group October 2016



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This report was produced by the Rede Group for the Oregon Department of Veterans' Affairs.

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Introduction

The number of Oregon women in the military has increased steadily over the past three decades. As more service women make the transition from active duty to veteran status, it becomes increasingly important that there are adequate and appropriate physical and mental health care services to meet their unique needs throughout their lives. The Veterans Health Administration (VHA) is the largest integrated health care system in the United States; however, it was not designed to meet the needs of women veterans. Historically, women have represented an extreme numeric minority in the VHA.

The Oregon State Legislature passed House Bill 2539 in 2015, directing the Oregon Department of Veterans' Affairs (ODVA) to conduct a study of physical and mental health care services for women veterans throughout the state.

In April 2016, the ODVA contracted with the Rede Group to conduct this study. The Rede Group led the research team for this project which also included Bonnie Gee Yosick, LLC and ELE Consulting, LLC.

Purpose of the Study

1. To describe the type and availability of physical and mental health care services for women veterans in Oregon.
2. To provide findings regarding accessibility, usage and barriers to accessibility, and usage of physical and mental health care services by women veterans in Oregon.
3. To make recommendations for legislative or other changes that may result in better delivery, accessibility, and usage of medical services by women veterans in Oregon.

The 78th Oregon Legislative Assembly mandated and funded this report.



Key Findings

Findings: Demographics, Health Care Enrollment, and Health Care Utilization

- Women veterans represent a growing population within the overall population of Oregon veterans.
- The population of women veterans is considerably younger than the population of men veterans.
- When compared to men veterans, women veterans:
 - Are more likely to have a service-connected disability;
 - Are more likely to access Veterans Health Administration (VHA) health care services; &
 - More heavily utilize VHA health care services.
- Approximately 19% of women veterans in Oregon are enrolled in the VHA system.
- Most (92%) women veterans in Oregon have public or private health care insurance.
- Women veterans are more likely than men veterans to use VHA health care services for mental health.
- Women veterans are much less likely than men veterans to use both VHA and non-VHA services for mental health than physical health care.

Findings: Barriers to Access

- Access to immediate care and urgent care within the VHA system is virtually non-existent for women outside the Portland area. Women report serious difficulty obtaining these necessary services and report using emergency care because immediate and urgent care are not available.
- Women often experience a sense of invisibility when interfacing with the VHA. Women report that they are frequently not recognized as veterans because VHA staff assumes that, because they are women, they are there to support a male veteran. Some women experience gender-specific hostility from VHA providers, including being chastised for taking a health care appointment or taking away a place in the system that a male veteran should have.

Findings: Establishing Care and Identifying Veterans

- Under the VHA system, the Veterans Integrated Service Network (VISN) is comprised of geographically configured “catchment areas” and veterans can only receive care within their catchment area. If a veteran moves, poor records transfer and difficulty establishing care in the new area often make the transition challenging.
- Women veterans outside the VHA system are not likely to be identified as veterans by their health care provider. Identifying women veterans as veterans in all health care settings could improve care, especially with respect to trauma-informed care.

Findings: Access to Women-Specific Services for MST or PTSD

- Military sexual trauma (MST) is prevalent in women veterans; however, women veterans may not be getting the care they need for MST or resultant post-traumatic stress disorder (PTSD).
- There are no inpatient services for treating MST; women who need this type of treatment must wait for a treatment slot to open at a facility in either California or Texas.

Findings: Women Providers and Gender-Informed Services

- Approximately 30% of the VHA health care facilities in Oregon do not have a health care provider available who is a woman. For some women, especially those who have experienced MST, not having access to a woman provider is a serious barrier to accessing care.
- There is an inadequate number of secure, women-only inpatient psychiatric and substance abuse treatment facilities in Oregon.
- Outside of the Portland area, the VHA does not provide women-only support groups; women veterans report that attending support groups with men veterans is not conducive to their treatment objectives.

Methods and Analysis

Between April and August 2016, the research team collected and analyzed data from five primary sources:

1. Structured interviews with Veterans Health Administration service providers in Oregon

The research team conducted five in-depth interviews, regarding the availability of specific medical services, with health care administrators and medical providers from the U.S Department of Veterans Affairs, Veterans Health Administration (VHA) health care facilities throughout Oregon. Health care providers or administrators from the Portland VA Medical Center, Roseburg VA Medical Center, Walla Walla VA Medical Center, and Southern Oregon Rehabilitation Center and Clinic were interviewed about services provided at facilities within their respective catchment areas.

To develop the interview guide, the research team reviewed the VHA Handbook, Version 1330.02, pages 17-23, Health Care Services for Women. The clinical practices handbook provides direction to all VHA facilities regarding services that must be offered to women veterans under the care of the VHA. Health care administrators and medical providers were interviewed about each service outlined in the handbook.

Data from interviews were entered into a categorical table detailing service provisions by provider facility. Using the table, the research team conducted a gaps and strengths analysis across all the facilities.

Data were not collected from Vet Centers.

(For a list of facilities interviewed and a copy of the interview guide, please see Appendix A and Appendix B, respectively.)

2. Focus groups with women veterans

The research team conducted three focus groups, one each in Bend, Portland, and Roseburg. The focus groups were designed to gather information from women veterans

concerning their experience with VHA and non-VHA health care. Women veterans were recruited for the focus groups using social media, paper flyers, and email invitations. Focus groups ranged in size from 5 to 11 and a total of 23 women participated in the group interviews. Interviewees ranged in age from 24 to 72.

Interview questions were developed with input from the ODVA and were designed to gather descriptive accounts of accessibility, usage, and barriers to accessibility and usage of physical and mental health care services by women veterans. A professional interviewer facilitated the focus groups using an open-ended interview protocol. Each focus group was videotaped and transcribed for analysis.

Data from focus group transcripts went through a multi-phase qualitative analysis process. First, a preliminary review and analysis were conducted in order to develop a coding scheme based on pre-determined and emerging codes. Each transcript was then systematically excerpted and coded using Dedoose¹ qualitative analysis software. Coded excerpts were then reviewed by a second analyst to ensure accuracy. After the excerpting and coding was complete, data across all focus groups were analyzed to identify key themes and potentially important narratives.

(For an overview of focus group participants and a copy of the focus group interview guide, please see Appendix C and Appendix D, respectively.)

3. Questionnaire survey of Oregon women veterans

An electronic survey was designed for a convenience sample² of women veterans in Oregon. In June 2016, surveys were distributed through three mailing lists administered by the ODVA: a list of women for whom ODVA has limited legal power of attorney, a list generated through targeted outreach to women veterans, and an ODVA GovDelivery email list (a large mailing list of all individuals

who have expressed interest on the ODVA website in receiving information from ODVA). Respondents were incentivized by an offer to enter a drawing for a small cash reward upon completing the survey. From the three combined sources, the survey received a total of 700 responses. Within the survey, screening questions were developed to exclude men and non-veterans. 580 self-identified women veterans completed the survey, including 522 who provided usable geographic information.

Survey participants were asked a wide range of questions about their physical and mental health care experiences during the past 18 months using VHA and non-VHA medical services.

The research team tabulated selected responses of the participants in aggregate. Further, the research team compared the proportion of respondents by county to the total female veteran population by county as estimated by VetPop2014⁵ and total population by county as estimated by the Portland State Center for Population Research.

Using the five VHA geographic catchment areas, the research team aggregated responses by respondents across the five VA catchment areas, and then (to ensure adequate numbers of observations in each category) aggregated those areas into two primary analytic regions: Portland³ and the rest of Oregon.

(For a copy of the questionnaire survey, see Appendix E. For complete survey tables, see Appendix F.)

4. Oregon Behavioral Risk Factor Surveillance System Data

The Behavioral Risk Factor Surveillance System (BRFSS) is a collaborative project of the Centers for Disease Control and Prevention (CDC), and U.S. states and territories. It is a national health-related telephone survey used to collect data about residents in the United States regarding their health-related risk behaviors, chronic

health conditions, and use of preventive services. Oregon Health Authority (OHA) staff provided BRFSS data from 2014 to the research team. OHA staff also worked with the research team to develop the approach for analyzing the data. R statistical software⁴ was used to analyze the data.

Using questions and data from the 2014 BRFSS, the research team compared health status, barriers to health care, average age of women with military status to women without military status, and women with military status compared to men with military status.

(For BFRSS tables, see Appendix G.)

5. National datasets

The research team utilized data from the National Center for Veterans Analysis and Statistics, Veterans Population Model VetPop2014. The data were cross-tabulated by sex and by county in Oregon.

Women Veterans: A Changing Demographic

Overall, the composition of Oregon’s veteran population is changing. Within the next 25 years, the percentage of women veterans in Oregon will increase from 9 to 14 percent of all veterans.⁵ This shift is due to a fairly steep decline in the number of male veterans while the number of women veterans will remain stable. Figures 1 and 2 show the projections for changes in Oregon’s veteran population from 2018 to 2042.

As a group, Oregon women veterans are younger than men veterans with the average age of a male veteran being 60 and the average age of a female veteran being 43.⁶

Nationally, women veterans are more likely to be black or Hispanic than are male veterans.

Figure 3 shows the projected density of women veterans by county in Oregon for 2017.⁵ The map indicated a concentration of Oregon women veterans along Oregon's I-5 corridor.

Figure 1: Oregon’s Veteran Population (Projected)⁵

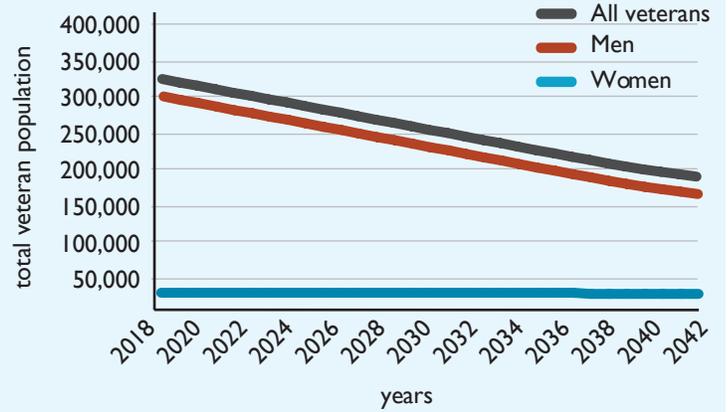
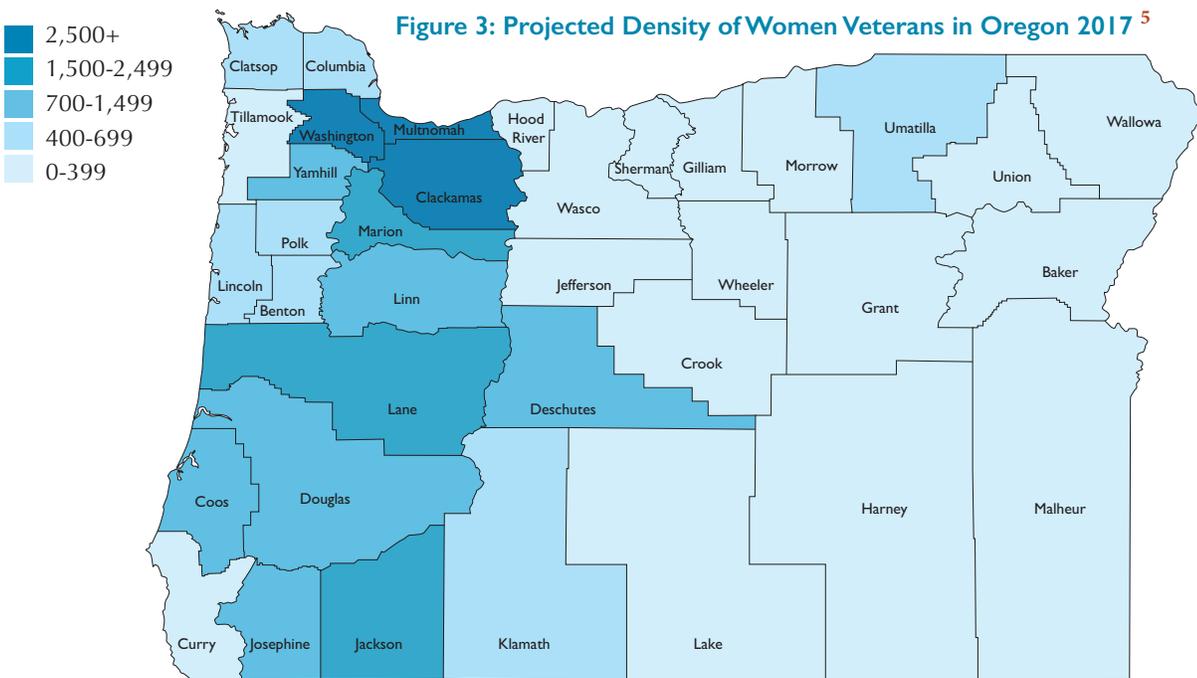
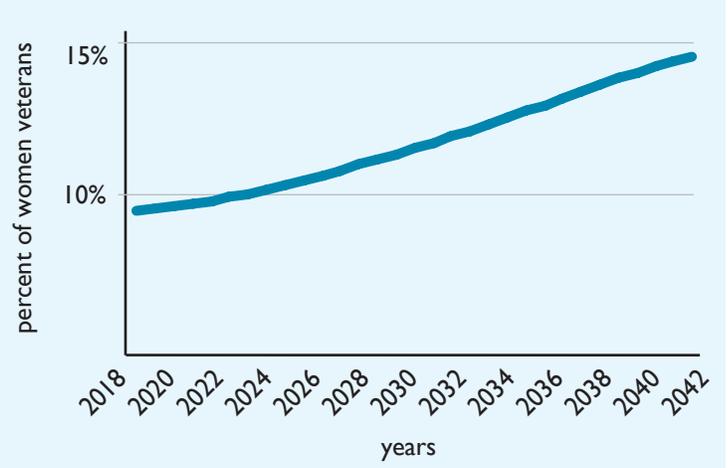


Figure 2: Percentage of Women Veterans in Oregon’s Veteran Population (Projected)⁵



An Overview of the VHA Health Care System



U.S. Department of Veterans Affairs

Veterans
Benefits
Administration

Veterans
Health
Administration

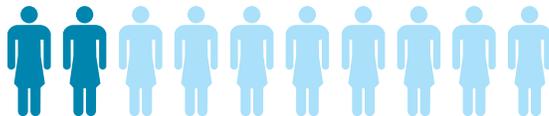
National
Cemetery
Administration

Veterans apply for health care benefits directly or through the Veteran Service Officers

Financial
Assessment

and/or

Assessment of Service
Connected Disability



19% of women veterans in Oregon receive health care through the VHA

Health care delivered through 26 VHA facilities in Oregon:

- 2 Hospitals
- 1 Rehabilitation Center
- 18 Outpatient Clinics
- 5 Vet Centers

Outside Oregon:

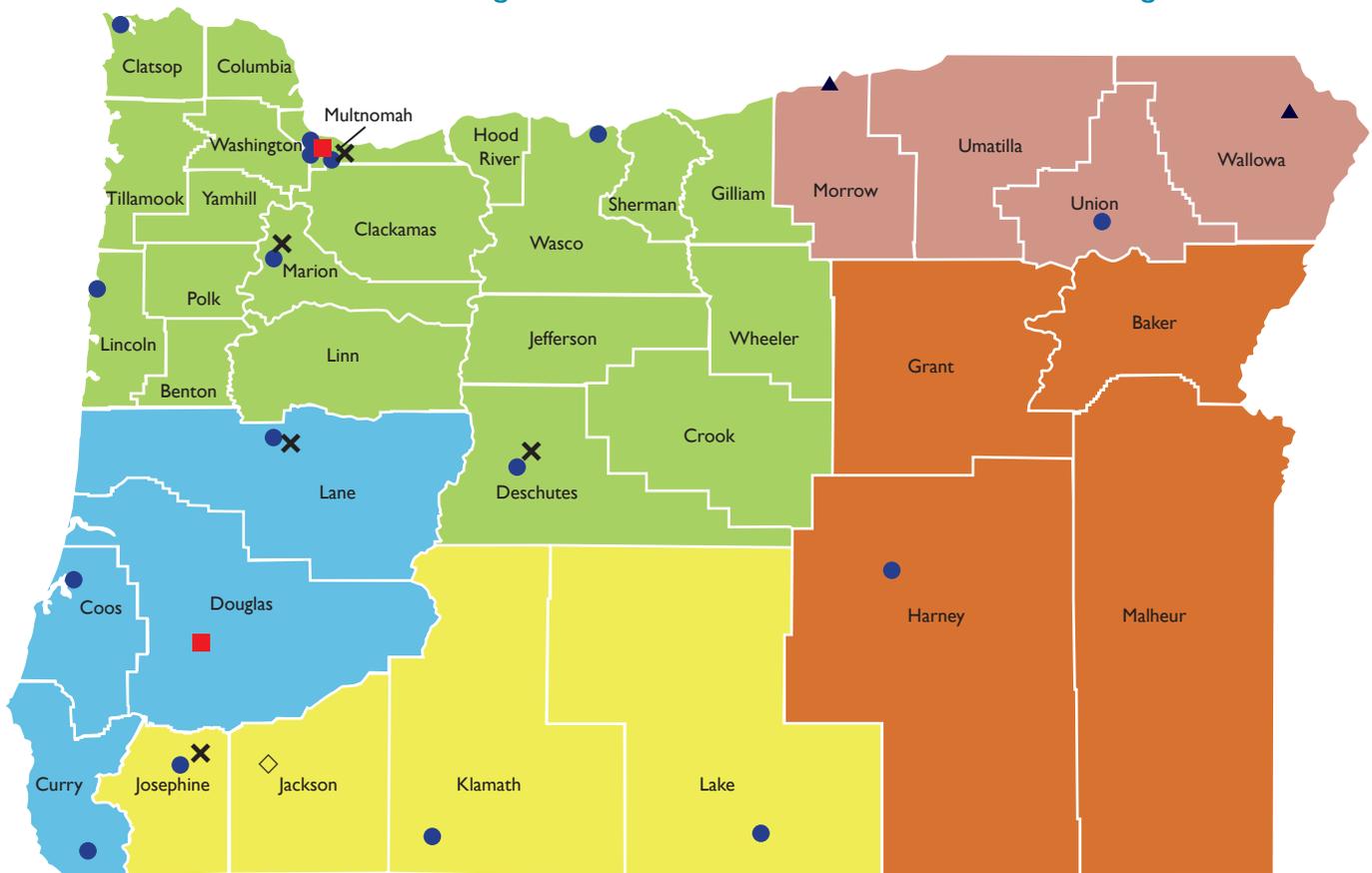
- 2 Hospitals (Walla Walla and Boise)

Availability of Services

The Facilities and Providers

The United States Veterans Health Administration is separated into 23 Veterans Integrated Service Networks (VISN). Each service network is further separated into catchment areas. Oregon is separated into five catchment areas: Boise, Portland, Roseburg, Walla Walla, and White City. There are 26 VHA health care facilities in Oregon that include, two VA hospitals, one rehabilitation center, 16 outpatient clinics, two primary care telehealth outpatient clinics (PCTOC), and five Vet Centers. The two VA Hospitals are located in Portland and Roseburg, and the rehabilitation center is located in White City. Outpatient clinics providing health care services to veterans are located throughout the state. The two PCTOCs are located in the Walla Walla catchment area and were developed to help care for veterans in more rural areas of the state. The vet centers provide individualized and group counseling, outreach, and referral services to veterans.

Figure 4: Catchment Areas and VHA Facilities in Oregon



Catchment Areas

- Portland
- Roseburg
- White City
- Boise
- Walla Walla

VHA Facilities

- Outpatient Clinics (16)
- Hospitals (2)
- Rehabilitation Center (1)
- ▲ Primary Care Telehealth Outpatient Clinic (2)
- × Vet Center (5)

Availability of Services, Physical Health Care

The following table details the physical services provided at VHA facilities in Oregon. Data are based on figures collected from in-person and telephone interviews with VHA health care administrators and medical providers. Often, when a service is not available at a VHA facility, the VHA will pay for a veteran to receive care through a non-VHA provider using the VHA Fee Basis system. Most often pre-authorization is required for a veteran to receive VHA-paid services through a non-VHA provider.

Table 1: Veterans Health Administration Physical Health Care Services

Catchment Area	Facility Name	Physical Health Care Services						
		Primary Care	Female Provider Available to Provide Primary Care	Cervical Cancer Screenings	Gynecological Services	Obstetrics	Mammography Services	HIV/STD Testing
Boise	Burns Oregon Outpatient Clinic	No Data	No Data	No Data	No Data	No Data	No Data	No Data
Portland	Bend CBOC	YES	YES	YES	NO	NO	NO	YES
	Fairview Clinic	YES	YES	YES	NO	NO	NO	YES
	Hillsboro CBOC	YES	YES	YES	NO	NO	NO	YES
	Lincoln City Clinic	YES	NO	YES	NO	NO	NO	YES
	Newport CBOC	YES	NO	YES	NO	NO	NO	YES
	North Coast Clinic	YES	NO	YES	NO	NO	NO	YES
	Salem CBOC	YES	YES	YES	NO	NO	NO	YES
	The Dalles CBOC	YES	YES	YES	NO	NO	NO	YES
	VA Portland Health Care System	YES	YES	YES	YES	NO	NO	YES
	West Linn CBOC	YES	YES	YES	NO	NO	NO	YES
Roseburg	Brookings CBOC	YES	NO	YES	YES	NO	NO	YES
	Eugene CBOC	YES	YES	YES	YES	NO	NO	YES
	North Bend CBOC	YES	YES	YES	YES	NO	NO	YES
	Roseburg VA Hospital	YES	YES	YES	YES	NO	NO	YES
Walla Walla	La Grande CBOC	YES	YES	YES	NO	NO	NO	YES
	Morrow County PCTOC	YES	YES	YES	NO	NO	NO	YES
	Wallowa County PCTOC	YES	NO	YES	NO	NO	NO	YES
White City	Grants Pass West CBOC	NO	NO	YES	NO	NO	NO	YES
	Klamath Falls CBOC	NO	YES	YES	NO	NO	NO	YES
	White City Southern Oregon Rehabilitation Center and Clinic	NO	YES	YES	NO	NO	NO	YES

Availability of Services, Physical Health Care

Physical Health Care Services

The following information details physical health care services provided by VHA hospitals, the rehabilitation center, and outpatient clinics in Oregon. The research team collected information from all VHA health care facilities with the exception of the Burns Outpatient Clinic.

Primary Care: All Oregon VHA facilities provide primary care services to women veterans. Seven of the 20 facilities interviewed do not have a woman physician available to provide primary care services, including North Coast Clinic (Warrenton), Lincoln City Clinic, Newport Community-based Outpatient Clinic (CBOC), Brookings CBOC, Grants Pass West CBOC, Morrow County Primary Care Telehealth Outpatient Clinic (PCTOC) (a woman physician comes once per month), and Wallowa County PCTOC. The research team asked providers to describe the referral process when a woman veteran comes into one of the seven clinics listed above and requests to see a female provider. The provider responses included that they were unsure of the referral process, that they would refer the patient to another facility in the catchment area that had a female physician available, or that they would refer the patient to another non-VHA provider within their community with whom they have a fee-basis agreement.

Contraceptives: The greatest limitation in the provision of contraceptives to female veterans is that Intrauterine Devices (IUDs) are not available at all facilities. Women can receive IUD services at the VA Portland Health Care System and the VA Roseburg Health Care System. Patients are referred to an OBGYN outside of the VHA system to receive contraceptives that are not available at the VHA facility. Abortions are not provided at any VHA facility.

Pregnancy and Maternity Care: VHA facilities provide pregnancy tests and the initial pregnancy consult. After the initial consult, patients are directed to the maternity care coordinator that handles all pregnancy-related case management in the catchment area. The maternity care coordinator orders a purchased care consult for the patient to receive pregnancy care at any non-VHA facility

that accepts veteran administration purchased care. Purchased care is a prearranged fee-based agreement between a provider and the VHA. The maternity care coordinator keeps track of the patient during pregnancy, provides information about pregnancy to the patient, and conducts a postpartum assessment.

Gynecologist Services: Gynecological services are provided at the Portland and Roseburg VA Hospitals. Providers in the Walla Walla and White City catchment areas refer patients seeking gynecological services to non-VHA providers within their community with whom they have a fee-basis agreement. Cervical cancer screenings conducted by the designated women's health care providers are available at all VHA health care facilities in Oregon.

Mammography Services: The Veterans Health Administration does not provide mammography services at any of their facilities in Oregon. If a patient needs these services, then the VHA will refer the patient to another non-VHA provider within their community with whom they have a fee-basis agreement.

Osteoporosis Evaluations and Treatment:

Osteoporosis evaluation and treatment are available in the Portland, Roseburg, and White City catchment areas. The Walla Walla catchment area refers patients to non-VHA providers within their community with whom they have a fee-basis agreement.

Nutrition and Weight Management: In the Walla Walla catchment area, the La Grande CBOC provides nutrition and weight management services in person and the PCTOCs in Morrow and Wallowa County offer consultation services over the phone. They also have a part-time dietitian that provides services at the La Grande CBOC and offer the MOVE Weight Management Program. The MOVE program is also offered in the Portland catchment area and patients can receive nutrition consults over the phone. At the VHA Roseburg health care facility, Eugene CBOC, and North Bend CBOC, there are nutrition classes and counseling in person

Availability of Services, Physical Health Care

and over the phone. At the Brookings CBOC, patients have access to speak with a nutritionist over the phone or they can visit the other facilities in the Roseburg catchment area to attend classes or counseling sessions in person. All three facilities in the White City catchment area offer nutrition and weight management services.

Menopause Management: Menopause management services are available in the Portland, Roseburg, and White City catchment areas. The Walla Walla catchment area refers patients to non-VHA providers within their community with whom they have a fee-basis agreement.

Hormone Replacement Therapy (HRT): Facilities in the Walla Walla catchment area refer patients seeking HRT to non-VHA providers within their community with whom they have a fee-basis agreement. The physician our research team spoke with about the Portland catchment area was unsure if HRT was available to patients. The facilities in the Roseburg and White City catchment areas provide HRT to their patients.

Incontinence Treatment: Medication, urinary tract infection testing, and other non-surgical incontinence treatment are available at every VHA facility. Pelvic floor and other surgical procedures are referred through the fee-basis system to a non-VHA provider in the community.

HIV/STD Testing: All of the facilities in Oregon provide HIV/STD testing. A patient's primary care physician or mental health care provider provides HIV/STD counseling. The Portland VA Hospital has an HIV support group for those infected with HIV.

Physical Health Issues Related to Military Sexual Assault (MSA) and Intimate Partner Violence (IPV): VHA nurses are trained to look for signs of MSA and IPV and provide information about services to patients. Military Sexual Trauma (MST) coordinators conduct formal trainings each year to providers across the catchment area. MST screening reminders are placed in patient charts. The primary care physician conducts treatment for physical health issues due to MSA and IPV.



Availability of Services, Mental Health Care

The following table details the mental health services provided at VHA facilities in Oregon. Data are based on figures collected from in-person and telephone interviews with VHA health care administrators and medical providers. Often, when a service is not available at VHA facilities, the VHA will pay for a veteran to receive care through a non-VHA provider using the VHA fee-basis system. Most often pre-authorization is required for a veteran to receive VHA-paid services through a non-VHA provider.

Table 2: Veterans Health Administration Mental Health Care and Substance Abuse Services

Catchment Area	Facility Name	Mental Health Care and Substance Abuse Services					
		General Counseling	PTSD Counseling	PTSD Gender Specific Counseling	PTSD Due to MST Routine Training	Inpatient Psychiatric Treatment	Inpatient Substance Abuse Treatment
Boise	Burns Oregon Outpatient Clinic	No Data	No Data	No Data	No Data	No Data	No Data
Portland	Bend CBOC	YES	YES	YES	YES	NO	NO
	Fairview Clinic	YES	NO	NO	NO	NO	NO
	Hillsboro CBOC	YES	NO	NO	NO	NO	NO
	Lincoln City Clinic	NO	NO	NO	NO	NO	NO
	Newport CBOC	NO	NO	NO	NO	NO	NO
	North Coast Clinic	YES	NO	NO	NO	NO	NO
	Salem CBOC	YES	YES	YES	YES	NO	NO
	The Dalles CBOC	YES	NO	NO	NO	NO	NO
	VA Portland Health Care System	YES	YES	YES	YES	YES	NO
	West Linn CBOC	YES	NO	YES	NO	NO	NO
Roseburg	Brookings CBOC	YES	YES	NO	YES	NO	NO
	Eugene CBOC	YES	YES	NO	YES	NO	NO
	North Bend CBOC	YES	YES	NO	YES	NO	NO
	Roseburg VA Hospital	YES	YES	YES	YES	YES	YES
Walla Walla	La Grande CBOC	YES	YES	Unsure	Unsure	NO	NO
	Morrow County PCTOC	YES	YES	Unsure	Unsure	NO	NO
	Wallowa County PCTOC	YES	YES	Unsure	Unsure	NO	NO
White City	Grants Pass West CBOC	YES	YES	NO	YES	NO	NO
	Klamath Falls CBOC	YES	YES	NO	YES	NO	NO
	White City Southern Oregon Rehabilitation Center and Clinic	YES	YES	NO	YES	YES	YES

Availability of Services, Mental Health

Mental Health Care Services: The following information details mental health care services provided by VHA hospitals, the rehabilitation center, and outpatient clinics in Oregon. The research team collected information from all VHA health care facilities with the exception of the Burns Outpatient Clinic.

Post-Traumatic Stress Disorder Counseling:

In the Portland catchment area, counseling for PTSD is available at the VHA Portland Health Care System, Salem CBOC, and Bend CBOC. All facilities in the Roseburg catchment area provide PTSD counseling. The Roseburg Veteran's Hospital has a resiliency group for women only. If anyone in the catchment area would like to attend the group, then they are provided with travel pay to commute to Roseburg to attend. The health care facilities in the Walla Walla and White City catchment areas offer individual PTSD counseling but do not have women-only group counseling available. During interviews with VHA health care administrators and medical providers, interviewees found it difficult to describe the training procedures for treating PTSD. Some interviewees mentioned informal PTSD education through Talent Management System (TMS) training modules.

Psychological Evaluations: All facilities except the Lincoln City Clinic and Newport CBOC conduct psychological evaluations. If a patient comes to one of these facilities and needs a psychological evaluation, they are referred to the nearest clinic that can provide the services needed. Once the provider puts in the referral, the mental health triage team will contact the veteran and direct them to the facility that will best meet their needs.

Traumatic Brain Injury: Initial traumatic brain injury (TBI) evaluations are conducted at all the health care facilities except the Brookings CBOC and Klamath Falls CBOC. Facilities that have a comprehensive TBI provider can perform secondary evaluations and provide treatment. The Portland VA Hospital, Salem CBOC, Hillsboro CBOC, Fairview Clinic, The Dalles CBOC, West Linn CBOC, Bend CBOC, Eugene CBOC, and White City Southern Oregon Rehabilitation Center and Clinics have the ability to perform secondary assessments and treatment. Patients are directed to the closest facility that can conduct the evaluations and treatment they need.

Inpatient Psychiatric Treatment: Inpatient psychiatric treatment is available at three facilities in Oregon. Those facilities include the Portland VA Hospital, Roseburg

VA Hospital, and the White City Southern Oregon Rehabilitation Center and Clinics. All other Oregon facilities refer patients to Portland, Roseburg, White City, or another VHA health care facility outside of Oregon for inpatient psychiatric treatment. None of the inpatient psychiatric treatment facilities in Oregon are women-only facilities. The Portland VA Hospital has some women-specific inpatient rooms; however, these rooms are on the same floor with male psychiatric patients, which creates safety concerns that women veterans have expressed. The psychiatric ward has a lock-down area and women veterans have stated that they do not feel safe being in the same lock-down area with men. At the Roseburg VA Hospital women are located on the same floor as the men. There are two beds reserved at this facility for women admitted to the facility for both inpatient psychiatric and substance abuse treatment. In White City, there is an inpatient facility that provides services for mental health, substance abuse, and homelessness, which houses both men and women with some women-only areas within the facility. There is a self-referral process for patients seeking treatment.

Inpatient Substance Abuse Treatment: Inpatient substance abuse treatment is available at two facilities in Oregon. Those facilities are the Roseburg VA Hospital and the White City Southern Oregon Rehabilitation Center and Clinic. VHA facilities in the Roseburg catchment refer patients to the Roseburg VA Hospital and facilities in the White City catchment refer patients to the White City Southern Oregon Rehabilitation Center and Clinic for inpatient substance abuse treatment. Oregon VHA facilities in the Walla Walla catchment refer patients to the Walla Walla residential treatment facility for these services. All facilities in the Portland catchment area refer patients to the Vancouver VHA facility for in-patient substance abuse treatment.

Residential Women's Trauma Recovery Program:

VHA Women's Trauma Recovery Program (WTRP) is a residential program created to treat women veterans with PTSD. There is no WTRP in Oregon, and the two closest locations are in California and Texas. These programs are available to women veterans across the country but are difficult for Oregon women veterans to access because they must compete for spots in the program with others across the country and they must pay their own travel expenses to another state to attend the program.

Availability of Services

Veterans' Experience with Availability of Services

In the questionnaire survey conducted for this study, participants that had visited a VHA health care facility in the last 18 months were asked if the VHA facility they visited offered the full range of services they needed. Overall, responses for physical health care services and mental health care services were similar, showing that over half of survey participants had received the full range of services they needed or received the services they needed most of the time from VHA facilities. The research team separated data into two geographic areas to see if there were differences in responses between the Portland region and the rest of Oregon. For both physical and mental health care the survey shows that women veterans living outside of the Portland region are more likely not to receive all the services they need when visiting VHA facilities.

Figure 5: Range of Physical Health Care Services Provided by VHA Facilities to Respondents Residing in the Portland Region³ (n=146)

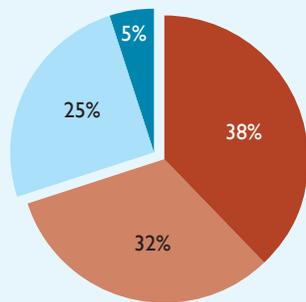


Figure 7: Range of Mental Health Care Services Provided by VHA Facilities to Respondents Residing in the Portland Region³ (n=81)

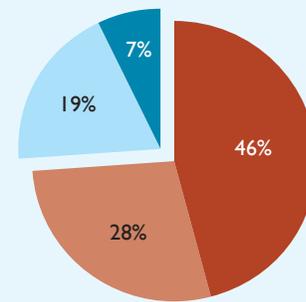


Figure 6: Range of Physical Health Care Services Provided by VHA Facilities to Respondents Residing in the Rest of Oregon (n=100)

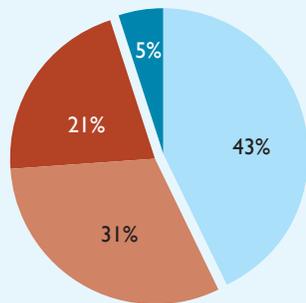
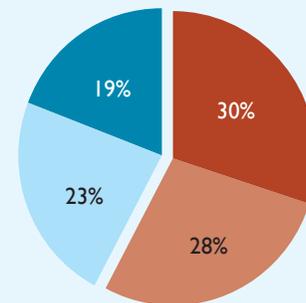


Figure 8: Range of Mental Health Care Services Provided by VHA Facilities to Respondents Residing in the Rest of Oregon (n=53)



- Yes, they provided the full range of services
- They provided the services I needed most of the time
- They provided some services but not all
- No, they did not provide the services I needed

Note: Survey participants were asked these questions if they indicated that they had seen a health care provider for physical health services (figure 5 and 6) or mental health services (figure 7 and 8) in the last 18 months.

Veterans Choice Act Program

The Veterans Choice Act Program allows those enrolled in VHA health care to receive services within their community instead of waiting for an appointment at a VHA facility or traveling long distances to a VHA facility. To be eligible for the Veterans Choice Program, you must have been (or will be) waiting more than 30 days for VHA medical care or live more than 40 miles from a VHA medical care facility.

Access to Care

Access to care means the timely access to quality comprehensive personal health and mental health care services including:

1. Gaining entry into a health care system;
2. Accessing a health care location;
3. Feeling safe traveling to and from and while at the health care location;
4. Finding a health care provider with whom the patient can establish a trusting relationship; &
5. Accessing necessary medication

In this study, the research team examined access to care through surveys and focus groups of women veterans.

Numbers of Women Insured and Veterans Health Administration Health Benefits

Approximately 19% of Oregon women veterans were enrolled in Veterans Health Administration (VHA) Health Services in 2016.⁷ However, approximately 92% of Oregon women veterans have health insurance,⁶ which is slightly higher than the percentage of all Oregon women with health care insurance.

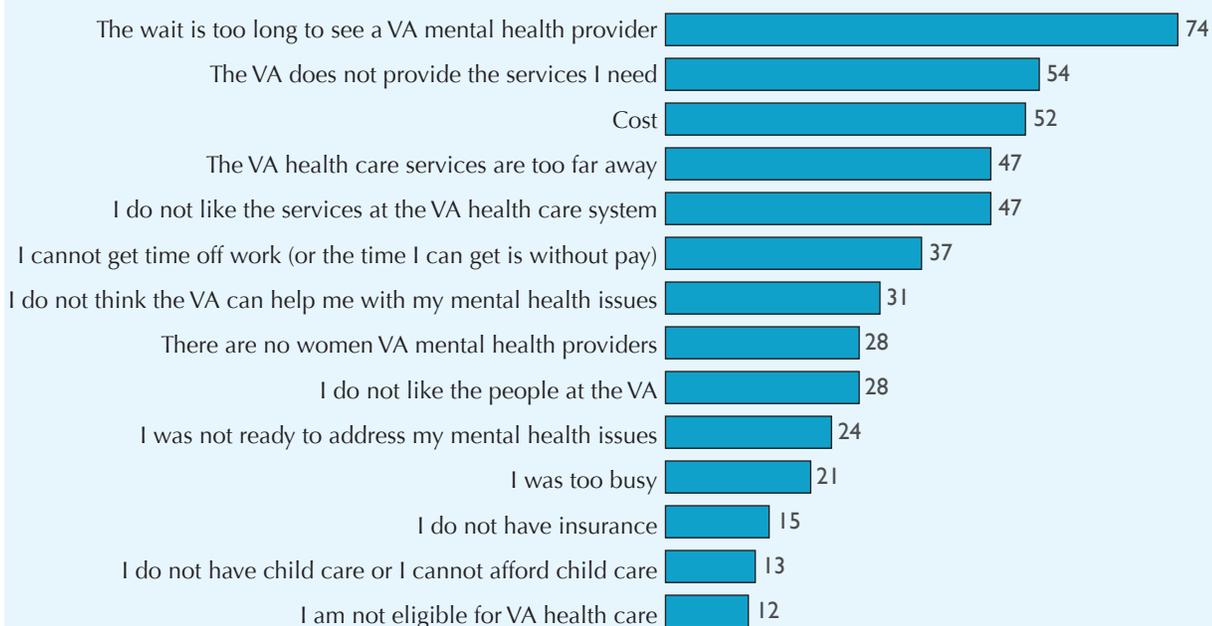
In the questionnaire survey conducted for this study, the research team asked women veterans who had not tried to enroll in VHA Health Services the reasons why they had never tried to enroll. Answers varied but were clustered around themes of 1) confusion regarding their eligibility for VHA health benefits; and 2) being satisfied with their private insurance.

Women veterans are more likely than men veterans to enroll in VHA health care⁸ and have higher utilization rates than men.⁹

Wait Times

Some women veterans did not access VHA health-care, especially mental health services, because of the length of time that it took to get an appointment with a provider. According to the questionnaire survey conducted for this study, among the women who indicated they had not accessed services even though they felt that they needed them, the amount of time that it took to get an appointment with a mental health provider was most often cited for not accessing care. In fact, 30% of the women who did not access care they felt they needed cited length of time to get an appointment as one of the reasons why they did not access care.

Figure 9: Reasons for not Accessing Care



Access to Care

Waiting for long periods of time to get in to see a provider was also a significant theme of focus group results. Multiple women in all three groups described situations where they could not get an appointment with a provider within weeks, or were offered an appointment within 30 days but were later notified by the provider that the appointment was canceled, thereby increasing the length of time before receiving care.

Figure 9 represents all the responses for reasons why women veterans did not access VA health care.

Travel Distance

Over 50% of women veterans reported¹⁰ traveling more than 10 miles (between 11 and 50 miles) to receive health care, including mental health services.

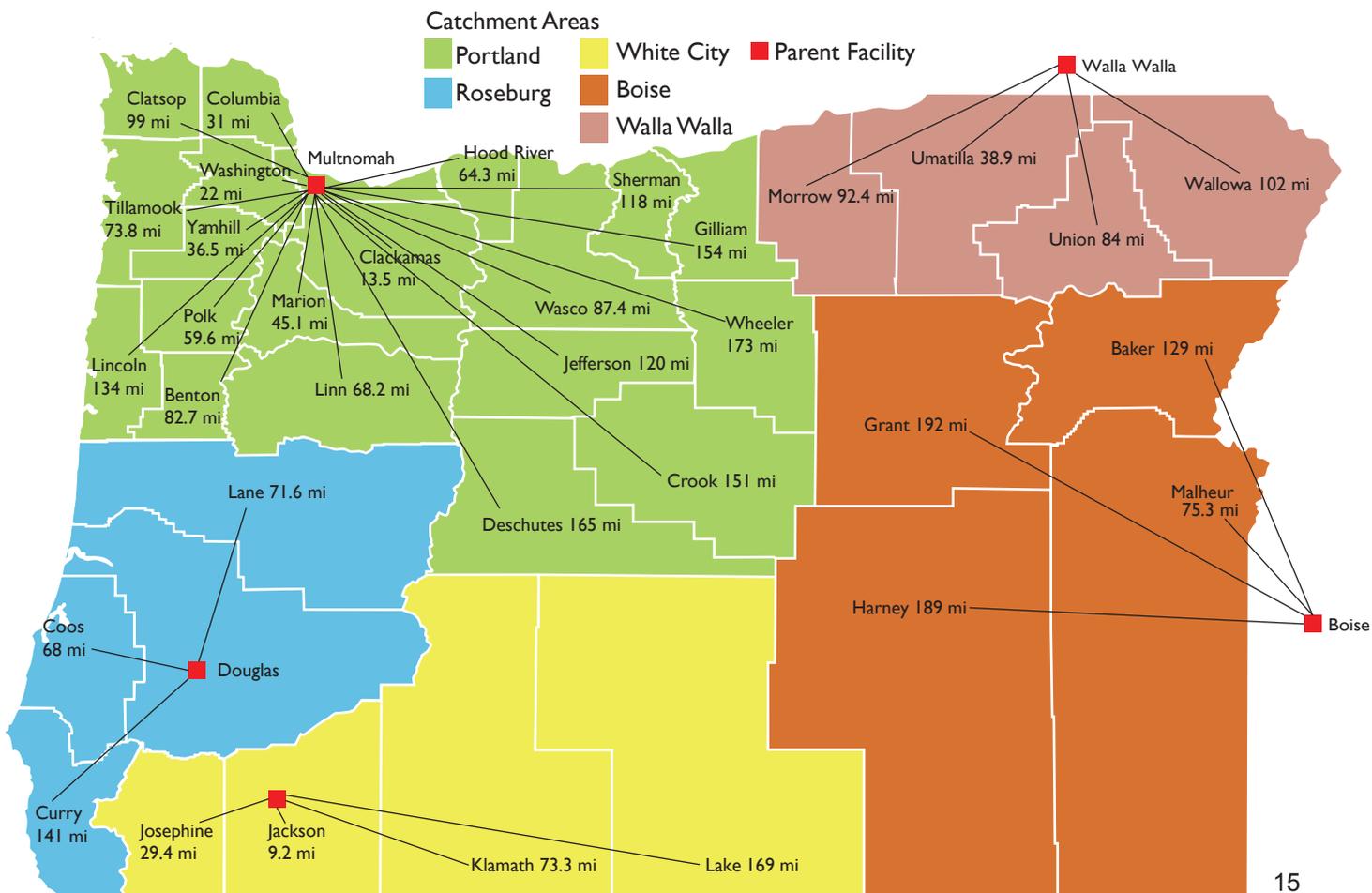
This was true for women in the Portland region (including Multnomah, Washington, Clackamas, Benton, Clatsop, Columbia, Hood River, Lincoln, Linn, Polk, Tillamook, and Yamhill counties) as well as women outside the Portland region.

The survey showed that 22% of women reported traveling farther than 50 miles for health care and 15% reported traveling more than 50 miles for mental health care. Again, there were only slight variation between Portland area respondents and those from the rest of Oregon.

As seen in Figure 9, 47 of the respondents to the questionnaire survey conducted for this study cited travel distance as a reason for not accessing care.

Figure 10: Distance from County Seat to Catchment Area's Parent Facility

The map in figure 10 details the distance from each county seat to the parent VHA facility in their catchment area. The parent facilities are located in Portland, Roseburg, White City, Walla Walla, and Boise.



Access to Care

Safety and Comfort

Another barrier to accessing medical services is the male-dominated environment of VHA facilities based on the large volume of male veterans compared to women veterans.¹¹

In the focus groups, women who received care at the VHA expressed varying levels of comfort. Several women veterans shared experiences of feeling unsafe, disrespected (based on their gender), or discomfort with their provider based on not having a female provider. Often, these experiences were shared in the context of these women veterans having experienced military sexual trauma.

Respondents to the questionnaire survey conducted for this study did not highlight safety and comfort as major barriers to care and data from the U.S. Department of Veterans Affairs, Study of Barriers to Care for Women veterans, demonstrates a high level of satisfaction on indicators of safety and comfort among women veterans who receive care from the VHA.

Barriers for Women Who Move Between Catchment Areas

The Veterans Integrated Service Network (VISN) is comprised of geographically configured “catchment areas”. The system does not appear to be optimally integrated, meaning that women who move from one catchment area to another can experience difficulty in transitioning care. The process is described as “time-consuming”, “onerous”, “frustrating” and “awful.” Case management by the VHA within this system is often labor-intensive, requiring resources to find and transfer medical records, etc. The ODVA provides some assistance to women veterans transitioning between catchment areas.

Access to Immediate Care and Urgent Care

Access to immediate and urgent care within the VHA system is virtually non-existent for women outside the Portland area. VHA will not pay for emergency room services unless the condition is life-threatening and VHA is informed within 72 hours. Women outside the Portland area have three choices for immediate care or urgent care.

First, they can drive to Portland, Roseburg, White City, Walla Walla or Boise and get care within the VHA system, which is usually not practical. Second, they can go the local emergency room if the condition is life-threatening. Third, they can use private health insurance.



Satisfaction with Health Care Services

Where Women Veterans Receive Physical Health Care Services

In the questionnaire survey conducted for this study, women veterans with a service-connected disability who had seen a health care provider within the last 18 months were asked if they received care through a Veterans Health Administration (VHA) health care facility, non-VHA health care facility, or both. Overall, 53% of respondents used VHA services only, 21% reported using non-VHA services only, and 26% reported using both VHA and non-VHA services. The research team compared the responses from the Portland region with responses from the rest of the state and found that answers were very similar.

Where Women Veterans Receive Mental Health Care Services

Women veterans who had seen a health care provider for mental health services within the last 18 months were asked if they received those services through a VHA health care facility, non-VHA health care facility, or both. Overall, 65% of respondents received services exclusively at a VHA facility, 23% were treated exclusively at a non-VHA facility, and 12% visited both a VHA and non-VHA facility for their mental health services. When compared to the type of facilities women veterans use for physical health services, results show that women veterans are more likely to use VHA health care services for mental health than physical health. Also, they are much less likely to use both VHA and non-VHA services for mental health than for physical health. Meaning, that women are more likely to be receiving all of their mental health services from VHA facilities. Data comparing the Portland region and the rest of the state does not show significant differences for the type of facilities (VHA or non-VHA) that women veterans use for mental health services.

Figure 11: Where Women Veterans Receive Physical Health Care Services (n=330)

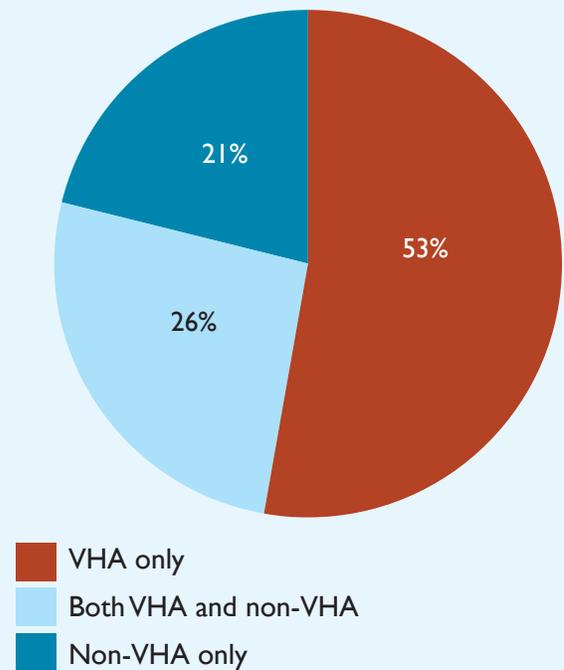
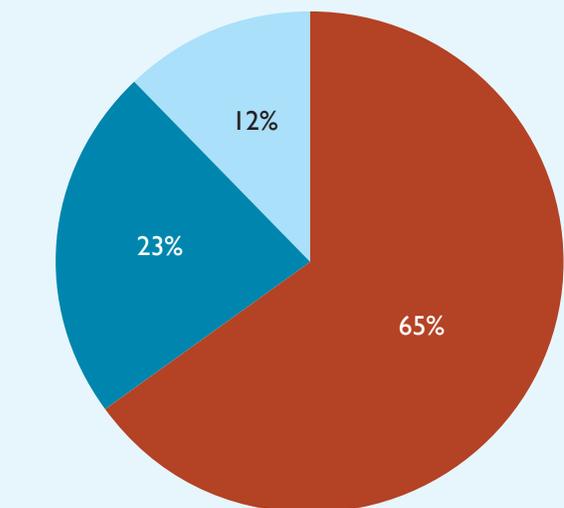


Figure 12: Where Women Veterans Receive Mental Health Care Services (n=181)

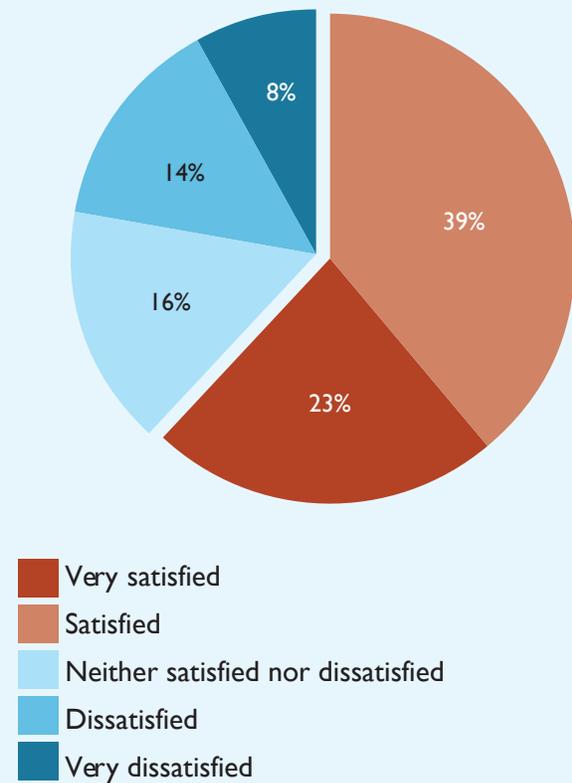


Satisfaction with Health Care Services

Satisfaction with VHA Physical Health Services

In the questionnaire survey conducted for this study, women veterans who visited VHA facilities for physical health care services within the last 18 months were asked to describe their level of satisfaction with the services they received. Overall, 62% of participants were either satisfied or very satisfied with the physical health care services they received. The research team compared satisfaction rates between the Portland region and the rest of the state of Oregon and found that there was very little difference in satisfaction rates.

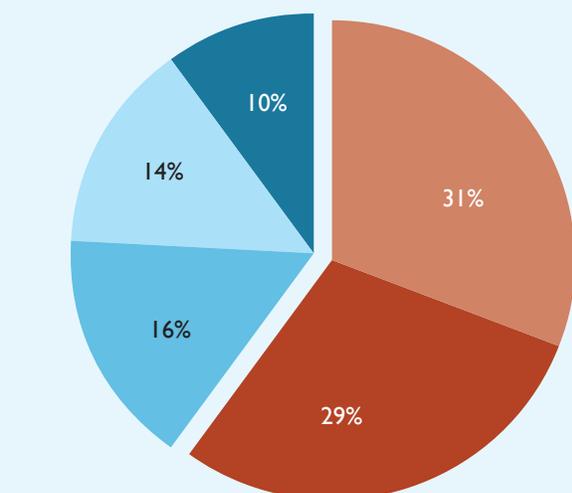
Figure 13: Overall Satisfaction with VHA Physical Health Care Services (n=251)



Satisfaction with VHA Mental Health Services

Women veterans were also asked about their level of satisfaction with the mental health care they received through the VHA health care facilities. Overall, 60% of women were satisfied with the mental health services they received through the VHA. When satisfaction rates in the Portland region were compared to satisfaction rates for the rest of the state of Oregon, there was little difference in satisfaction level found. There was a very similar level of satisfaction with the care received for physical health and mental health services.

Figure 14: Overall Satisfaction with VHA Mental Health Care Services (n=139)



Satisfaction with Health Care Services

Satisfaction with VHA Health Care Services

During the focus groups, women veterans were asked what they liked most about their VHA health care experiences. Responses included:

- It helps to be around other veterans when visiting health care facilities and having mental health counseling with other veterans
- The lab department
- Seeing physicians that listen and treat patients like they matter

Satisfaction with Non-VHA Health Care Services

During the focus groups, women veterans were asked what they liked most about non-VHA health care services. Responses included:

- Availability of urgent care and the ability to see a doctor on the weekends
- Receiving services quickly
- Getting consults from a specialist

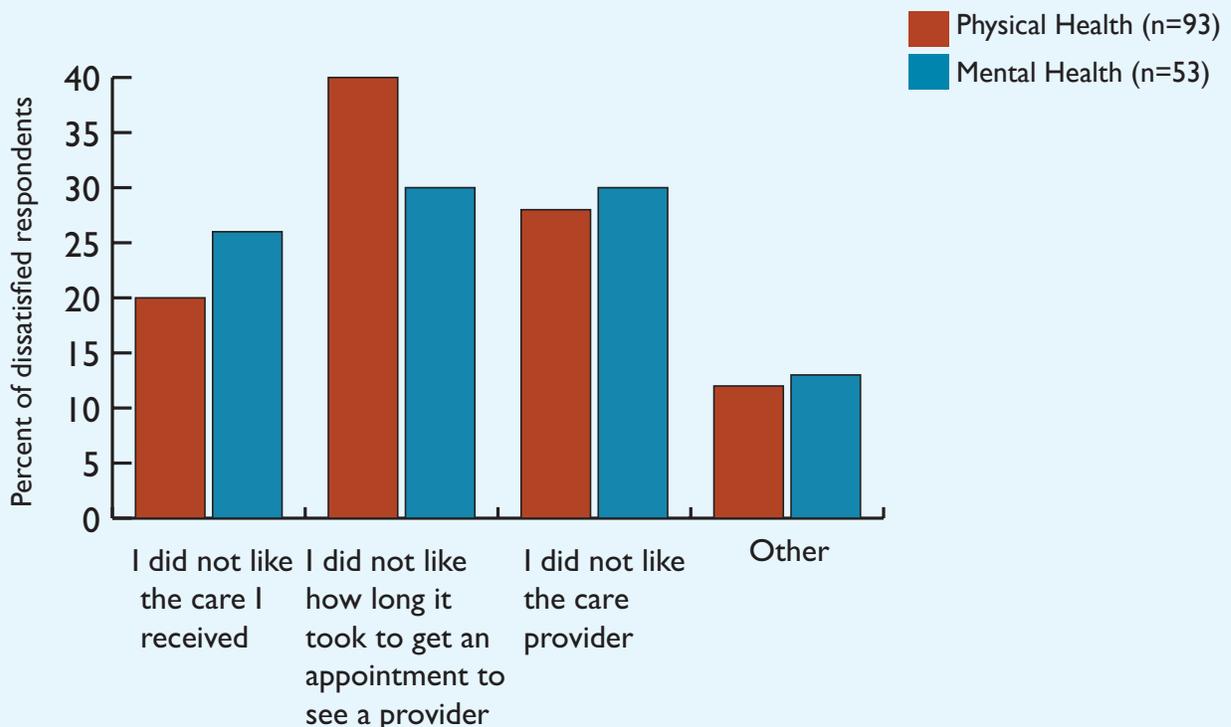
Reasons for Dissatisfaction with VHA Health Care Services

In the questionnaire survey conducted for this study, women veterans who had expressed a lack of satisfaction with the health care services they received through the VHA were asked why they were dissatisfied. The most common reason reported for dissatisfaction with mental and physical health care services was waiting too long to get an appointment with a provider.

Figure 15 below details reasons for survey respondent dissatisfaction with physical health and mental health care services through a VHA provider.

Figure 15: Reasons for Dissatisfaction with VHA Health Care Services

Note: Survey participants were asked this question if they indicated that they were dissatisfied with VHA health care services.



Satisfaction with Health Care Services

“It really helps being around veterans. I know it helped me in my recovery process, and that’s one thing about the VA I will never take for granted—the vets.”

—Focus Group Participant



Satisfaction with Health Care Services

VHA Health Care Experience

During the focus groups, women Veterans were asked what they liked least about their VHA health care experiences. Responses included:

- Wait time to get an appointment/not being able to see a doctor when they are sick
- Doctors that do not care or listen to their needs
- Not getting the mental health care they needed
- High medical staff turnover
- Inappropriate comments made by doctors or being in an uncomfortable situation with a doctor
- Discrimination against women veterans
- Billing problems
- Not receiving the medications needed
- Attending support groups with mostly men

Changes in Health Care for Women Veterans

Women veterans who participated in the focus group and questionnaire survey were asked what were the most important things that should change in health care for women veterans. Responses included:

- Access to urgent care
- Better communication to patients ahead of time when appointments are canceled by the health care facility
- Improved crisis/suicide support
- Women-only mental health care facilities and group counseling sessions
- Better communication from the VHA to patients about services provided and procedures
- Discrimination of women veterans by physicians and by other veterans visiting the health care facility
- Improve the substance abuse programs
- Increase the availability of experienced mental health counselors
- Offer evening and weekend appointments for mental health counseling sessions
- Increase the availability of appointments and the ability to see a provider faster
- Provide health care services to all veterans

“Within the system, there is a lot of discrimination towards women. Whether it’s out there in the open or not, it’s there. You don’t get the health services that you need. There are a lot of other services that we don’t get because we are discounted. You go up to the window a lot of times, and they expect you to be a wife or a dependent of a vet and not the veteran.”

—Focus Group Participant

“They’ll make the appointments and then get them rescheduled, because obviously, it’s a bunk appointment.”

—Focus Group Participant

“I hate the making appointments and then getting canceled and rescheduled without getting a hold of you.”

—Focus Group Participant

Findings: Military Sexual Trauma

Military sexual trauma (MST) is the term that the U.S. Department of Veterans Affairs uses to refer to sexual assault or repeated, unwelcome sexual harassment that occurred while the veteran was in the military.

Estimates of the number of women who experience MST vary. Data from the Veterans Health Administration's (VHA) MST universal screening program (initiated in 2003) has been fairly consistent at around 25% of women veterans that screen positive for MST. However, other studies have found lifetime prevalence rates of sexual harassment during military service at 55% and sexual assault during military service at 23%.¹²

The effects of MST and resulting post-traumatic stress on women are wide-ranging and can include physical effects such as chronic pain, pelvic pain, menstrual problems, chronic fatigue, headaches, and gastrointestinal symptoms.¹³ Psychological effects such as eating disorders, depression, dissociative disorder, personality disorder, substance abuse, and panic disorder have also been causally linked to MST. Furthermore, women who have experienced MST are also more likely to experience homelessness.¹⁴

There is also strong evidence to suggest that MST is undertreated.¹⁵ Data gathered for this study about Oregon women is consistent with national data and indicate that women may not be receiving the treatment they need.

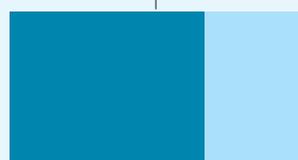
- In the questionnaire survey conducted for this study, 59% of respondents said they have experienced sexual assault, rape, or harassment while on active duty.
- Of the respondents who have experienced sexual assault, rape, or harassment while on active duty, 65% are not receiving service-connected benefits for MST or post-traumatic stress disorder (PTSD).
- Of the respondents who have experienced sexual assault, rape, or harassment while on active duty and are not receiving service-connected benefits for MST or PTSD, only 20% have applied for MST or PTSD service-connected benefits.

Figure 16: Experience of Military Sexual Trauma and Use of Service-connected Benefits

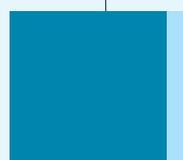


6 / 10

survey respondents experienced sexual assault, rape, or harassment



6.5 / 10 are not receiving service-connected benefits



8 / 10 have not applied for service-connected benefits

Recommendations

Continuous study and strategic action to understand and improve women veteran's health care is clearly warranted. The 12 recommendations in this report represent a merger of findings about the current physical and mental health care services available to women veterans in Oregon, barriers to accessing care and evidence-based practices for quality health care. These 12 recommendations can be undertaken immediately and, with appropriate resource and focus, can be accomplished within the next 1 to 5 years. When enacted, these recommendations will improve the health care and quality of life for Oregon women veterans and their families.

Findings: Demographics, Health Care Enrollment, and Utilization

- Women veterans represent a growing population within the overall population of Oregon veterans.
- The population of women veterans is considerably younger than the population of men veterans.
- When compared to men veterans, women veterans:
 - Are more likely to have a service-connected disability;
 - Are more likely to access Veterans Health Administration (VHA) health care services; &
 - More heavily utilize VHA health care services.
- Approximately 19% of women veterans in Oregon are enrolled in the VHA system.
- Most (92%) women veterans in Oregon have public or private health care insurance.
- Women veterans are more likely than men veterans to use VHA health care services for mental health than physical health.
- Women veterans are much less likely than men veterans to use both VHA and non-VHA services for mental health than physical health.

Recommendations:

1. ODVA should increase awareness of Oregon women veteran demographics and their access to and utilization of health care.

- Oregon Legislative Assembly. The Oregon Department of Veterans' Affairs (ODVA) should raise awareness of the demographics, access, and utilization of VHA and non-VHA physical

and mental health care of Oregon women veterans by delivering this report, discussing its contents, and advocating for Oregon women veterans' health care needs with members of the Oregon Legislative Assembly.

- Oregon Congressional Delegation. ODVA should raise awareness of the demographics, access, and utilization of VHA and non-VHA physical and mental health care of Oregon women veterans by delivering this report, discussing its contents, and advocating for Oregon women veterans' health care needs with members of the Oregon U.S. Congressional Delegation.
- Veterans Health Administration (VHA). ODVA should raise awareness of the demographics, access, and utilization of VHA and non-VHA physical and mental health care of Oregon women veterans by delivering this report, discussing its contents, and advocating for Oregon women veterans' health care needs with the VHA Network Director and senior leadership for VHA VISN 20 (the VA Northwest Health Network) and the administrators of each of the VHA hospitals that serve Oregon veterans.
- Stakeholders. ODVA should raise awareness of the demographics, access, and utilization of VHA and non-VHA physical and mental health care of Oregon women veterans by widely publicizing this report and discussing its contents with Oregon veterans and the Oregon health care community.

2. ODVA should establish a “health care navigator” to serve as an expert and advocate for Oregon women veteran’s physical and mental health care needs, including eliminating barriers to access and increasing utilization of services.

- Oregon Legislative Assembly. The Legislative Assembly and ODVA should collaborate to develop a Health Care Navigator position within ODVA. This position would provide outreach and education on physical and mental health care for Oregon women and men veterans; develop an expertise in the complex VHA application and internal VHA processes;

Recommendations

work to eliminate barriers to health care access and to increase utilization of services; advocate for Oregon veterans and develop strategies with VHA to improve access and utilization of health care with VHA (initially focusing on care for women veterans); troubleshoot problems with the VHA for Oregon veterans; provide targeted training to veteran service officers; and serve as a liaison for ODVA with the Oregon health care community, VHA, the Legislative Assembly and the Congressional Delegation.

Findings: Barriers to Access

- Access to immediate and urgent care within the VHA system is virtually non-existent for women outside the Portland area. Women report serious difficulty obtaining these necessary services and report using emergency care because immediate and urgent care are not available.
- Women often experience a sense of invisibility when interfacing with the VHA. Women report that they are frequently not recognized as veterans because VHA staff assumes that, because they are women, they are there to support a male veteran. Some women experience gender-specific hostility from VHA providers, including being chastised for taking a health care appointment or taking away a place in the system that a male veteran should have.

Recommendations:

3. Access to VHA immediate and urgent care for Oregon women veterans must be improved throughout the state.

- VHA and ODVA. ODVA and VHA should collaborate to improve access to VHA immediate care and urgent care. The VHA should work with ODVA to study this issue and identify actionable solutions.

4. Women veterans interfacing with the VHA should experience a hospitable environment and should not experience gender-specific hostility from VHA providers or VHA staff.

- VHA and ODVA. VHA should collaborate with ODVA on strategies for VHA to provide internal training for gender-informed systems changes and communication to provide an environment that is hospitable for women veterans.

Findings: Establishing Care and Identifying Veterans

- Under the VHA system, the Veterans Integrated Service Network (VISN) is comprised of geographically configured “catchment areas” and veterans can only receive care within their catchment area. If a veteran moves, poor records transfer and difficulty establishing care in the new area often make the transition challenging.
- Women veterans outside the VHA system are not likely to be identified as veterans by their health care provider. Identifying women veterans as veterans in all health care settings could improve care, especially with respect to trauma-informed care.¹⁶

Recommendations

5. ODVA should serve as a resource and advocate for women veterans who experience difficulty establishing care or transferring care within the VHA.

- Oregon Legislative Assembly. The Legislative Assembly and ODVA should collaborate to develop a Health Care Navigator position within ODVA who would serve as a resource and advocate for women veterans who experience difficulty establishing care or transferring care. (See complete description of Health Care Navigator under Recommendation 2.)

6. VHA should improve and streamline processes for women veterans transferring between catchment areas.

- VHA and ODVA. VHA should collaborate with ODVA on strategies for VHA to improve and streamline processes for women veterans transferring between catchment areas.

7. Non-VHA health care providers should treat military service as a “vital statistic” for women patients, and veteran status should be taken into consideration when providing care.

- Oregon Health Authority and ODVA. Oregon non-VHA health care providers should treat military service as a “vital statistic” for women patients, and veteran status should be taken into consideration when providing care. As a first step in establishing this practice, ODVA should work with the Oregon Health Authority to integrate military service consideration into patient in-take and treatment protocols through all of Oregon’s Coordinated Care

Recommendations

Organizations. Trained non-VHA providers should screen veterans for military sexual trauma (MST) and post-traumatic stress disorder (PTSD).

Findings: Access to Women-Specific Services for MST or PTSD

- Military sexual trauma (MST) is prevalent in women veterans; however, women veterans may not be getting the care they need for MST or resultant physical conditions or PTSD (post-traumatic stress disorder).
- There are no inpatient services for treating MST; women who need this type of treatment must wait for a treatment slot to open at a facility in either California or Texas.

Recommendations

8. Research should be conducted to understand why a number of women with MST are not accessing treatment to ensure that treatment is available and appropriate.

- VHA and ODVA. VHA, in consultation with ODVA, should consider undertaking research to determine why a number of women with MST are not accessing treatment to ensure that treatment is available and appropriate or whether alternative, non-VHA treatment should be available.

Finding: Women Providers and Gender-Informed Services

- Approximately 30% of the VHA health care facilities in Oregon do not have a health care provider available who is a woman. For some women, especially those who have experienced MST, not having access to a woman provider is a serious barrier to accessing care.
- There is an inadequate number of secure, women-only inpatient psychiatric and substance abuse treatment facilities in Oregon.
- Outside of the Portland area, the VHA does not provide women-only support groups; women veterans report that attending support groups with men veterans is not conducive to their treatment objectives.

Recommendations:

9. Strategies should be developed for more recruitment and retention of VHA health care

providers who are women to provide physical and mental health care for Oregon women veterans.

- VHA and ODVA. VHA should collaborate with ODVA to develop strategies to increase VHA efforts to recruit and retain more qualified women providers or create a way for women veterans to use veteran benefits to establish care with a non-VHA local woman primary care provider.
- ODVA, Office of Rural Health and Oregon Primary Care Association. ODVA should collaborate with the Oregon Office of Rural Health and the Oregon Primary Care Association to develop strategies and plan to ensure the accessibility of a woman provider.

10. VHA women-only in-patient substance abuse and psychiatric treatment programs need to be established for Oregon women veterans in Oregon.

- VHA and ODVA. VHA should collaborate with ODVA to establish secure women-only in-patient substance abuse and psychiatric treatment programs in Oregon.

11. VHA needs to establish women-only support groups for women veterans with mental and behavioral health issues.

- VHA and ODVA. VHA should collaborate with ODVA to establish women-only support groups for women veterans with mental and behavioral health issues.

Final Recommendation

12. By November 1, 2018, ODVA should prepare a report on the implementation of the recommendations contained in this report.

End Notes

1. Dedoose Version 7.0.23, (2016). Los Angeles, CA: SocioCultural Research Consultants, LLC (www.dedoose.com)
2. A convenience sample is a method of drawing representative data from people who are relatively easy to reach, in this case using mailing lists already in available and in use by the ODVA.
3. The Portland region is defined as the western section of the Portland catchment area, comprised of Multnomah, Washington, Clackamas, Benton, Clatsop, Columbia, Hood River, Lincoln, Linn, Polk, Tillamook, and Yamhill counties.
4. R Core Team (2016). R: A language and environment for statistical computing. R Foundation for Statistical Computing, Vienna, Austria.
5. Department of Veterans Affairs, VetPop2014, via the National Center for Veterans Analysis and Statistics (NCVAS).
6. Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2014.
7. Veterans Health Administration current enrollment data provided by the Oregon Department of Veterans Affairs (ODVA).
8. USDVA, Study of Barriers for Women Veterans to VA Health Care, April 2015
9. VHA, WHEI, Sourcebook, Volume 3: Women Veterans in the Veterans Health Administration, 2014
10. Questionnaire Survey conducted for this study
11. Altarum Institute (2015). Study of Barriers for Women Veterans to VA Health Care.
12. U.S Department of Veterans Affairs, National Center for Post Traumatic Stress Disorder, PTSD Quarterly, Volume 20/NO2, 2009.
13. Bell, M. E., & Reardon, A. (2011). Experiences of sexual harassment and sexual assault in the military among OEF/OIF Veterans: Implications for health care providers. *Social Work in Health Care*, 50, 34–50. <http://dx.doi.org/10.1080/00981389.2010.513917>
14. Differential Risk for Homelessness Among US Male and Female Veterans With a Positive Screen for Military Sexual Trauma, Emily Brignone, BS1,2; Adi V. Gundlapalli, MD, PhD, MS1,3,4; Rebecca K. Blais, PhD1,2; Marjorie E. Carter, MSPH1,3,4; Ying Suo, MS1,3,4; Matthew H. Samore, MD1,3,4; Rachel Kimerling, PhD5,6; Jamison D. Fargo, PhD, MS1,2, *JAMA Psychiatry*. 2016;73(6):582-589. doi:10.1001/jamapsychiatry.2016.0101.
15. Sexual Trauma in the Military: Exploring PTSD and Mental Health Care Utilization in Female Veterans. Sara Kintzle, Ashley C. Schuyler, Diana Ray-Letourneau, Sara M. Ozuna, Christopher Munch, Elizabeth Xintarianos, Anthony M. Hasson, and Carl A. Castro University of Southern California: Psychological Services American Psychological Association 2015, Vol. 12, No. 4, 394–401
16. Trauma-Informed Care recognizes the significant effect that a traumatic experience can have on a person's physical and mental health. It is an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma.

APPENDIX A
List of Veterans Health Administration Service Providers Interviewed

Interview	Catchment Area	Veteran Health Care Facility Interviewed	Facilities Discussed in the Interview
1	Portland	Portland VA Hospital	<ol style="list-style-type: none"> 1. Portland VA Hospital 2. Salem CBOC 3. North Coast Clinic 4. Lincoln City 5. Hillsboro CBOC 6. Fairview Clinic 7. Newport CBOC 8. The Dalles CBOC 9. West Linn CBOC 10. Bend CBOC
2	Roseburg	Roseburg VA Hospital	<ol style="list-style-type: none"> 1. Roseburg VA Hospital 2. Eugene CBOC 3. Brookings CBOC 4. North Bend CBOC
3	Portland	West Linn CBOC	<ol style="list-style-type: none"> 1. West Linn CBOC
4	Walla Walla	Walla Walla VHA Medical Center	<ol style="list-style-type: none"> 1. La Grande CBOC 2. Marrow County PCTOC 3. Wallowa County PCTOC
5	White City	White City VHA Rehabilitation Center & Clinic	<ol style="list-style-type: none"> 1. White City/Southern Oregon Rehabilitation Center & Clinic 2. Klamath Falls CBOC 3. Grants Pass West CBOC

APPENDIX B
Veterans Health Administration Service Providers in Oregon Interview Guide

Veterans Health Administration Facility:

Survey Participants

- 1.
- 2.

Introduction:

The Rede Group, at the request of the Oregon Department of Veterans Affairs, is conducting a statewide study regarding the delivery and use of, and barriers in access to, health care and medical services for women veterans. The Rede Group will be asking questions regarding the services your health facility provides for specific health or women's health services that are outlined as "provider standards" in the VHA Handbook.

This interview will take approximately 90 minutes. We will be taking notes. Do you mind if we record the interview? The recording will not be shared with anyone outside of the Rede Group and will only be used as a reference to verify information with our notes. The final report will be made available to you. Your comments today will not be attributed to you in the report nor will they be shared with the Oregon Department of Veterans' Affairs. We will not attribute any information to you in the report and only include your name as a person that was interviewed if we receive your permission to do that.

Because we have 90 minutes to cover a wide range of services there may be times when I ask that we move onto another question and sometimes I may interrupt you to do so. Please know that this is not meant to be rude but rather to ensure that we cover all the questions.

Do you have any questions before we begin?

In this interview we would like to gather as much information from you as we can about the services provided at the _____ facility. In addition we would like to ask you about other clinics in your catchment area.

Which of these clinics if any can you provide information about?

Clinics in _____ Catchment Area

- 1.
- 2.
- 3.
- 4.

The following questions are about the services your health facility provides. I will first ask a question about providing a specific health service and then I will ask a series of more specific questions for some of the health services such as mental health and obstetrics and gynecology services. Let's go ahead and get started.

Survey Questions:

1. Do the following facilities provide primary care services?

- | | | | | |
|----------|-----|----|--------|-----------------|
| 1. _____ | Yes | No | Unsure | Woman Physician |
| 2. _____ | Yes | No | Unsure | Woman Physician |
| 3. _____ | Yes | No | Unsure | Woman Physician |
| 4. _____ | Yes | No | Unsure | Woman Physician |

(1) If no, what is your referral process if a patient comes in needing those services?

(2) If yes, is there a woman physician available to provide primary care?

2. Do the following facilities provide mental health services?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

2.a. Do the following facilities provide general counseling services?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

2.b. Do the following facilities provide post-traumatic stress disorder (PTSD) counseling?

- | | | | | |
|----------|-----|----|--------|-----------------|
| 1. _____ | Yes | No | Unsure | Gender-specific |
| 2. _____ | Yes | No | Unsure | Gender-specific |
| 3. _____ | Yes | No | Unsure | Gender-specific |
| 4. _____ | Yes | No | Unsure | Gender-specific |

(1) **If no**, what is your referral process if a patient comes in needing those services?

(2) **If yes**, do the following facilities provide gender-specific PTSD counseling? For example: Women-only counseling sessions.

(a) **If no**, what is your referral process if a patient comes in needing to see a female provider for PTSD counseling?

(3) Are your staff routinely trained specifically on the understanding and treatment of PTSD?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

2.c. Have your counselors been routinely trained to treat women veterans who are experiencing PTSD due to Military Sexual Trauma (MST)? What is the training process?

- | | | | | |
|----------|-----|----|--------|-----------------|
| 1. _____ | Yes | No | Unsure | Female Provider |
| 2. _____ | Yes | No | Unsure | Female Provider |
| 3. _____ | Yes | No | Unsure | Female Provider |
| 4. _____ | Yes | No | Unsure | Female Provider |

(1) **If no**, what is your referral process if a patient comes in needing those services?

(2) **If yes**, does a female provider treat these patients?

(a) **If no**, what is your referral process if a patient comes in and requests a female provider?

2.d. Do the following facilities provide in-patient psychiatric treatment?

- | | | | | |
|----------|-----|----|--------|---------------------|
| 1. _____ | Yes | No | Unsure | Women only facility |
| 2. _____ | Yes | No | Unsure | Women only facility |
| 3. _____ | Yes | No | Unsure | Women only facility |
| 4. _____ | Yes | No | Unsure | Women only facility |

(1) If no, what is your referral process if a patient comes in needing those services?

(2) If yes, do you provide gender-specific in-patient psychiatric treatment? For example, treatment environments that only include women.

2.e. Do the following facilities provide in-patient substance abuse treatment?

- | | | | | |
|----------|-----|----|--------|---------------------|
| 1. _____ | Yes | No | Unsure | Women only facility |
| 2. _____ | Yes | No | Unsure | Women only facility |
| 3. _____ | Yes | No | Unsure | Women only facility |
| 4. _____ | Yes | No | Unsure | Women only facility |

(1) If no, what is your referral process if a patient comes in needing those services?

(2) If yes, do you provide gender-specific substance abuse treatment? For example, treatment environments that only include women.

2.d. Do the following facilities provide psychological evaluations?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

2.e. Do the following facilities provide Traumatic Brain Injury Evaluations and Treatment?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

3. Do the following facilities provide family planning services?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

(1) **If no**, what is your referral process if a patient comes in needing those services?

(2) **If yes**, do you provide all types of contraceptives?

- Pill
- Female Condoms
- Cervical Cap (Femcap)
- IUD (Intrauterine Device)
- Contraceptive Implant
- Contraceptive Injections
- Vaginal Ring
- Contraceptive Patch
- Emergency Contraception such as Plan B

4. Do the following facilities provide maternity care?

- | | | | | |
|----------|-----|----|--------|-----------------|
| 5. _____ | Yes | No | Unsure | Female Provider |
| 6. _____ | Yes | No | Unsure | Female Provider |
| 7. _____ | Yes | No | Unsure | Female Provider |
| 8. _____ | Yes | No | Unsure | Female Provider |

(1) **If no**, what is your referral process if a patient comes in needing those services?

(2) **If yes**, do these facilities have a female provider available if requested?

5. Do the following facilities provide obstetrician and gynecologist services?

- | | | | | |
|----------|-----|----|--------|-----------------|
| 1. _____ | Yes | No | Unsure | Female Provider |
| 2. _____ | Yes | No | Unsure | Female Provider |
| 3. _____ | Yes | No | Unsure | Female Provider |
| 4. _____ | Yes | No | Unsure | Female Provider |

(1) **If no**, what is your referral process if a patient comes in needing those services?

(2) **If yes**, do these facilities have a female provider available if requested?

5.a Do the following facilities provide tubal ligation/surgical sterilizations, infertility evaluations, and cervical cancer screening?

- | | | | |
|----------|---------------|-------------------|-----------------|
| 1. _____ | Sterilization | Infertility Eval. | Cervical Cancer |
| 2. _____ | Sterilization | Infertility Eval. | Cervical Cancer |
| 3. _____ | Sterilization | Infertility Eval. | Cervical Cancer |
| 4. _____ | Sterilization | Infertility Eval. | Cervical Cancer |

(1) **If no**, what is your referral process if a patient comes in needing those services?

6. Do the following facilities provide mammography services?

- | | | | | |
|----------|-----|----|--------|-----------------|
| 1. _____ | Yes | No | Unsure | Female Provider |
| 2. _____ | Yes | No | Unsure | Female Provider |
| 3. _____ | Yes | No | Unsure | Female Provider |
| 4. _____ | Yes | No | Unsure | Female Provider |

(1) **If no**, what is your referral process if a patient comes in needing a mammography?

(2) **If yes**, do your facilities have a female provider available if requested?

(a) **If no**, what is your referral process if a patient comes in wanting a female provider?

7. Do the following facilities provide osteoporosis evaluations and treatment?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

8. Do the following facilities provide nutrition and weight management services?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

9. Do the following facilities have services for Healthy Living and Chronic Disease Self-Management Guidance specific to women veterans?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

10. Do the following facilities have Menopause Management services available?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

10.a. Do the following facilities provide hormone replacement therapy (HRT)?

- | | | | |
|----------|-----|----|--------|
| 5. _____ | Yes | No | Unsure |
| 6. _____ | Yes | No | Unsure |
| 7. _____ | Yes | No | Unsure |
| 8. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

11. Do the following facilities provide Incontinence Treatment?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

12. The next health service we'll discuss is HIV/STD Testing. Do the following facilities provide HIV/STD Testing?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

12.a. Do the following facilities provide counseling services for patients with HIV/AIDS or STDs?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

12.b. Do the following facilities provide treatment for HIV/AIDS or STDs?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If no, what is your referral process if a patient comes in needing those services?

12.c. What is your tracking process for following up counseling and treatment for a patient that tests positive HIV/AIDS?

13. Are your staff at the following facilities trained to screen for physical health issues related to military sexual assault and intimate partner violence?

- | | | | |
|----------|-----|----|--------|
| 1. _____ | Yes | No | Unsure |
| 2. _____ | Yes | No | Unsure |
| 3. _____ | Yes | No | Unsure |
| 4. _____ | Yes | No | Unsure |

If yes, can you please describe your clinical protocols to screen, ask, advise, and assist with physical health issues due to military sexual assault and intimate partner violence?

13.a. Do the following facilities provide treatment for physical health issues due to military sexual assault and intimate partner violence?

- | | | | | |
|----------|-----|----|--------|-----------------|
| 1. _____ | Yes | No | Unsure | Female Provider |
| 2. _____ | Yes | No | Unsure | Female Provider |
| 3. _____ | Yes | No | Unsure | Female Provider |
| 4. _____ | Yes | No | Unsure | Female Provider |

(1) If no, what is your referral process if a patient comes in needing those services?

(2) If yes, do your facilities have a female provider available if requested?

14. Do the following facilities provide additional service such as transportation, childcare, or extended hours?

- | | | | |
|----------|----------------|-----------|----------------|
| 1. _____ | Transportation | Childcare | Extended Hours |
| 2. _____ | Transportation | Childcare | Extended Hours |
| 3. _____ | Transportation | Childcare | Extended Hours |
| 4. _____ | Transportation | Childcare | Extended Hours |

(1) If yes, Please provide detail about those additional services

15. Do you provide any other services for women veterans?

Close:

Thank you so much for your time and attention today. Is there anything you would like to add at this time?

If you have any questions or want to follow-up on anything we talked about today please call or email me.

APPENDIX C
Overview of Focus Group Participants

Focus Group Locations	Number of Participants
Bend, OR	5
Portland, OR	11
Roseburg, OR	7

Counties of residence represented by focus group participants:

1. Multnomah
2. Deschutes
3. Lane
4. Douglas
5. Clackamas
6. Washington

Age range of focus group participants: 24-72

Branches of service represented by focus group participants:

- Navy
- Air Force
- Coast Guard
- Oregon National Guard
- Reserve
- Army
- Marines

Range of dates served of focus group participants: 1961-2012

There were focus group participants who had served in a combat zone and others that had not.

Enrolled in VHA Health Care: 17 participants

Not enrolled in VHA Health Care: 6 participants

Has a service-connected disability 17: participants

Does not have at service-connected disability: 6 participants

APPENDIX D
Focus Group Interview Guide

Group Location _____
Number in Group _____

[Introduction] [Make sure all name badges are visible to both Erin and Jill]

Thank you for agreeing to help us with this project. We appreciate your willingness to share your time and expertise. We are with the Rede Group and are working on a project to understand more about Women Veterans health care.

I am Jill Hutson and I will be moderating this discussion. Erin will be recording this discussion and taking notes. We are taping this discussion because we don't want to miss any comments but we will only use first names today and there will not be any names attached to the comments on the report. Moreover, the Rede Group will not use this video for *any* purpose other than developing the report.

What you say here is confidential. We are interested in hearing your experiences: your name will not be included in any reports. If you have *any* questions about this interview or the project after we leave, you can call us at this number, or you can talk to Erin or me.

[Hand out business cards.]

As we discuss topics, I want you to talk to each other rather than to me. I will start the conversation out with a question, but after that I will only jump in to get us back on track if you've gotten off the topic, or to bring up something we are interested in that you have not covered.

We are interested in hearing your opinions, thoughts and experiences, how you remember them. During our conversation today it's very important that you speak to your personal experience, opinions and beliefs as a consumer of health care. Sometimes it's tempting to talk about other in your circle of friends or relatives but we want to focus just on you. Feel free to disagree with me or with what others have said or give another opinion; you won't hurt my feelings or make me feel good with whatever opinions you might share; the more different ideas we hear, the more information we will have to work with.

We will finish our group by 8:30 at the latest and I will let you know when we are near the end of our time. If you have to use the restroom, just slip out quietly and come back as quickly as you can.

I am going to make every effort to keep the discussion focused and within our time frame. If too much time is being spent on one question or topic, I may move the conversation along so we can cover all the questions. Also, because we want to hear from everyone, I may ask those who have spoken up more to yield the floor to those who have not. This is not meant to be rude but rather to be sure we hear from any many perspectives as possible. This may mean that I interrupt you while you are talking. This is not meant to be rude but may need to happen just to keep the discussion moving.

During our conversation today it's very important that you speak to you personal experience, opinions and beliefs as a consumer of health care. Sometimes it's tempting to talk about other in your circle of friends or relatives but we want to focus just on you. **[Note about VA employees present or past.]**

Are there any questions before we begin?

[Focus group discussion begins.]

Let's start with introductions. Please introduce yourself – you're welcome to use only your first name. Let's just go around the table, starting with _____.

[Engagement/Rapport Question]

Health care is a big topic that might bring up thoughts, memories and emotions for you. What comes to mind when I say the term health care?

[Exit Question]

Is there anything else?

Short paper survey: Where do you receive your health care services?

[Exploration Question]

We want to talk about what's important to you when it come health care. When you are making a decision about going to a doctor what is the main thing that determines where you go to get health care?

[Transition Statement]

Now I want to ask you to talk about your thoughts and experiences with health care in the last year or so.

[Lead-in Question]

Thinking back over the last year or so, how many of you have gone to a doctor or other healthcare provider?

How about more than once **[Record number]**

More than twice **[Record number]**

3 times **[Record number]**

4 times **[Record number]**

More than 5 times **[Record number]**

[Exploration Question]

When you did go to the doctor or health care provider what did you like most about your experience?

[Exit Question]

Is there anything else you would like to say about what you liked least?

[Exploration Question]

When you did go to the doctor or health care provider what did you like least about your experience?

[Exit Question]

Is there anything else you would like to say about what you liked least?

[Transition statement]

Now, I'd like to talk about reasons that going to the doctor or health care provider might be difficult.

[Exploration Questions]

1. Has there been a time in the last 2 years when you wanted/needed to go to the doctor but didn't? Please raise your hand if that's the case. **[Record number]**
2. If, so why did you choose not to go see a doctor, health care provider
3. Are there other things that make it difficult to get the health care you need? If so, what are those reasons?

[Transition statement]

Let's shift gears and talk about what you would make it easier to get the care you need?

[Exploration Question]

What are 1 or 2 things that would make it easier to get the care you need?

[Exit Question]

Is there anything else you would like to say about what would make it easier to get the care you need.

[Transition statement]

Now, I would like to talk about the "quality" of care you receive when you go the doctor or health care provider.

[Lead-in statement]

A few minutes ago we talked about what you liked least about your recent doctors visits or interactions with the health care providers. I'd like you to think again about what you did not like about the quality of care you received.

IOM 6 points of quality care

- Safety - patients should not be harmed by the care that is intended to help them
- Patient-Centered - care should be based on individual needs
- Timely - waits and delays in care should be reduced
- Effective - care should be evidence-based
- Efficient - reduce waste
- Equitable - care should be equal for all people

Right care to the right patient at the right time – every time

[Exploration Question(s)]

What would you change about the care you received? Please be as specific as possible
[Possible reminder about context. Personal consumer only]

[Exploration Question(s)]

In your opinion, what is the most important thing that should change in health care for women veterans?

Do you have anything else to add about health care for women veterans or any questions?

Thank you very much for coming. You can pick your card up from the table. You will need to sign a statement that you received it.

We REALLY appreciate your input.

[Conclusion]

Questionnaire: Women Veterans Health Care

Introduction

Thank you for participating in this survey for the State of Oregon Department of Veterans Affairs (ODVA). ODVA wants to learn how it can help Oregon women veterans better access and use health care and mental health care services. ODVA is working with The Rede Group to study these important issues and make recommendations to ODVA and the Legislature.

Once you complete this survey you can enter your name for a chance to win one of three \$100.00 Visa gift cards.

- This survey will take approximately 15 minutes to complete. This survey is part of a larger study of which the purpose is to understand the extent to which women veterans use health and mental health services, the barriers women veterans face in accessing these services, and how ODVA and the Oregon legislature may better serve women veterans regarding health care.
- The information you give us is completely confidential, and we will not associate your name with your survey responses.
- You may withdraw from the survey at any time.
- If you have any questions now or after you have completed the survey, you can always contact a study team member or you can call ODVA.

The Rede Group

Alex McFerrin
503-764-9696

ODVA

Elizabeth Estabrooks
503-373-2188

1. Have you served in the United States Military?

Yes

No [Skip to disqualification page]

Population:

- All survey participants

Questionnaire: Women Veterans Health Care

2. Are you a woman or do you identify as a woman?

Yes

No [Skip to disqualification page]

Population:

- Served in the United States Military

Questionnaire: Women Veterans Health Care

3. Do you have a service-connected disability?

- Yes
- No [Skip to Q46]

Population:

- Served in the United States Military
- Woman or identifies as a woman

Questionnaire: Women Veterans Health Care

4. Over the last 18 months, have you visited a doctor or health care provider for any of the following services, *excluding* counseling or mental health services? (select all that apply)

- Regular checkup or women's health checkup
- Other preventive care such as a flu shot or other immunizations
- Illness or injury (not related to a service-connected disability)
- Vision or hearing
- Service-connected disability
- Treatment for chronic illness such as cancer, diabetes, or HIV/AIDS
- I have not visited the doctor in the last 18 months [Skip to Q24]
- Other (please explain)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability

Questionnaire: Women Veterans Health Care

5. Did you receive these services through a U.S. Veterans Health Administration (VA) facility, including a hospital or clinic? (If yes, please specify which facility/facilities)

- Yes
- No [Skip to Q12]
- I received services through the VA *and* through a provider outside the VA system [Skip to Q15]

If you received services from the VA, please specify which VA health care facility/facilities

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services

Questionnaire: Women Veterans Health Care

VA Health Care Services

The next series of questions will ask about your experience with VA health care services. Your answers should reflect your overall experience with the VA health care system.

6. Did the VA facilities offer the full range of services you needed? (select one)

- Yes, they provided the full range of services
- They provided the services I needed *most* of the time
- They provided some services but not all
- No, they did not provide the services I needed

7. Overall, how satisfied have you been with the health care services and treatment you have received at VA health care facilities? (select one)

- Very satisfied [Skip to Q9]
- Satisfied [Skip to Q9]
- Neither satisfied nor dissatisfied [Skip to Q9]
- Dissatisfied
- Very Dissatisfied

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through VHA only

Questionnaire: Women Veterans Health Care

VA Health Care Services

8. What aspects have you been dissatisfied with? (select all that apply)

- I did not like the care I received
- I did not like the care provider (i.e. the physician or nurse practitioner)
- I did not like how long it took to get an appointment to see a provider
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through VHA only
- Either dissatisfied or very dissatisfied with the care they received

Questionnaire: Women Veterans Health Care

VA Health Care Services

9. Typically, how far did you travel to VA health care facilities? (select one)

- Less than 10 miles
- 11-50 miles
- 51-100 miles
- More than 100 miles [Skip to Q11]

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through VHA only

Questionnaire: Women Veterans Health Care

10. Have you ever had to travel more than 100 miles to a VA health care facility?

Yes

No

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through VHA only

Questionnaire: Women Veterans Health Care

11. Typically, what form of transportation do you use to get to a VA health care facility? (select all that apply)

- Private vehicle
- DAV van
- People mover or public transportation
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through VHA only

[All answers skip to Q24]

Questionnaire: Women Veterans Health Care

Healthcare Services Outside the VA

When answering the following questions, think back to visits with health care providers outside of the VA system over the last 18 months

12. Where have you received your health care services? (select all that apply)

- Private local clinic/provider
- County/tribal health department/provider
- Emergency or urgent care
- Other (please specify)

13. Were you able to use VA benefits to help pay for the services/treatment? (select one)

- Yes
- No
- Some of the time

14. Why did you choose not to use VA health services? (select all that apply)

- I have private insurance or an HMO
- I am covered by Medicare, Oregon Health Plan, or Indian Health Services
- I cannot get time off work (or time I get off is without pay)
- I do not have access to child care or I cannot afford child care
- I feel uncomfortable or unsafe going to the VA
- I do not like the care I received from the VA (please explain)
- I do not like the that when I go to the VA there are always new/different providers
- VA does not offer the services I need (please explain)
- I do not like the providers at the VA (please explain)
- I do not have transportation
- I do not know who to call/where to go

Please explain your answer

Population (page 11):

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through non-VHA only

Questionnaire: Women Veterans Health Care

VA Health Care Services

The next series of questions will ask about your experience with VA health care services. Your answers should reflect your overall experience with the VA health care system.

15. Did the VA facilities offer the full range of services you needed? (select one)

- Yes, they provided the full range of services
- They provided the services I needed *most* of the time
- They provided some services but not all
- No, they did not provide the services I needed

16. Overall, how satisfied have you been with the health care services and treatment you have received at VA health care facilities?

- Very satisfied [Skip to Q18]
- Satisfied [Skip to Q18]
- Neither satisfied nor dissatisfied [Skip to Q18]
- Dissatisfied
- Very Dissatisfied

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

VA Health Care Services

17. What aspects have you been dissatisfied with? (select all that apply)

- I did not like the care I received
- I did not like the care provider (i.e. the physician or nurse practitioner)
- I did not like how long it took to get an appointment to see a provider
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through both VHA and non-VHA
- Either dissatisfied or very dissatisfied with the care they received

Questionnaire: Women Veterans Health Care

VA Health Care Services

18. Typically, how far did you travel to VA health care facilities? (select one)

- Less than 10 miles
- 11-50 miles
- 51-100 miles
- More than 100 miles [Skip to Q20]

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

19. Have you ever had to travel more than 100 miles to a VA health care facility?

Yes

No

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

20. Typically, what form of transportation do you use to get to VA health care facilities? (select all that apply)

- Private vehicle
- DAV van
- People mover or public transportation
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

Health Care Services Outside the VA

When answering the following questions, think back to visits with health care providers outside the VA over the past 18 months

21. Where did you receive health care services outside of the VA? (select all that apply)

- Private local clinic/provider
- County/tribal health department/provider
- Emergency or urgent care
- Other (please specify)

22. Were you able to use VA benefits to help pay for the services/treatment?

- Yes
- No
- Some of the time

23. Why did you choose not to use VA health services? (select all that apply)

- I have private insurance or an HMO
- I am covered by Medicare, Oregon Health Plan, or Indian Health Services
- I cannot get time off work (or time I get off is without pay)
- I do not have access to child care or I cannot afford child care
- I feel uncomfortable or unsafe going to the VA
- I do not like the care I received from VA
- I do not like the that when I go to the VA there are always new/different providers
- VA does not offer the services I need
- I do not like the people at the VA
- I do not have transportation
- I do not know who to call/where to go

Other, please explain

Population (page 18):

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have visited a health care provider in the past 18 months, excluding counseling or mental health services
- Received health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

Counseling and Mental Health Services

24. In the last 18 months, have you visited a doctor or health care provider for counseling or mental health services, including treatment for substance abuse?

- Yes
- No [Skip to Q44]

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability

Questionnaire: Women Veterans Health Care

Counseling and Mental Health Services

25. Did you receive counseling or mental health services through a Veterans Health Administration (VA) facility, including a hospital or clinic? (If yes, please specify which one)

- Yes
- No [Skip to Q34]
- I received services through the VA and through providers outside the VA system [Skip to Q35]

If you received services through the VA, please specify which VA health care facility

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months

Questionnaire: Women Veterans Health Care

VA Counseling and Mental Health Services

The next series of questions will ask about your experience with VA counseling and mental health care services. Your answers should reflect your overall experience with the VA counseling and mental health care system.

26. Did the VA health care facilities offer the full range of counseling or mental health services you needed?

- Yes, they provided the full range of counseling and mental health services I needed
- They provided the counseling and mental health services I needed *most* of the time
- They provided some of the counseling and mental health services I needed but not all
- No, they did not offer the counseling and mental health services I needed

27. Overall, how satisfied were you with the counseling or mental health services and treatment you received at the VA health care facilities?

- Very satisfied [Skip to Q29]
- Satisfied [Skip to Q29]
- Neither satisfied nor dissatisfied [Skip to Q29]
- Dissatisfied
- Very dissatisfied

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through VHA only

Questionnaire: Women Veterans Health Care

VA Counseling and Mental Health Services

28. What aspects have you been dissatisfied with? (select all that apply)

- I did not like the care I received
- I did not like the care provider (i.e. the physician or nurse practitioner)
- I did not like how long it took to get an appointment to see a provider
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through VHA only
- Either dissatisfied or very dissatisfied with the counseling or mental health care services

Questionnaire: Women Veterans Health Care

VA Counseling and Mental Health Services

29. Typically, how far did you travel to VA health care facilities for counseling or mental health services?
(select one)

- Less than 10 miles
- 11-50 miles
- 51-100 miles
- More than 100 miles [Skip to Q31]

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through VHA only

Questionnaire: Women Veterans Health Care

30. Have you ever had to travel more than 100 miles to a VA health care facility for counseling or mental health services?

Yes

No

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through VHA only

Questionnaire: Women Veterans Health Care

31. Typically, what form of transportation do you use to get to VA health care facilities for counseling or mental health services? (select all that apply)

- Private vehicle
- DAV van
- People mover or public transportation
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through VHA only

[All answers skip to Q44]

Questionnaire: Women Veterans Health Care

Counseling and Mental Health Services Outside the VA

When answering the following questions, think about times over the last 18 months when you visited a provider outside of the VA system for counseling or mental health services

32. Where did you receive counseling or mental health services? (select all that apply)

- Private local clinic/provider
- County/tribal health department clinic/provider
- Emergency or urgent care
- Local counseling center
- Local non-profit organization
- Other (please specify)

33. Were you able to use VA benefits to help pay for the services/treatment?

- Yes
- No
- Some of the time

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through non-VHA only

34. Why did you choose not to use VA health services for counseling or mental health care? (select all that apply)

- I have private insurance or an HMO
- I am covered by Medicare, Oregon Health Plan, or Indian Health Services
- I cannot get time off work (or time I get off is without pay)
- I do not have access to child care or I cannot afford child care
- I feel uncomfortable or unsafe going to the VA
- I do not like the care I receive from the VA
- I do not like the that when I go to the VA there are always new/different providers
- The VA does not offer the services I need
- I do not have transportation
- I did not know who to call/where to go
- Other, please explain

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through non-VHA only

[All answers skip to Q44]

Questionnaire: Women Veterans Health Care

VA Counseling and Mental Health Services

The next series of questions will ask about your experience with VA counseling and mental health care services. Your answers should reflect your overall experience with the VA counseling and mental health care system.

35. Did the VA health care facilities offer the full range of counseling or mental health services you needed?

- Yes, they provided the full range of counseling and mental health services I needed
- They provided the counseling and mental health services I needed *most* of the time
- They provided some of the counseling and mental health services I needed but not all
- No, they did not offer the counseling and mental health services I needed

36. Overall, how satisfied are you with the counseling or mental health services and treatment you have received at the VA health care facility?

- Very satisfied [Skip to Q38]
- Satisfied [Skip to Q38]
- Neither satisfied nor dissatisfied [Skip to Q38]
- Dissatisfied
- Very dissatisfied

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

VA Counseling and Mental Health Services

37. What aspects have you been dissatisfied with? (select all that apply)

- I did not like the care I received
- I did not like the care provider (i.e. the physician or nurse practitioner)
- I did not like how long it took to get an appointment to see a provider
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

VA Counseling and Mental Health Services

38. Typically, how far did you travel to VA health care facilities for counseling or mental health services?
(select one)

- Less than 10 miles
- 11-50 miles
- 51-100 miles
- More than 100 miles [Skip to Q40]

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through both VHA and non-VHA

39. Have you ever had to travel more than 100 miles to a VA health care facility for counseling or mental health services?

Yes

No

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

40. Typically, what form of transportation do you use to get to VA health care facilities for counseling or mental health services? (select all that apply)

- Private vehicle
- DAV van
- People mover or public transportation
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

Counseling and Mental Health Services Outside the VA

When answering the following questions, think about times over the last 18 months when you visited a provider outside of the VA system for counseling or mental health services.

41. When you received non-VA counseling or mental health service, where did you go? (select all that apply)

- Private local clinic/provider
- County/tribal health department clinic/provider
- Emergency or urgent care
- Local counseling center
- Local non-profit organization
- Other (please specify)

42. Were you able to use VA benefits?

- Yes
- No
- Some of the time

If no or some of the time, please explain

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through both VHA and non-VHA

43. Why did you choose not to use VA health services? (select all that apply)

- I have private insurance or an HMO
- I am covered by Medicare, Oregon Health Plan, or Indian Health Services
- I cannot get time off work (or time I get off is without pay)
- I do not have access to child care or I cannot afford child care
- I feel uncomfortable or unsafe going to the VA
- I do not like the care I receive from the VA
- I do not like the that when I go to the VA there are always new/different providers
- The VA does not offer the services I need
- I do not have transportation
- I did not know who to call/where to go
- Other, please explain

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability
- Have seen a health care provider for counseling or mental health services in the last 18 months
- Received counseling or mental health care services through both VHA and non-VHA

Questionnaire: Women Veterans Health Care

COICE and Voucher Program

44. Have you used the CHOICE or Voucher Program? (select all that apply)

- Yes, I have used the CHOICE Program
- Yes, I have used the Voucher Program
- No
- I do not know what the CHOICE or Voucher Program is [Skip to Q56]

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability

Questionnaire: Women Veterans Health Care

45. Which one of the following statements about the CHOICE or Voucher Program is most true for you?
(select one)

- I want to be able to use the CHOICE or Voucher Program more often
- I only want to use the CHOICE or Voucher Program when I have to
- I wish I never had to use the CHOICE or Voucher Program
- Other (please explain)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has a service-connected disability

[All answers skip to Q56]

Questionnaire: Women Veterans Health Care

Health Care Services

46. Over the past 18 months, have you visited your doctor or health care provider for any of the following services, *excluding* counseling or mental health services? (select all that apply)

- Regular checkup or women's health checkup
- Other preventive care such as a flu shot or other immunization
- Illness or injury
- Vision or hearing
- Treatment for chronic illness such as cancer, diabetes, HIV/AIDS
- I have not visited the doctor in the last 18 months [Skip to Q51]
- Other (please explain)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Does not have a service-connected disability

Questionnaire: Women Veterans Health Care

Health Care Services

47. Where did you receive these services? (select all that apply)

- Through a private local clinic/provider
- Through a county health department clinic/provider
- Emergency or urgent care
- Local counseling center
- U.S. Veterans Administration (VA) facility, including a hospital or clinic
- Other (please specify)

48. How did you select where you received services? (select all that apply)

- It is covered by my insurance or HMO
- It is covered by Medicare or Indian Health Services
- It is covered by the Oregon Health Plan
- It is conveniently located to my home or work
- It is where my primary care doctor provides service
- It is covered through my VA benefits
- Other (please explain)

49. Overall, how satisfied were you with the health care services and treatment you received?

- Very satisfied [Skip to Q51]
- Satisfied [Skip to Q51]
- Neither satisfied nor dissatisfied [Skip to Q51]
- Dissatisfied
- Very dissatisfied

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Does not have a service-connected disability
- Has visited a health care provider in the last 18 months, excluding counseling or mental health services

Questionnaire: Women Veterans Health Care

Healthcare Services

50. What aspects were you dissatisfied with? (select all that apply)

- I did not like the care I received
- I did not like the care provider (i.e. physician or nurse practitioner)
- I did not like how long it took to get an appointment to see a provider
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Does not have a service-connected disability
- Has visited a health care provider in the last 18 months, excluding counseling or mental health services
- Either dissatisfied or very dissatisfied with health care services

Questionnaire: Women Veterans Health Care

Counseling and Mental Health Services

51. In the last 18 months, have you visited a doctor or health care provider for counseling or mental health services, including treatment for substance abuse?

- Yes
- No [Skip to Q56]

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Does not have a service-connected disability

Questionnaire: Women Veterans Health Care

Counseling and Mental Health Services

52. Where did you receive counseling or mental health services? (select all that apply)

- Private local clinic/provider
- County/tribal health department clinic/provider
- Emergency or urgent care
- Local counseling center
- U.S. Veterans Administration (VA) facility, including a hospital or clinic
- Other (please specify)

53. How did you select where you received counseling or mental health services? (select all that apply)

- It is covered by my insurance or HMO
- It is covered by Medicare or Indian Health Services
- It is covered by Oregon Health Plan
- It is conveniently located to my home or work
- It is where my primary care doctor provides services
- It is covered through my VA benefits
- Other (please specify)

54. Overall, how satisfied were you with the counseling or mental health services and treatment you received?

- Very satisfied [Skip to Q56]
- Satisfied [Skip to Q56]
- Neither satisfied nor dissatisfied [Skip to Q56]
- Dissatisfied
- Very dissatisfied

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Does not have a service-connected disability
- Received counseling or mental health care services in the last 18 months

Questionnaire: Women Veterans Health Care

Counseling and Mental Health Services

55. What aspects were you dissatisfied with? (select all that apply)

- I did not like the care I received
- I did not like the care provider (i.e. physician or nurse practitioner)
- I did not like how long it took to get an appointment to see a provider
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Does not have a service-connected disability
- Received counseling or mental health care services in the last 18 months
- Either dissatisfied or very dissatisfied with counseling or mental health care services

Questionnaire: Women Veterans Health Care

56. Did you experience sexual assault, rape, or harassment while on active duty?

- Yes
- No [Skip to Q59]

Population:

- Served in the United States Military
- Woman or identifies as a woman

Questionnaire: Women Veterans Health Care

57. Do you receive service-connected benefits for military sexual trauma (MST) or post-traumatic stress disorder (PTSD)?

Yes [Skip to Q59]

No

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has experienced sexual assault, rape, or harassment while on active duty

Questionnaire: Women Veterans Health Care

58. Have you applied for military sexual trauma (MST) or post-traumatic stress disorder (PTSD) service-connected benefits?

Yes

No

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Has experienced sexual assault, rape, or harassment while on active duty
- Do not receive service-connected benefits for military sexual trauma or post-traumatic stress disorder

Questionnaire: Women Veterans Health Care

59. Was there a time in the past 18 months when you felt you needed to see a health care provider but could not?

- Yes, there was a time when I felt like I needed care but did not or could not get it
- No [Skip to Q61]

Population:

- Served in the United States Military
- Woman or identifies as a woman

Questionnaire: Women Veterans Health Care

Barriers to Accessing Counseling or Mental Health Services

60. If you felt like you needed health care or mental health care services but couldn't access them, what were the reasons? (check all that apply)

- Cost
- I do not have child care or I cannot afford child care
- I cannot get time off work (or time I get off is without pay)
- I do not like the services at the VA health care system
- The VA does not provide the services I need
- I do not like the people at the VA
- The VA health care services are too far away
- I am not eligible for VA health care
- I do not think the VA can help me with my mental health issues
- There are no women VA mental health providers in my community
- The wait is too long to see a VA mental health provider
- I was not ready to address my mental health issues
- I do not have insurance
- I was too busy
- Other (please specify)

Population:

- Served in the United States Military
- Woman or identifies as a woman
- There was a time in the past 18 months when they felt they needed to see a health care provider but could not

Questionnaire: Women Veterans Health Care

61. Are you enrolled in the VA health care system?

Yes [Skip to Q63]

No

Population:

- Served in the United States Military
- Woman or identifies as a woman

Questionnaire: Women Veterans Health Care

62. Have you attempted to enroll in the VA health care system?

Yes

No

If no, please describe why not

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Not enrolled in VA health care system

Questionnaire: Women Veterans Health Care

63. What is the one thing you would like to see improved in VA health services?

64. Is there anything else you would like to share about your experience with health care or mental health care as a woman veteran?

65. Branch of service:

66. What dates did you serve in the military?

67. Did you serve in a combat zone?

Yes

No

Population:

- Served in the United States Military
- Woman or identifies as a woman

Questionnaire: Women Veterans Health Care

68. What county do you live in?

69. What is your zip code?

70. How old are you?

71. Please select all that apply:

- I would like my name to be entered into a drawing for \$100.00 Visa gift card.
- I would be interested in attending a focus group about veterans' issues in Oregon. Focus group participants will receive a stipend of \$50.00 (focus groups will be in Portland, Bend, and Roseburg).
- I would like to talk to someone at the Oregon Department of Veterans' Affairs about health care or other veteran-related issues I am experiencing.
- I am not interested in these options. [\[Skip to page 54\]](#)

Population:

- Served in the United States Military
- Woman or identifies as a woman

Questionnaire: Women Veterans Health Care

72. Please enter your contact information: (your contact information will not be linked to your survey responses)

Name

Email Address

Phone Number

Population:

- Served in the United States Military
- Woman or identifies as a woman
- Would like to do at least one of the following: enter for VISA gift card drawing, attend a focus group, or speak to someone at ODVA

Questionnaire: Women Veterans Health Care

Thank you for taking the time to complete the survey. If you have any question now or in the future, or if you would like to discuss your experience as a woman veteran, please call Elizabeth A. Estabrooks, (971) 720-9116 or e-mail her at Elizabeth.estabrooks@state.or.us

Population:

- Served in the United States Military
- Woman or identifies as a woman

APPENDIX F
Questionnaire Survey Tables

WOMEN VETERANS HEALTH CARE SURVEY

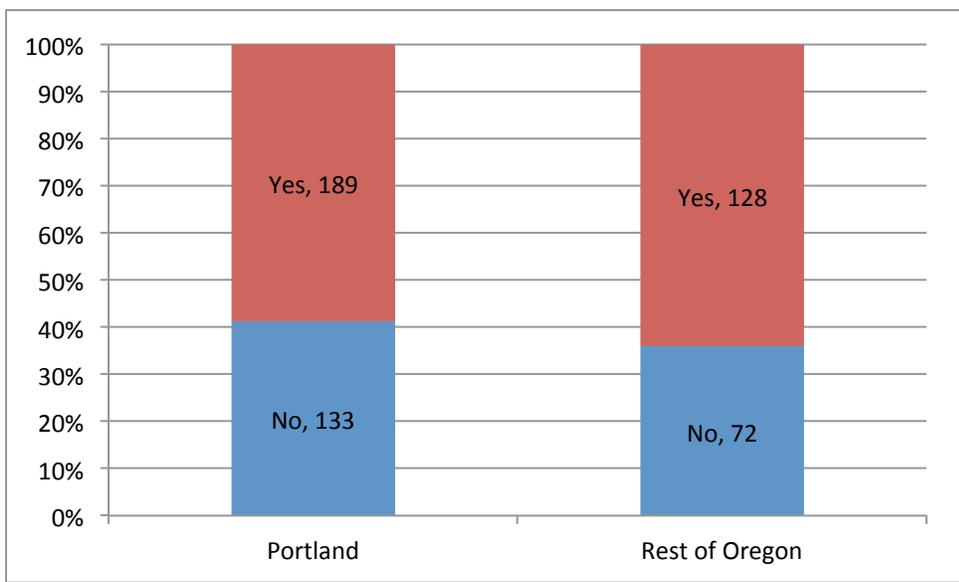
Portland Region Compared to Rest of Oregon

8/30/2016

3. Do you have a service-connected disability?

Population: 522

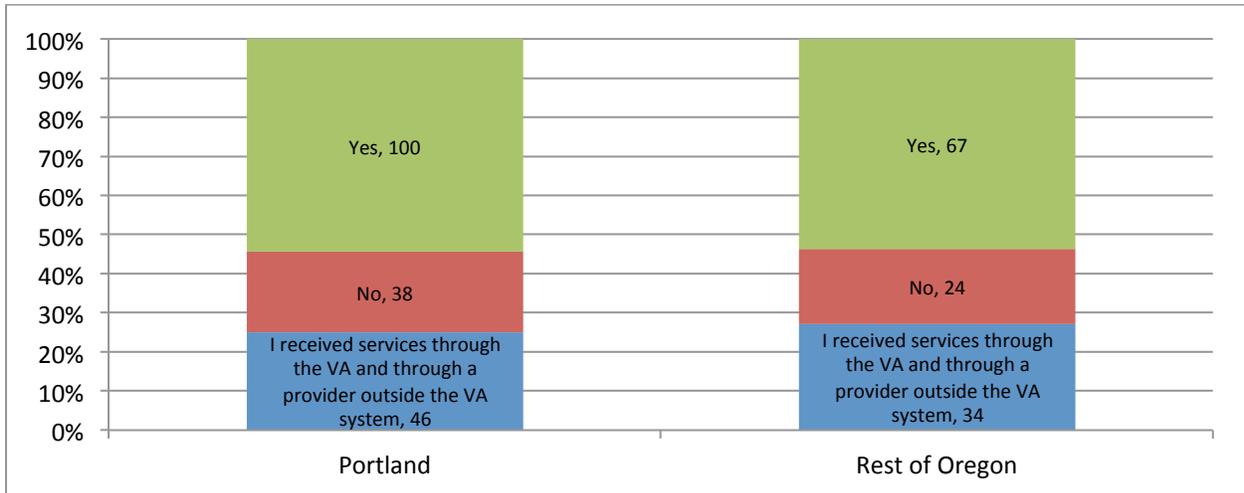
1. Woman or identify as a woman
2. Served in the U.S. Military



5. Did you receive these services through a U.S. Veterans Health Administration (VA) facility, including a hospital or clinic? (If yes, please specify which facility/facilities)

Population: 330

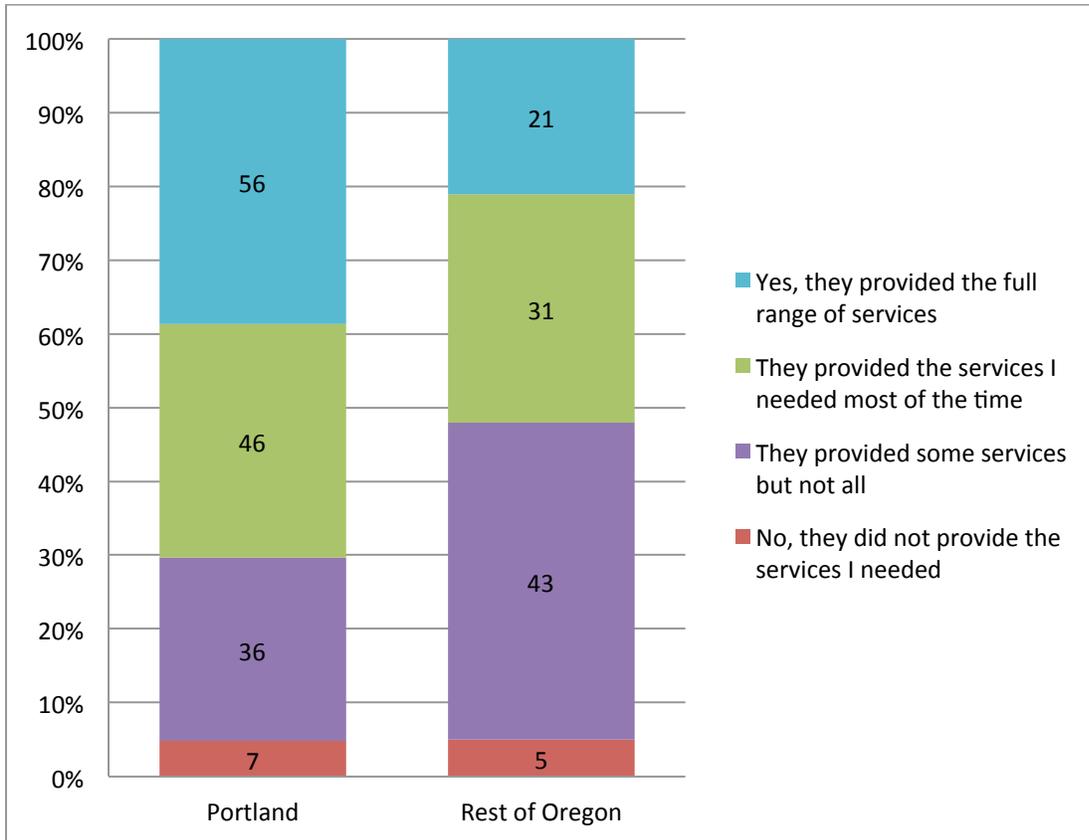
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has visited a doctor or health care provider in the last 18 months, excluding counseling or mental health services



6. (combined with 15) Did the VA facilities offer the full range of services you needed? (select one)

Population: 245

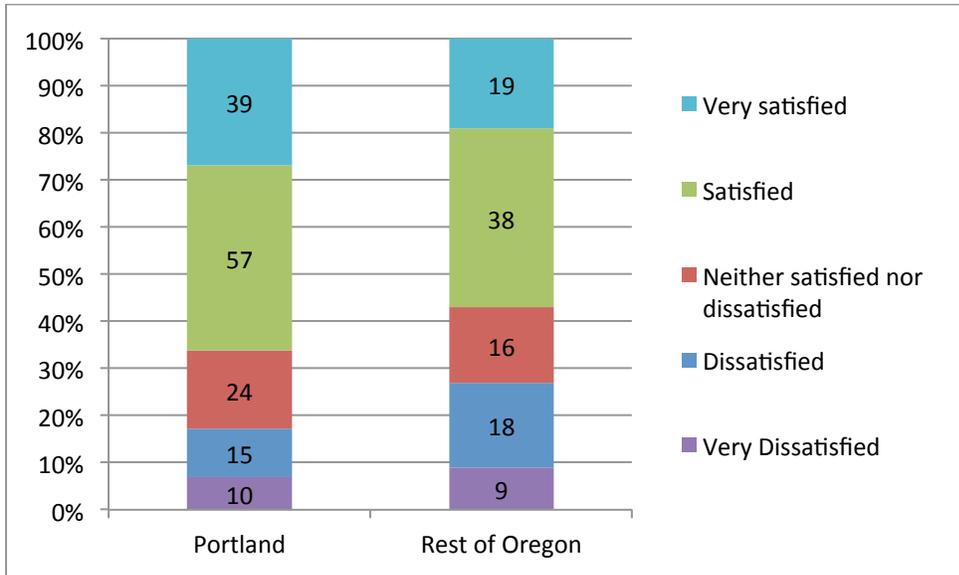
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has visited a doctor or health care provider in the last 18 months, excluding counseling or mental health services
5. VHA facility OR Received health care services through both VHA and non-VHA



7. (combined with 16) Overall, how satisfied have you been with the health care services and treatment you have received at VA health care facilities? (select one)

Population: 245

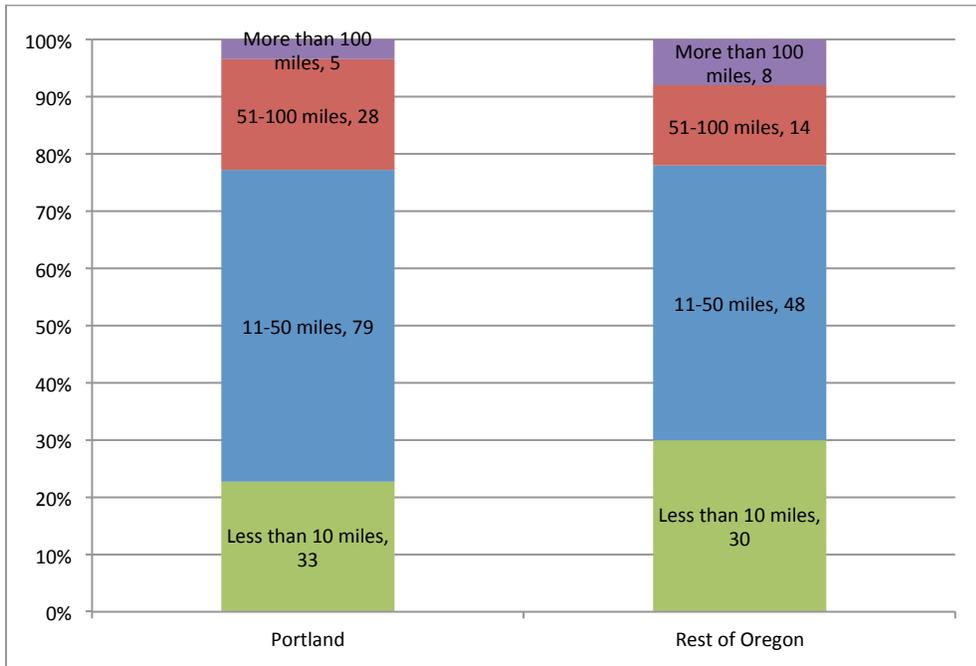
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has visited a doctor or health care provider in the last 18 months, excluding counseling or mental health services
5. VHA facility OR Received health care services through both VHA and non-VHA



9. (combined with 18) Typically, how far did you travel to VA health care facilities? (select one)

Population: 245

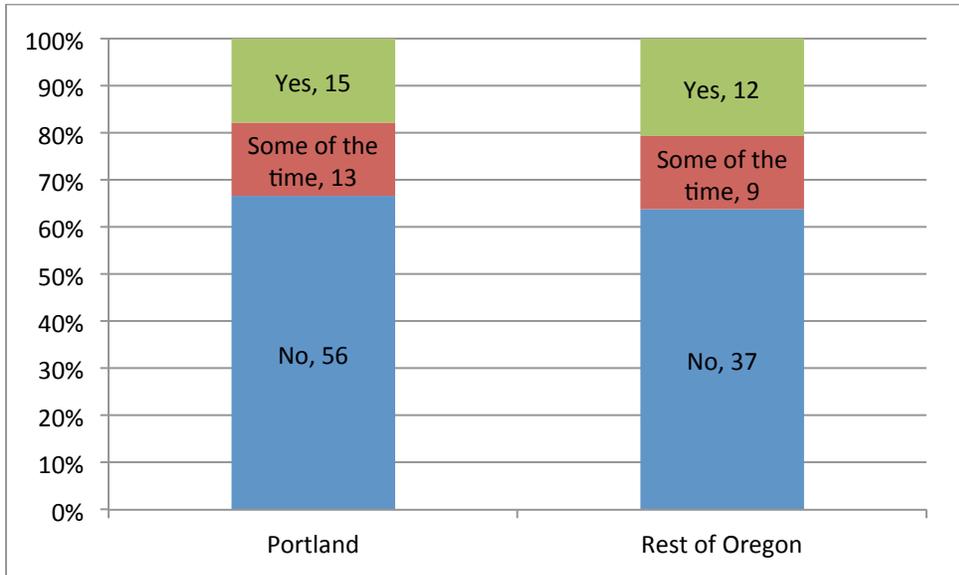
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has visited a doctor or health care provider in the last 18 months, excluding counseling or mental health services
5. VHA facility only



13. (combined with 22) Were you able to use VA benefits to help pay for the services/treatment? (select one)

Population: 142

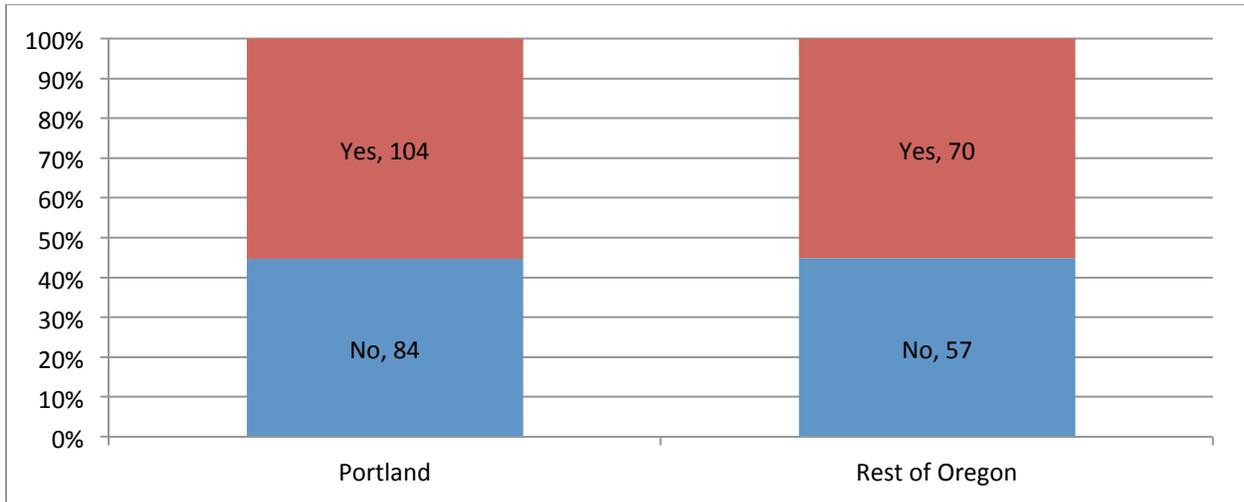
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has visited a doctor or health care provider in the last 18 months, excluding counseling or mental health services
5. Non-VHA facility only OR both VA and non-VA



24. In the last 18 months, have you visited a doctor or health care provider for counseling or mental health services?

Population: 315

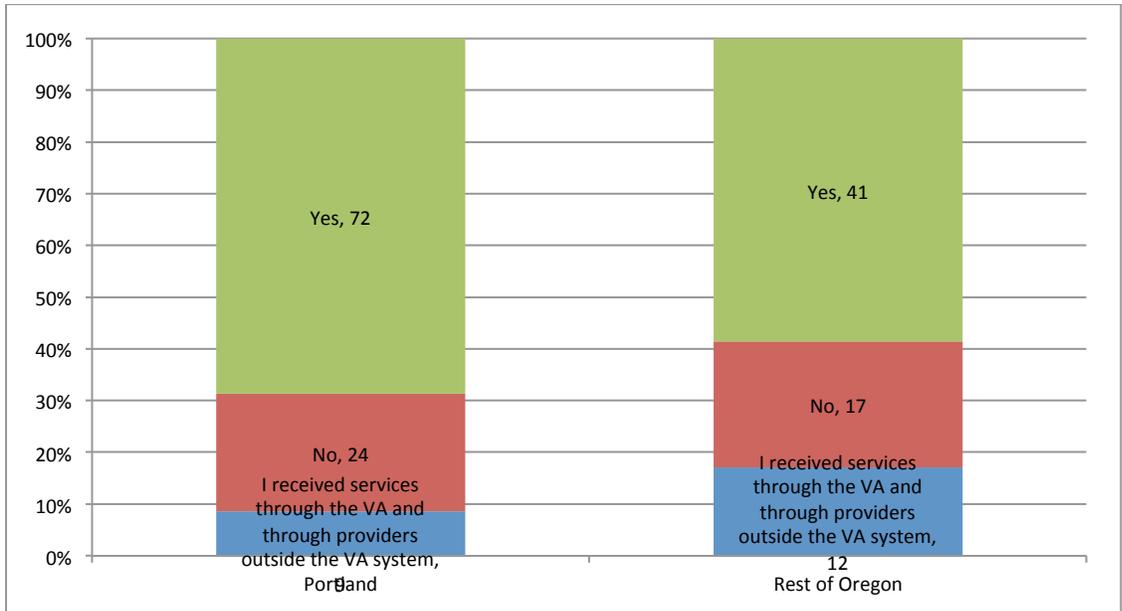
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability



25. Did you receive counseling or mental health services through a Veterans Health Administration (VA) facility, including a hospital or clinic? (If yes, please specify which one)

Population: 175

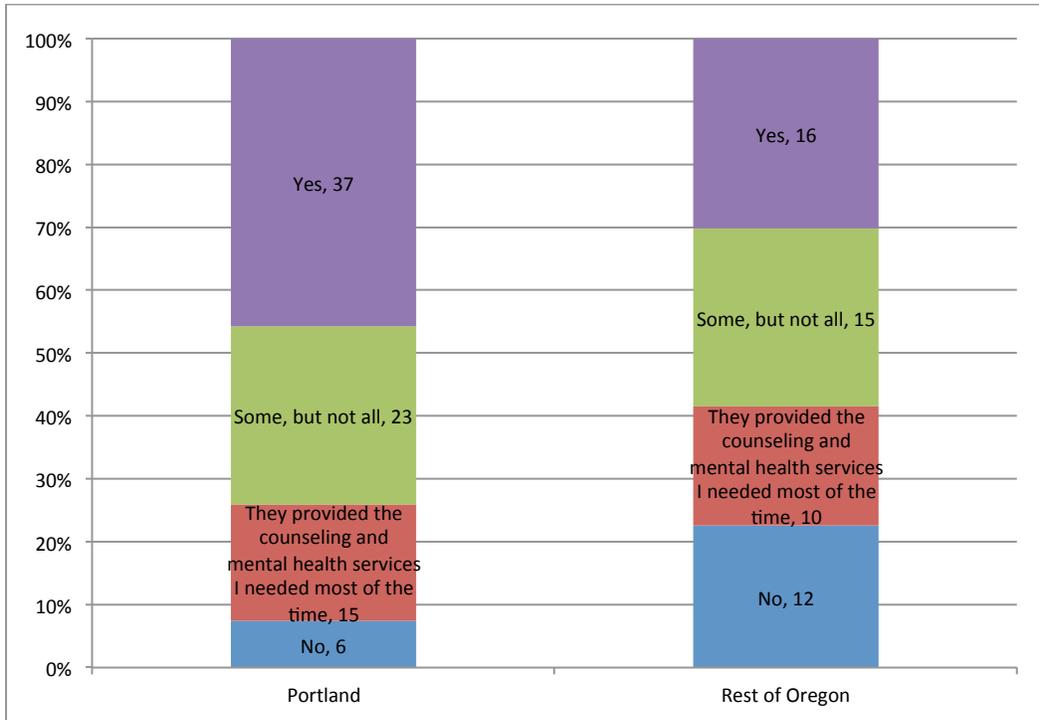
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has received counseling or mental health services, including treatment for substance abuse in the last 18 months



26. (combined with 35) Did the VA health care facilities offer the full range of counseling or mental health services you needed?

Population: 134

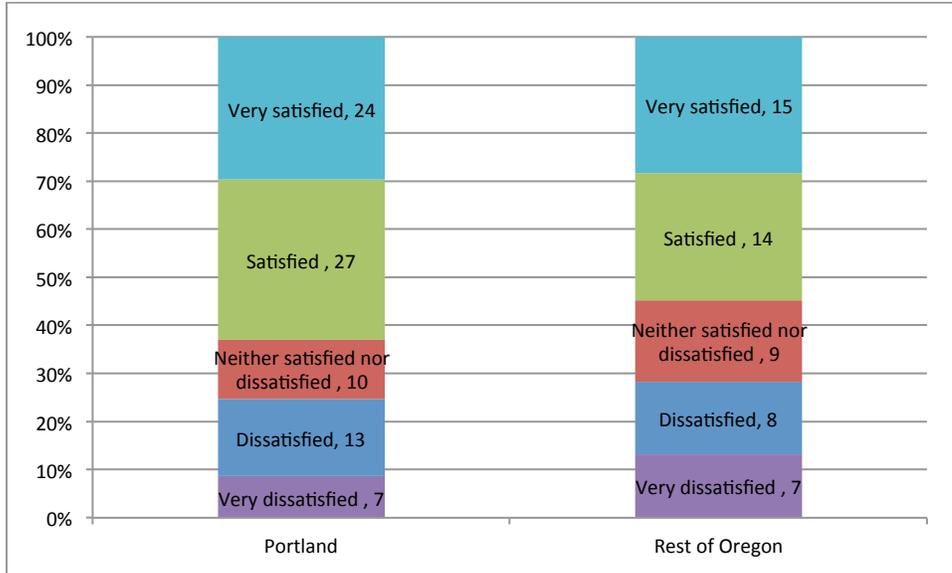
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has received counseling or mental health services, including treatment for substance abuse in the last 18 months
5. Received counseling or mental health services at VHA facility OR both VA and non-VA



27. (combined with 36) Overall, how satisfied were you with the counseling or mental health services and treatment

Population: 134

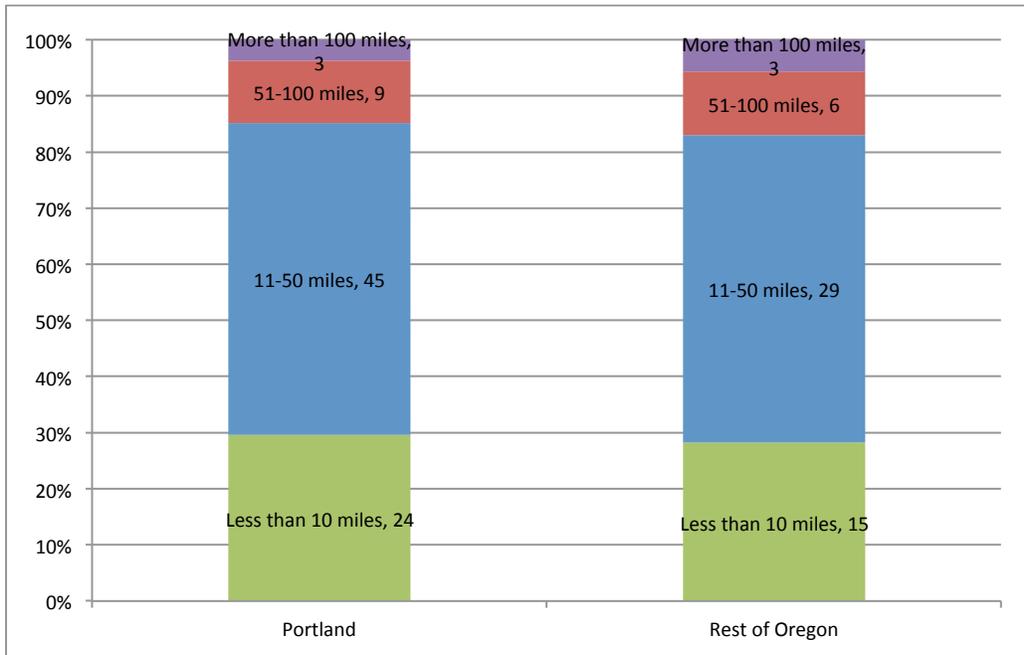
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has received counseling or mental health services, including treatment for substance abuse in the last 18 months
5. Received counseling or mental health services at VHA facility OR both VA and non-VA



29. (combined with 38) Typically, how far did you travel to VA health care facilities for counseling or mental health services? (select one)

Population: 134

1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability
4. Has received counseling or mental health services, including treatment for substance abuse in the last 18 months
5. Received counseling or mental health services at VHA facility OR both VA and non-VA

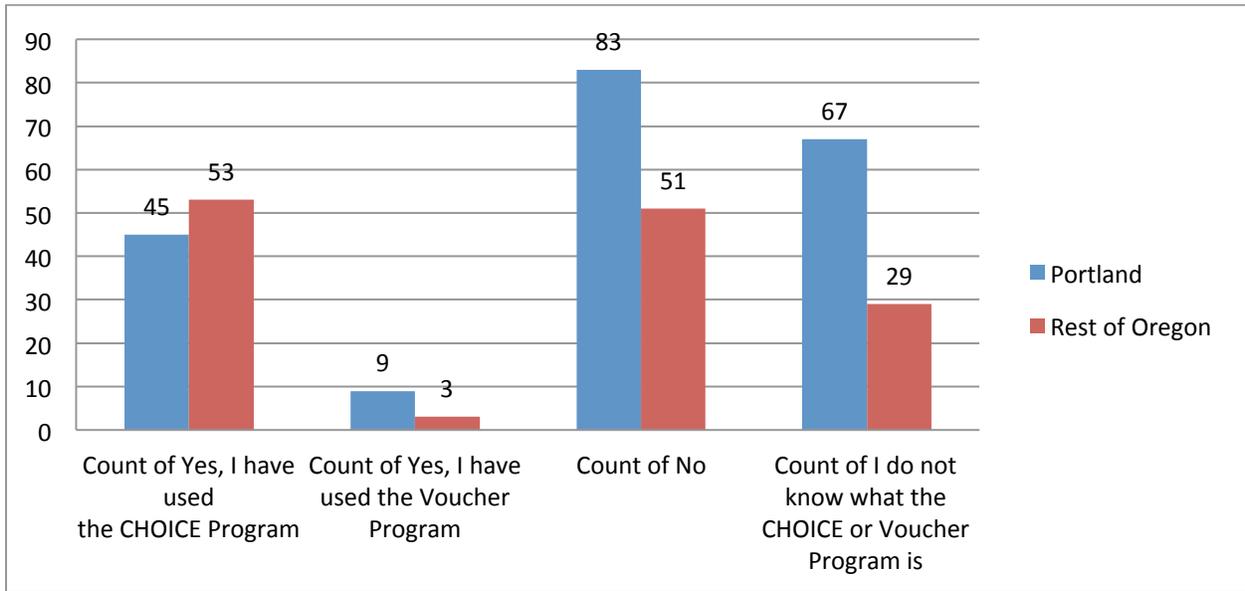


44. Have you used the CHOICE or Voucher Program? (select all that apply)

Population: 322

1. Woman or identify as a woman
2. Served in the U.S. Military
3. Has service-connected disability

*Could select more than one answer

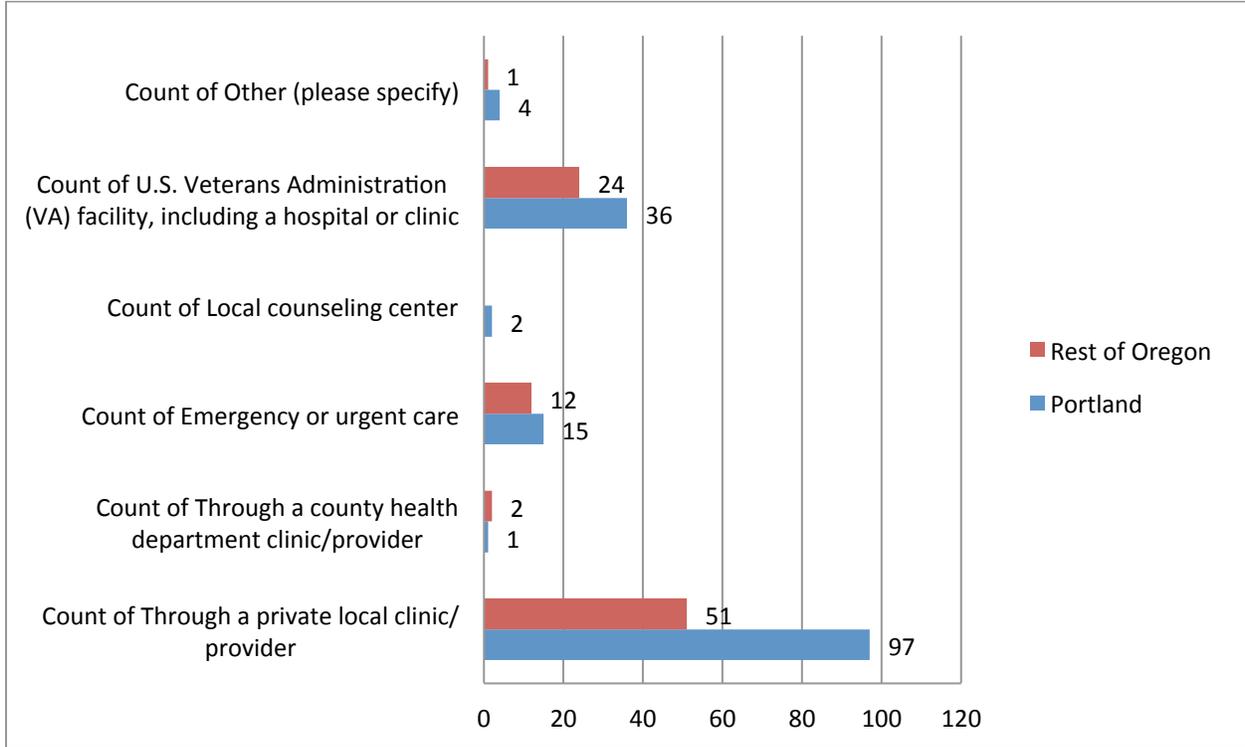


47. Where did you receive these services? (Select all that apply)

Population: 205

1. Woman or identify as a woman
2. Served in the U.S. Military
3. Does not have a service-connected disability
4. Has seen a health care provider in the past 18 months, excluding counseling or mental health services

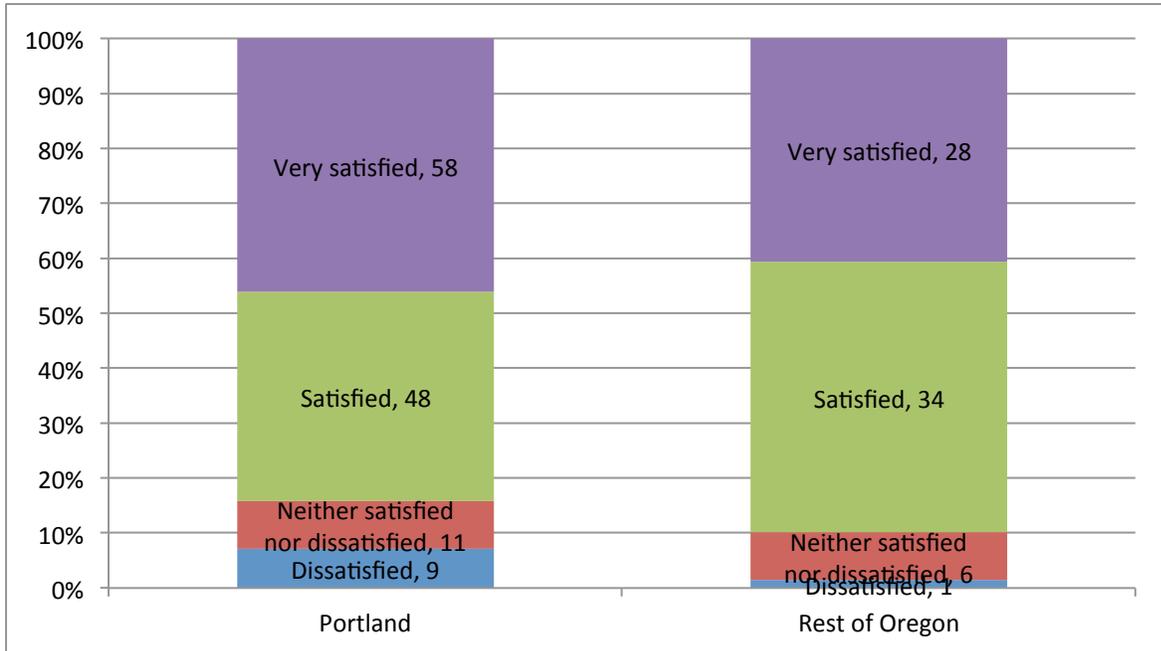
*Could select more than one answer



49. Overall, how satisfied were you with the health care services and treatment you received?

Population: 195

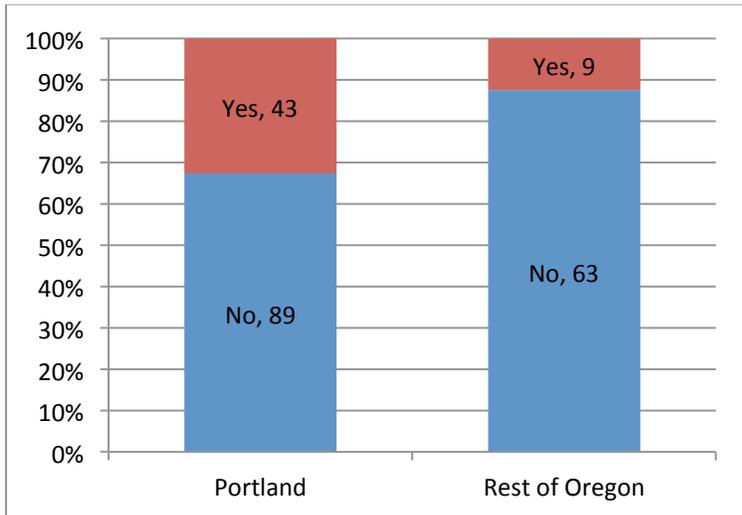
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Does not have a service-connected disability
4. Has seen a health care provider in the past 18 months, excluding counseling or mental health services



51. In the last 18 months, have you visited a doctor or health care provider for counseling or mental health services, including treatment for substance abuse?

Population: 204

1. Woman or identify as a woman
2. Served in the U.S. Military
3. Does not have a service-connected disability

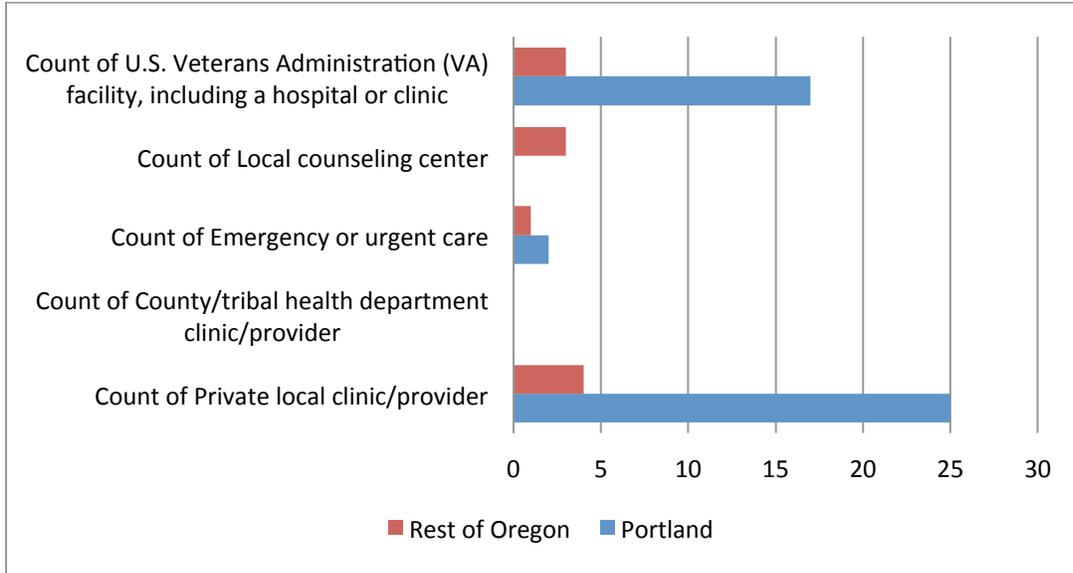


52. Where did you receive these services? (select all that apply)

Population: 52

1. Woman or identify as a woman
2. Served in the U.S. Military
3. Does not have a service-connected disability
4. Has visited a health care provider for counseling or mental health services, including substance abuse in the last 18 months

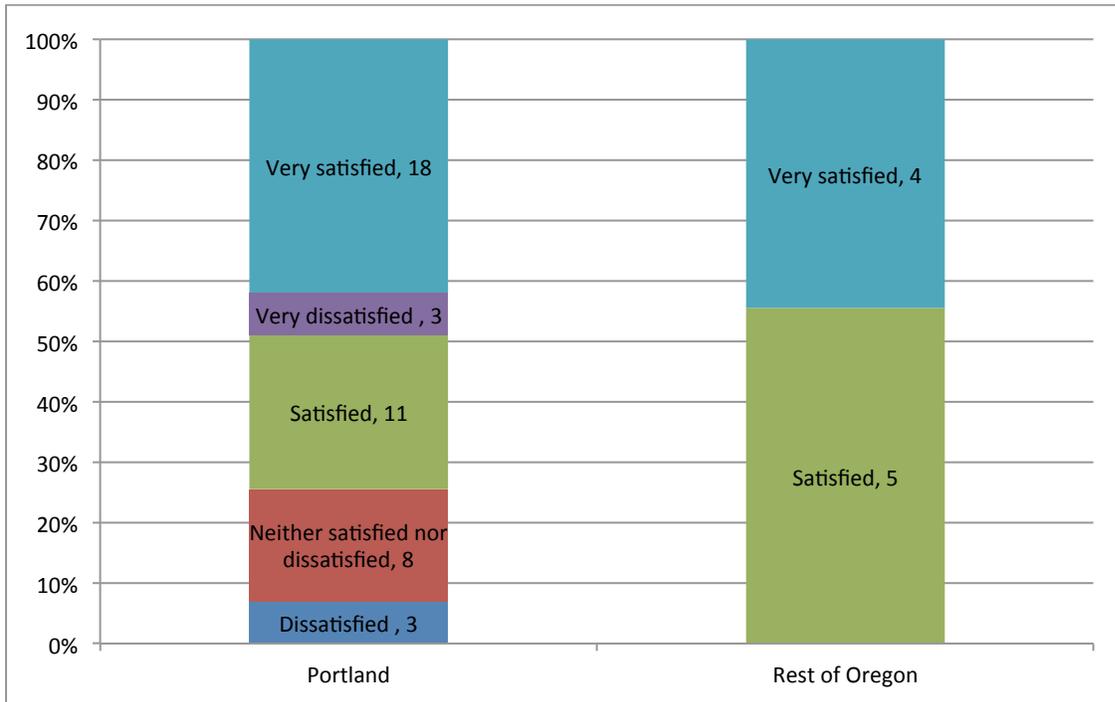
*Could select more than one answer



54. Overall, how satisfied were you with the counseling or mental health services and treatment you received?

Population: 52

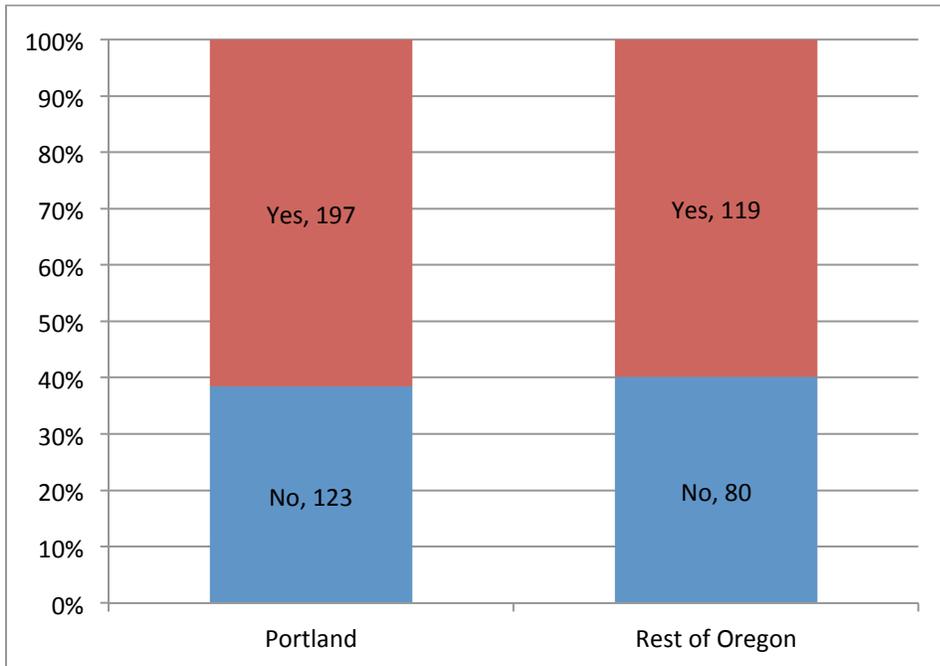
1. Woman or identify as a woman
2. Served in the U.S. Military
3. Does not have a service-connected disability
4. Has visited a health care provider for counseling or mental health services, including substance abuse in the last 18 months



56. Did you experience sexual assault, rape, or harassment while on active duty?

Population: 519

1. Woman or identify as a woman
2. Served in the U.S. Military



APPENDIX G
Behavioral Risk Factor Surveillance System Tables

Table 1. Oregon BRFSS (2014)
Military Service by Gender

Gender	Military Status	
	Yes	No
Male (N = 4,371)	31.7	68.3
Female (N = 6,012)	2.3	97.7

Note: Numbers in the table represent the percentage of respondents

Table 2. Oregon BRFSS (2014)
Military Service by Health Status (Females Only)

Military Status	Health Status				
	Excellent	Very Good	Good	Fair	Poor
Yes (N = 140)	22.0	34.8	26.3	7.5	9.4
No (N = 5,854)	19.5	35.5	28.5	11.9	4.5

Note: Numbers in the table represent the percentage of respondents

Note: p = 0.188

Table 3. Oregon BRFSS (2014)
Average Number of Days, of the Past 30 Days, That
Physical Health Was Not Good (Females Only)

Military Status	Days (Average)
Yes (N = 136)	5.9
No (N = 5,710)	4.7

Note: p = 0.236

Table 4. Oregon BRFSS (2014)
Health Care Coverage Status (Females Only)

Military Status	Health Care Coverage	
	Yes	No
Yes (N = 140)	92.1	7.9
No (N = 5,857)	90.2	9.8

Note: Numbers in the table represent the percentage of respondents

Note: p = 0.743

Table 5. Oregon BRFSS (2014)
Respondent Age (Females Only)

Military Status	Age (Average)
Yes (N = 136)	52.7
No (N = 5,784)	48.7

Note: p = 0.046

Table 6. Oregon BRFSS (2014)
Respondent Age (Males Only)

Military Status	Age (Average)
Yes (N = 1,378)	60.5
No (N = 2,949)	42.9

Note: $p < .001$

Table 7. Oregon BRFSS (2014)
Average Number of Days, of the Past 30 Days, That
Mental Health Was Not Good (Females Only)

Military Status	Days (Average)
Yes (N = 135)	5.2
No (N = 5,765)	4.7

Note: $p = 0.663$

Table 8. Oregon BRFSS (2014)
In the Past Year, Did Not See Doctor When Needed
Because of Cost (Females Only)

Military Status	Health Care Coverage	
	Yes	No
Yes (N = 140)	7.2	92.8
No (N = 5,856)	15.9	84.1

Note: Numbers in the table represent the percentage of respondents
Note: $p = 0.015$

Table 9. Oregon BRFSS (2014)
Most Important Reason, Other Than Cost, Delayed Getting Medical Care in
the Past 12 Months (Females Only)

Reason	Military Status	
	Yes (N = 73)	No (N = 2,787)
Couldn't get through on the telephone	0.1	0.1
Couldn't get an appointment soon enough	8.2	9.2
Once there, had to wait too long to see doctor	0.4	1.9
Office was not open when got there	0.0	0.1
Did not have transportation	4.7	4.8
Other	2.2	4.0
Did not delay/did not need medical care	83.7	77.5

Note: Numbers in the table represent the percentage of respondents
Note: $p = 0.827$