Women Veterans Issues  
A Historical Perspective

Women Veterans were the best-kept secret for many years. The 1980 Census was the first time that American women were asked if they had ever served in the Armed Forces, and an astonishing 1.2 million said “yes.” Because very few of these newly identified Veterans used VA services, Congress and VA began a concerted effort to recognize and inform them of their benefits and entitlements. Activities were initiated to increase public awareness about services for women in the military and women Veterans.

Soon after the 1980 census, Congress granted veteran status to women who had served in the Women’s Army Auxiliary Corps (WAAC) during World War II.

In 1982, at the request of Senator Daniel Inouye, the General Accounting Office (GAO), conducted a study and issued a report entitled: “Actions Needed to Insure that Female Veterans Have Equal Access to VA Benefits.” This study found that:

- Women did not have equal access to VA benefits.
- Women treated in VA facilities did not receive complete physical examinations.
- VA was not providing gynecological care.
- Women Veterans were not adequately informed of their benefits under the law.

At the same time, VA commissioned Louis Harris and Associates to conduct a “Survey of Female Veterans: A Study of the Needs, Attitudes and Experiences of Women Veterans,” published in August 1985, to determine the needs and experiences of this population. This survey found that 57 percent of the women did not know they were eligible for VA services, benefits, and programs. Another particularly troublesome finding was that women Veterans reported twice the rates of cancer as compared to the women in the general adult population, with gynecological cancers being the most common.

The results of the Census and the Harris survey raised many questions concerning women Veterans, but one conclusion was inescapable: the system was failing them. In April 1983, Harry Walters, Administrator of the Veterans Administration, began to remedy this situation by establishing a National Advisory Committee on Women Veterans.

In November 1983, following the first meeting of the VA Advisory Committee, Congress passed Public Law 98-160, “Veterans' Health Care Amendments of 1983,” mandating VA to establish an Advisory Committee on Women Veterans. The charge to the Committee was broad. Not only were they tasked with assessing the needs of women Veterans with respect to adequate access to VA programs and services, but they were also empowered to make recommendations for change.

Under the leadership of Dr. Susan H. Mather, Chief Officer, Public Health and Environmental Hazards, the Committee was entrusted with the responsibility to follow-up on these activities and to report their progress to Congress in a biennial report.
The following events are historical markers since the establishment of the Advisory Committee on Women Veterans.

1984 First report of the Advisory Committee identified the need for strong outreach, and the lack of adequate privacy and gender-specific treatment for women at VA facilities as the most pressing areas of concern.

Pamphlets, posters and publications about the service of women Veterans and their eligibility for VA services were developed.

President Reagan proclaimed the first “Women Veterans Recognition Week.” The states of New Jersey, California and Washington declared 1984 as “Women Veterans Year.”

1985 As a result of the Advisory Committee's recommendations, VA appointed the first Women Veterans Coordinators.

“The National Vietnam Veterans Readjustment Study,” commissioned by Congress, was the first national study on Veterans that included women.

1986 The Advisory Committee report focused on health care needs. Recommendations were made to expand VA health care to include osteoporosis, gynecological and hormonal care, research, mammography, Agent Orange exposure diseases and smoking cessation.

Women Veterans Coordinators were appointed in VA regional offices.

1987 Congress revisited the issue of women Veterans in an oversight hearing. Women Veterans testified to noted progress but expressed concern about the consistency of the quality of health care provided to women Veterans at VA facilities.

1988 A Veterans Health Administration office to address women’s health issues was first created, led by Dr. Susan H. Mather.

1989 The Advisory Committee on Women Veterans began site visits.

1991 GAO was tasked by Congress to do a follow-up study on VA health care for women. Their 1992 report was entitled, “VA Health Care for Women - Despite Progress, Improvement Needed.”

1992 The 1991 GAO report, along with Congressional hearings related to sexual harassment and assault, led to the enactment of Public Law 102-585, “Veterans Health Care Act of 1992.” It provided specific provisions for women’s health and broadened the context of Post-Traumatic Stress Disorder (PTSD) to include care for the aftermath of sexual trauma associated with military duty.

1993 Dedication of the Vietnam Women’s Memorial.

1994 Secretary Jesse Brown established the Women Veterans Program Office within the Office of the Assistant Secretary for Policy and Planning. Joan Furey was appointed Executive Director of the Women Veterans Program Office.

The Center for Women Veterans was created by Congress under Public Law 103-446, “Veterans’ Benefits Improvements Act of 1994.”
The National Center for Post-Traumatic Stress Disorder created a Women's Health Sciences Division at the Boston VA Medical Center.

Three research projects were proposed by VA as an alternative to a comprehensive epidemiologic study of the long-term health effects experienced by women who served in the Armed Forces in Vietnam, as mandated by Public Law 99-272, "Veterans' Health-Care Amendments of 1986." The original study was determined not scientifically feasible. The three research projects included:

- a study of post-service mortality (results were published in 1995);
- the re-analysis of psychological health outcome data collected for women in “The National Vietnam Veterans Readjustment Study” (completed in 1988); and,
- a study of reproductive outcomes among women Vietnam Veterans.

VA funds the first national study on the quality of life of women Veterans who use VA health care services.

1995 **Joan Furey** was appointed as the first Director of the Center for Women Veterans. Committee members increased communication with women Veterans, increased individual site visits to VA facilities, and provided briefings to Congressional members and staff.

1996 The first “National Summit on Women Veterans Issues” was held in Washington, DC, marking the first time women Veterans from across the Nation had the opportunity to come together with policy makers and VA officials.

1997 Kathy Zeiler was appointed as the first full-time Director for the Women Veterans Health Program.

The Women in Military Service for America Memorial was dedicated.

The First National Conference of VA Women Veterans Coordinators was held in San Antonio, Texas.

1998 VA completed the “Women Vietnam Veterans Reproductive Outcome Study,” and published its findings.

The 50th Anniversary of the Women's Armed Forces Integration Act.

1999 Carole Turner was appointed as the second Director for the Women Veterans Health Program.

Results of the 1998 VA study indicated that children of women who served in Vietnam had a higher rate of birth defects. This prompted a Congressional hearing.

For the first time, the Subcommittee on Minority Women Veterans was established within the Advisory Committee.

VA’s decision to provide prenatal and obstetrical care to eligible women Veterans signaled a new era in VA gender-specific services.
The Second National Conference of VA Women Veterans Coordinators was held in Chicago, Illinois.

2000 VA allocated funds for the first time ($3 million) to support programs specifically for women Veterans who are homeless. Three-year demonstration programs were designed at 11 locations across the country.

The Veterans Benefits and Health Care Improvement Act of 2000, PL 106-419, authorized special monthly compensation for women Veterans with a service-connected mastectomy. Additionally, it provided benefits for children with birth defects born to women Vietnam Veterans.

The Sunset Provision for sexual trauma counseling in VA was extended to December 31, 2004.

VA convened two task forces to study the necessity for inpatient psychiatric units for women in each VISN, and the need to extend sexual trauma counseling to Reservists and National Guard who have been victimized while on inactive duty training days.

The second “National Women Veterans - Summit 2000” was held in Washington, DC.

VHA Women Veterans Health Program was selected as the Bronze Winner of the 2000 Wyth-Ayerst HERA Award. Awards are presented to those demonstrating leadership in women and children’s health.

2001 Women’s Health National Strategic Work Group convened to develop progressive, state-of-the-art programs to provide high-quality comprehensive health care for FY 2002 through FY 2007. The Group commissioned Dr. Katherine M. Skinner to study the role of Women Veterans Coordinators.

September 11, 2001, changed the battlefield. Women in the Pentagon are now as vulnerable as those directly on the front lines. The likelihood of women casualties increases commensurately.

**Dr. Irene Trowell-Harris** was appointed as the second Director of the Center for Women Veterans.

The Charter for VA Advisory Committee on Women Veterans was renewed.

Appointments of the first minority women Veterans in leadership were made on the VA Advisory Committee on Women Veterans, in the positions of an African-American as Chair, and an American Indian as Vice-Chair.

2002 The Third National Conference of VA Women Veterans Coordinators was held in Las Vegas, Nevada.

The population of women Veterans as a percentage of all Veterans is expected to increase as the number of former military service women continues to grow.

Dr. Irene Trowell-Harris testified before then Subcommittee on Health, House Committee on Veterans’ Affairs on services in VA for women Veterans.

2003 According to VA’s Office of Policy, Planning & Preparedness VetPro program
(based on the 2000 Census) of the 25.6 million Veterans, 1.7 million are women Veterans. In 2002, the 1.7 million women Veterans constituted 6.5 percent of all Veterans living in the United States, Puerto Rico, and overseas.

VA has seen a significant increase in the number of women Veterans who receive benefits and health care services from the Department. The number of women Veterans enrolled in VA's health care system grew from approximately 226,000 in FY 2000 to nearly 305,000 in FY 2002, an increase of approximately 35 percent. Women Veterans enrolled in VA in Fiscal Year (FY) 2003 were 331,000 (up 8.6 percent from FY 2002) and of those enrolled in FY 2003, 195,516 (up 7.2 percent from FY 2002) actually used the system.

VA celebrated the 20th Anniversary of the Advisory Committee on Women Veterans on September 15, 2003, at the Women in Military Service for America Memorial (WIMSA) with Senator Daniel K. Inouye presenting the keynote address. Committee past and present chairs, co-chairs and members were honored at the ceremony.

The Charter for VA Advisory Committee on Women Veterans was renewed.

2004 The Fourth National Conference of VA Women Veterans Coordinators was held in Las Vegas, Nevada.

The third “National Summit on Women Veterans Issues - Summit 2004” was held in Washington, DC.

The Sunset Provision for sexual trauma counseling in VA was extended permanently.

2005 The Charter for VA Advisory Committee on Women Veterans was renewed.

2006 Dr. Susan Mather retired from the Department of Veterans Affairs on January 3. Dr. Mather served as the Designated Federal Official (DFO) for the Advisory Committee on Women Veterans from 1983 until 1995. She continued to serve as an ex officio member on the Committee from 1995 until her retirement in 2006.

The Fifth National Conference of VA Women Veterans Program Managers was held in Orlando, Florida.

The entire Journal of General Internal Medicine for March 2006 was dedicated to research on women Veterans. There were 16 articles, covering various issues, to include VA health care utilization, health and mental health issues among women Veterans.

2007 The Charter for VA Advisory Committee on Women Veterans was renewed. Carole Turner, the second Director for the Women Veterans Health Program, retired from VA January 2007.

Dr. Betty Moseley Brown testified before the House Veterans' Affairs Committee Subcommittee on Health to highlight VA services available for women Veterans.

2008 Women's Veterans Health Program Office was elevated to the Women Veterans Health Strategic Health Care Group, effective March 2008. Dr. Patricia M. Hayes
was appointed Chief Consultant April 13, 2008. The Advisory Committee recommended the realignment of the Women Veterans Health Program Office to the status of a Strategic Healthcare Group and the Program Director position be designated as a Chief Consultant in the 2006 report.

The fourth “National Summit on Women Veterans’ Issues - Summit 2008” was held in Washington, DC. Members of the Advisory Committee on Women Veterans served as facilitators for the various workshop sessions and the town hall meeting.

Dr. Paula Schnurr, Deputy Executive Director for VA's National Center for Post Traumatic Stress Disorder (PTSD), received the 3rd annual Ladies Home Journal "Health Breakthrough Award" for her work with PTSD and women Veterans.

Memo signed July 8, 2008 regarding the hiring of a full-time Women Veterans Program Manager at each medical center. The establishment of a full-time Women Veterans Program Manager position at VA medical centers had been recommended by the Advisory Committee in the 2006 report.

There are 1.7 million women Veterans comprising 7 percent of the total veteran population. As the number of women in the military increases, it is estimated that 10 percent of all Veterans will be women by the year 2020.

As of July 2008, there are currently over 27 research projects funded by VA’s Health Services Research & Development Service addressing women Veterans’ issues.

Versions of the “Women Veterans Health Care Improvement Act of 2008” introduced in both the House (H.R. 4107) and the Senate (S. 2799); some aspects related to improving health care services for women Veterans have passed.

Public Law 110-387 “Women Veterans Health Care Improvement Act of 2008” establishes a permanent requirement for the Advisory Committee on Women Veterans' biennial report.

In November 2008, the Director of the Center for women Veterans, representing the Secretary of Veterans Affairs, briefed the Fédération Mondiale des Anciens Combattants, World Veterans Federation, Standing Committee on Women on VA’s initiatives, benefits and services for women Veterans in Paris, France.

2009 Charter for the Advisory Committee on Women Veterans approved by Secretary, Veterans Affairs.

Director of the Center for Women Veterans is designated to represent the Department on the White House Interagency Council on Women and Girls, which was created to ensure that American women and girls are treated fairly in all matters of public policy.

The Government Accountability Office (GAO) released its report, “VA Health Care: VA Has Taken Steps to Make Services Available to Women Veterans, but Needs to Revise Key Policies and Improve Oversight Processes," detailing its findings on VA’s health services for women Veterans gathered from several visits
to VA medical centers.

On May 20, the Center Director, Advisory Committee chair, and others women Veterans' advocates participated in a roundtable discussion with the House Committee on Veterans' Affairs regarding the Department’s current services for women Veterans, as well as developing an implementation plan to enhance services for women Veterans.

On July 1, President Barack Obama signed S.614, a bill awarding the Congressional Gold Medal to women who served in the Women Airforce Service Pilots (WASP) program, which was established during World War II; 1,102 women volunteered and 38 women pilots died during service to their country.

On Nov. 19, Secretary of Veterans Affairs Eric K. Shinseki announced that the Department would launch a comprehensive study of women Veterans who served in the military during the Vietnam War, to explore the effects of their military service upon their mental and physical health.

2010 The Center for Women Veterans initiates the “Her Story” campaign during Women’s History Month, highlighting the many accomplishments of women who are serving and women Veterans.

The Department of Veterans Affairs launched in March 2010 a yearlong campaign, “Her Story,” in an effort to nationally recognize the contributions of women Veterans employees at each VA facility, highlighting their military service and their continued commitment to the service of our great nation.

PL 111-163, the “Caregivers and Veterans Omnibus Health Services Act of 2010,” authorizes VA to carry out a 2-year pilot program to assess the feasibility and advisability of childcare for “qualified Veterans who are the primary caretaker of a child.” It also authorizes VA to provide health care to newborn children of qualifying women Veterans for up to seven days, and increases focus on research for women Veterans.

July 14 -16, 2010, VA hosted a Women’s Health Services Research Conference. The Theme was, “Using Research to Build the Evidence Base for Improving the Quality of Care for Women Veterans.” This important VA research conference brought together investigators interested in pursuing research on women Veterans and women in the military with leaders in women’s health care delivery and policy, within and outside the VA, to significantly advance the state and potential impact of VA women’s health research.

On July 28, 2010, at the Women’s Memorial, VA sponsored a daylong forum for women Veterans' advocates and Veterans service organizations (VSO). The purpose of the Forum was to highlight enhancements in VA services and benefits for women Veterans. Members of the Advisory Committee on Women Veterans attended as part of their site visit to Washington, DC.

There are 1.8 million women Veterans comprising 7.7 percent of the total Veterans population. As the number of women in the military increases, it is estimated that 10 percent of all Veterans will be women by the year 2020.
There are currently over 35 research projects funded by VA’s Health Services Research & Development Service addressing women Veterans’ issues.

2011

In March, the Veterans Benefits Administration (VBA) instituted staff training for staff processing claims on personal assault related PTSD claims, and initiated the development of an electronic tracking and reporting system to identify and track claims involving personal assault trauma.

VHA’s women Veterans call center launched in June 2011, to solicit input on ways to enhance the health care services VA provides to women Veterans, determine why they are not using VA and whether they are aware of the gender-specific services we offer, and inquire about additional services women Veterans would like to see VA offer.

During the fifth National Training Summit on Women Veterans, held in Washington, DC on July 15-17, members of the Advisory Committee on Women Veterans (ACWV) served as facilitators for the various workshop sessions. Secretary Shinseki announced to Summit participants that VA would establish a Women Veterans Task Force (WVTF), with the charge of developing a comprehensive VA action plan for resolving unmet gaps in service and how VA serves women Veterans.

In July, VA announced its child care pilot initiatives for Veterans—a continuing effort to improve access to health care for eligible Veterans, particularly the growing number of women Veterans. The three sites selected are in Northport, NY; Tacoma, WA; and Buffalo, NY.

A special supplement of the journal Women’s Health Issues, published July 13, highlighted VA’s tremendous growth and diversity in VA women’s health research.

Charter for the Advisory Committee on Women Veterans was renewed.

VA begins to implement components of the Caregivers and Veterans Omnibus Health Services Act of 2010, Section 205 (Public Law 111-163):

- In October, the 2-year child care pilot program began in Buffalo, NY (VISN 2).
- Newborn care provided for 7 days for women Veterans receiving VA maternity care.

Rural mobile health clinic pilot hires staff to ensure that women Veterans can receive comprehensive primary care according to VHA standardized protocols for women Veterans.
By November, nearly 1.9 million, or 8 percent of the 22.2 million total Veterans population, are women.

In response to recommendation # 6 of the 2010 ACWV report, which recommended that VA provides full-time women Veterans coordinators in regional offices serving a catchment area of at least 14,000 women Veterans, VBA identified 14 regional offices that will begin to offer a full-time women Veterans coordinator.

**2012** On May 14, The Women Veterans Task Force draft report was published in the Federal Register and announced by VA news release for Veterans, stakeholders and the public to review and comment.

VA Learning University (VALU), in partnership with Booz Allen Hamilton, is developing a training module, “Serving Women Veterans e-Learning Course” for VA employee new hires and current VA employees, to raise awareness of their responsibility to treat women Veterans with dignity and respect.

Newly created child care pilot program offered in Dayton, Ohio (VISN 2). VA’s Women Veterans Program was established and officially transferred to the Center for Women Veterans in September 2012.

**2013** Women Veteran VA health care users doubled, from 159,000 in 2000 to 390,000 in 2013.

VA’s grant rates on disability claims for PTSD based on MST achieved parity with grant rates for all other PTSD claims, through an extensive claims staff training program, updated policies, and the efforts of specially-trained coordinators deployed throughout the country.

The quality of care provided to women Veterans through VA was significantly higher than in the private sector, based on both gender-specific measures (e.g., screening for cervical and breast cancer) and for gender-neutral measures (e.g., management of hypertension and diabetes, treatment of elevated cholesterol, and screening for colorectal cancer).

VA expanded its outreach to women Veterans through a new hotline (1-855-VA-WOMEN) to respond to questions from Veterans, their families, and caregivers about the many VA services and resources available to women Veterans.

VA Research invested more than $16.5 million in 86 studies on women Veterans’ health. This research investment greatly expands VA’s network of sites conducting women Veterans’ health research from 4 in 2010 to 37 in 2013.
VA also funded Women’s Health Collaborative Research to Enhance and Advance Transformation and Excellence (CREATE), a research initiative aimed at better meeting the needs of women Veterans.

**Elisa Basnight, Esq.**, was appointed Director of the Department of Veterans Affairs (VA) Center for Women Veterans, in October 2013, where assumed the roles of primary advisor to the Secretary of Veterans Affairs on programs and issues related to women Veterans, the designated federal official for VA’s Advisory Committee on Women Veterans, ex-officio member on the Defense Advisory Committee on Women in the Services (DACOWITS), and VA’s representative on the White House Council on Women and Girls.

The Public Service and Community Engagement link was activated on the Center for Women Veterans’ Web site in December 2013, to provide information and resources for women Veterans and their advocates that will facilitate greater awareness around opportunities for them to lead and engage within their communities.

VA created dedicated claims processing teams within each VA regional office for exclusive handling of MST-related PTSD claims.

Charter for the Advisory Committee on Women Veterans was renewed.

**2014**

VA designed mini-residency training programs to train primary care providers and nurses as well as emergency care clinicians to meet the needs of increasing numbers of women Veterans and trained over 2000 primary care providers and 350 primary care nurses to date.

VA developing Information Technology solutions (the Breast Care Registry and the System for Mammography results tracking) to improve coordination of breast care services for Women Veterans.

VA partnered with the American Heart Association to raise awareness of heart disease in women Veterans.

VA pilots mobile applications for women’s health providers, Caring4 Women Veterans and Preconception Care.

VA Women’s Health Services has expanded Telehealth services for women Veterans by supporting over 26 Women’s Health Telehealth programs nationally.

In February, the Center for Women Veterans facilitated the creation of a VA-led interagency Women Veterans Working Group, which includes members from various Federal agencies/members of the White House Council on Women and Girls.
In March, the Center for Women Veterans, VBA, and VHA conduct a Twitter town hall to address women Veterans benefits and health care.

Director of Center for Women Veterans moderated a panel for the White House’s Champions of Change event for women Veteran industry leaders. The Advisory Committee on Women Veterans participated, as part of their March 2014 meeting. The purpose of the event was to highlight women Veterans’ incredible contributions to our nation’s business, public and community service sectors.

In June, Director of the Center for Women Veterans and the Chief Consultant of Women’s Health Services participated in a roundtable discussion sponsored by the Senate Veterans’ Affairs Committee. The roundtable focused on the needs of women Veterans.

In July, the Center for Women Veterans launched an interactive online women Veterans cyber community to pilot innovative ways to conduct outreach activities to impact a women Veteran at different phases in the lifecycle of homelessness and to provide access to Federal, State and local programs and services to which she may be entitled.

In August, VA hosted a Women’s Health Research Conference, which brought together investigators interested in pursuing research on women Veterans and women in the military, to significantly advance the state and potential impact of VA women’s health research.

In October, the Center for Women Veterans entered into a memorandum of agreement (MoA) with the Center for American Women and Politics (CAWP), a unit of the Eagleton Institute of Politics at Rutgers, the State University of New Jersey, to increase women Veterans’ leadership and careers opportunities, to leverage existing resources, and to increase coordination of activities in an effort to help women Veterans develop public service and community engagement skill sets and prepare for public and community service opportunities.

In November, the Center for Women Veterans celebrated the 20th anniversary of its establishment.