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Briefly Stated



California's Women Veterans: Responses to the 2011 Survey

CRB Report 12-004 is available at:
<http://www.library.ca.gov/crb/12/12-004.pdf>

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Women veterans' needs have been subsumed under the needs of veterans in general for many years. Because women veterans make up less than ten percent of the total current veteran population, their unique needs have been obscured by this. This is beginning to change. The federal Department of Veterans Affairs (VA), the California Department of Veterans Affairs (CalVet) and the California Commission on the Status of Women (the Commission) have highlighted the unique needs of women veterans in the past five years.

CalVet and the Commission asked the CRB to conduct a second iteration of the Women Veterans Survey, originally completed in 2009. This iteration of the survey was used to measure the current needs of women veterans and establish a baseline for service utilization.

This Briefly Stated describes the 2011 Survey, its key findings and conclusions.

THE STUDY

Several national surveys report women veterans' needs. These surveys rely on demographic statistics and current service utilization patterns to determine what women need. This approach assumes that women are currently getting what they need.

The 2011 Survey is unique in its approach to assessing the needs of women veterans. In the 2011 Survey, we asked three open-ended questions about what women veterans need and what they want in terms of benefits and services. We then examined service utilization and demographic trends in relation to what women told us they wanted and needed. What we found

KEY FINDINGS

- Many women veterans are unaware of state and federal services and benefits.
- Women veterans need help finding employment when they separate from the service.
- Women veterans want services geared toward their unique needs, including women-specific healthcare and help with military sexual trauma (MST).

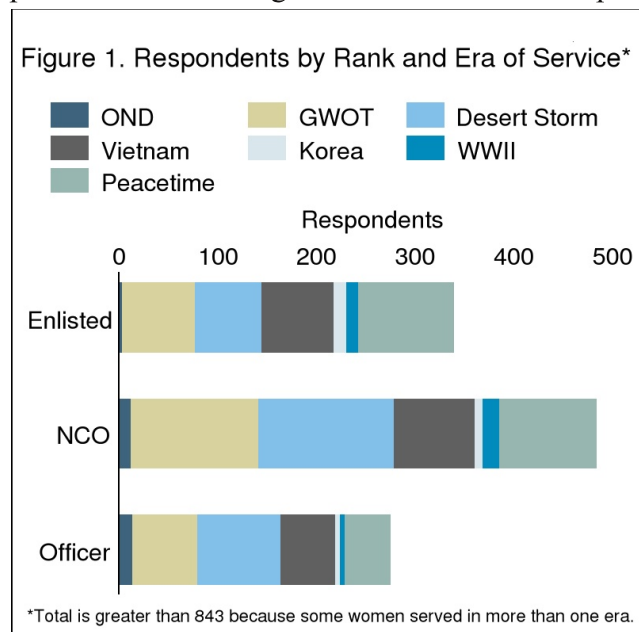
is that women are not utilizing all the benefits available to them because many women veterans do not know services are available. Additionally, women veterans want services that are not currently available to them.

Nearly 900 women veterans responded to the CRB survey. The survey was both hosted on-line by SurveyMonkey.com and distributed as a paper copy.

PARTICIPANTS

In general, our participants were representative of women veterans in the nation. The participants represented all age cohorts, ranging from 18 to over 70 years old; half of the participants were aged 40 to 60 years old. Women veterans represented all branches of service with over a third of the sample serving in the Army and about a quarter serving in the Navy. Twenty percent served in the Air Force, ten percent in the Marines and seven percent in either the National or Coast Guards. This is similar to national statistics.

Women veterans in the 2011 Survey served in all eras from World War II forward as shown in Figure 1. Most participants served in either Desert Storm or during the Global War on Terror (GWOT). About a third served during peacetime and 25 percent served during the Vietnam era. Participants



represented all ranks. At the time of separation, 19 percent of women were officers, 42 percent were non-commissioned officers (NCOs) and 39 percent were lower enlisted.

We compared our sample with statistics from the VA and found that women in our sample were mostly representative of women veterans as a whole. However, women in the 2011 Survey were slightly more educated than the national average.

NEEDS

We asked women veterans about their needs at the time they transitioned from the service and their current needs. We also asked women veterans what services or benefits they would like to have had at the time of transition.

Needs at the Time of Separation

At the time of separation from the service, women veterans want more information about their benefits. Fifty-one percent of all comments about what women needed at the time they transitioned included statements about benefit information and assistance. This need is consistent for women across all eras of service and across all ranks.

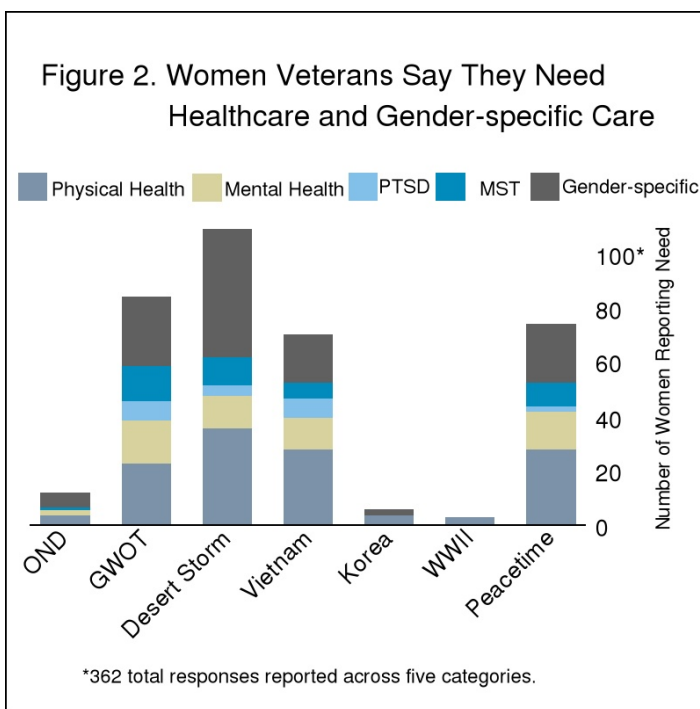
Transitioning to civilian life and help with family life and family services were key non-healthcare needs at time of transition for all women veterans in all eras of service. Younger women and women exiting the service in more recent years also requested help finding appropriate employment.

CURRENT NEEDS

Eighty percent of participants reported having at least one current need. Forty-two percent of responses included mentions of physical or mental healthcare needs. This includes 59 participants who state they currently need help with post traumatic stress disorder (PTSD) or MST. See Figure 2.

Women veterans not only want healthcare, they

want the care available to be tailored to gender-specific needs (16 percent). Gender-specific services include issues such as the availability of gynecological services, MST counseling, women doctors and properly-sized joint replacements.



Women veterans need help with employment. Forty-six percent of participants were unemployed. Women veterans separating during Operation New Dawn (OND), the Global War on Terror (GWOT) or Desert Storm were more likely to be unemployed than women separating during other eras. Women veterans who separated from the service at an enlisted rank were unemployed more often than women who separated as officers. Women veterans also need help with housing. Thirty-three women in our sample were currently homeless. Thirty percent of our sample had some difficulty with housing and 14 percent had been homeless at some time in their life.

Women veterans in their 40s were the most likely age group to be homeless. Divorced women were more likely to be homeless than their married or single counterparts. Women separating whose most recent tour was during peacetime were also more

likely to be homeless than peers separating in other eras.

SERVICE KNOWLEDGE AND USE

Women veterans use services and benefits when they know about and need them. We asked women about which services they were familiar and which services they had used. In general, women veterans were more familiar with federal benefits and services than state services.

About half of all women veterans were familiar with each of the different federal services about which we asked. More than half of all respondents had accessed federal educational (52.1 percent) or medical and dental (51.6 percent) benefits. About half had used the disability pension or compensation benefit. Women veterans were also more likely to use federal benefits and services than State benefits and services.

Among state benefits, claims representatives and unemployment insurance/employment assistance benefits were both accessed by 20 percent of respondents. While these were the most accessed benefits, nearly half of all respondents reported not knowing about either benefit.

The best-known benefits at the State level are CalVet's home loan program and CalVet's veterans homes. Nearly two-thirds of the sample reported knowing about these benefits, although, only 11 percent of respondents had used either.

CONCLUSIONS

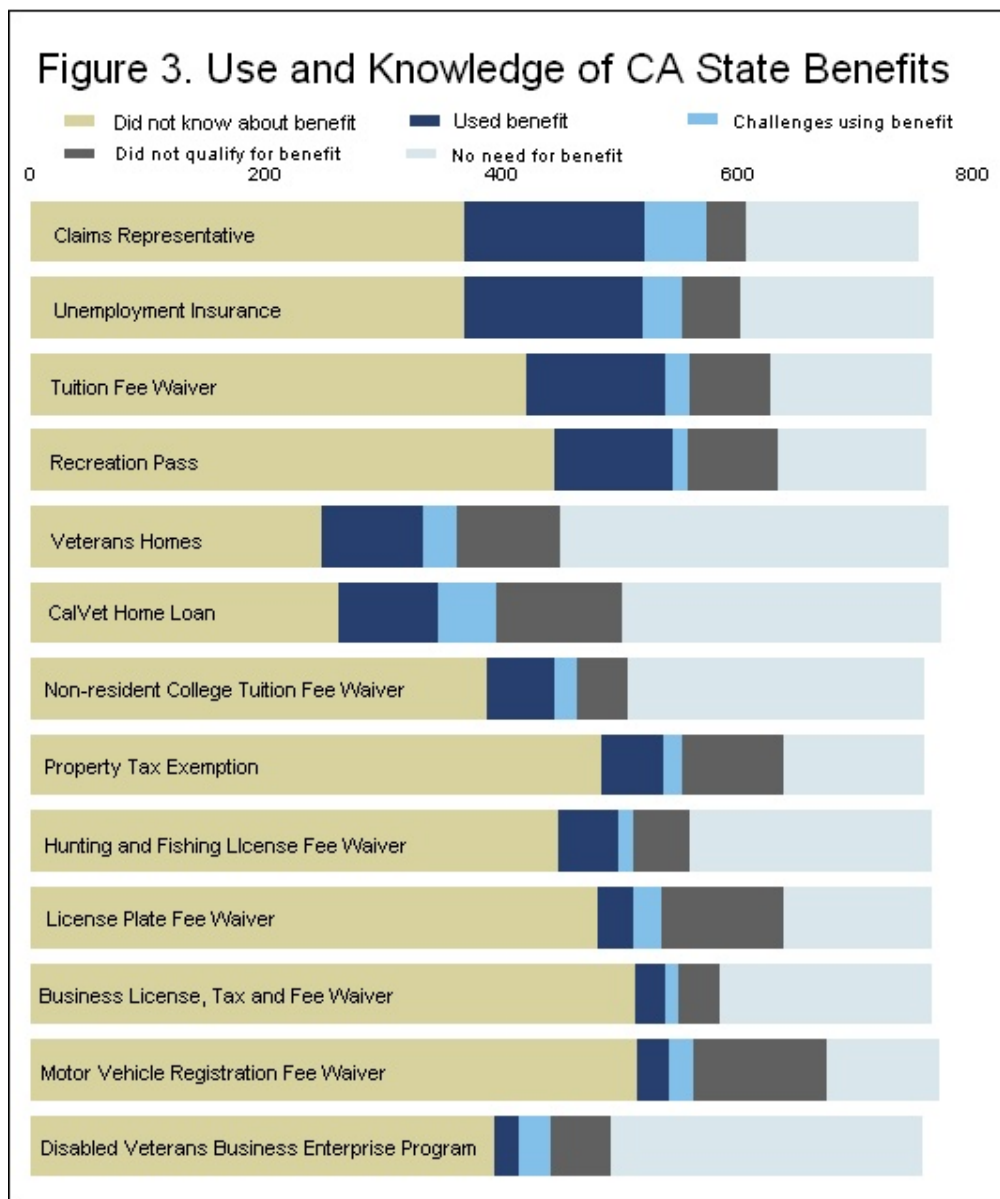
Women veterans who know about benefits will access them to fulfill their needs. Many women veterans, however, lack basic knowledge about what services and benefits are available to them.

Refining and expanding current outreach programs for women veterans may improve the knowledge

of services and benefits. Concurrent with outreach and education needs to be preparation for increased service use. In many cases, more than half of all women veterans are unaware of a specific service or benefit. If such women access services at the same rate as women who are informed about them do, demand for certain benefits and services could more than double.

Women veterans want both a place to voice their concerns and to help other women veterans. This survey is one method of providing voice to women veterans. This survey's unique approach to determining the needs of women veterans provides insights and understanding that is lacking in California and on the national stage. It may also be used to measure how successful CalVet and the VA are at meeting those needs.

Institutionalizing its use every two- or three- years could provide an on-going source of information for policy-makers, service providers and the public.



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