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AIR's Human and Social Development Program

## Homelessness and Trauma in the Lives of Women Veterans

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This fact sheet is intended to raise awareness of the prevalence and impact of trauma in the lives of women Veterans, particularly those experiencing homelessness. Included is a discussion of trauma-informed care, an organizational response to meeting the unique needs of this population.

#### HOMELESSNESS AMONG WOMEN VETERANS

Women Veterans are two to four times more likely to be homeless than non-Veteran women.<sup>1,2</sup>

- According to the Department of Veteran Affairs (VA), the number of homeless women Veterans doubled from 1,380 in 2006 to 3,328 in 2010; however, these numbers only include women Veterans who receive VA health care, which is approximately 57.4% of women Veterans of Operation Enduring Freedom, Operation Iragi Freedom, and Operation New Dawn (OEF/OIF/OND).3,4
- Almost two-thirds of homeless women Veterans are between the ages of 40 and 59 years old.5
- Over one-third of homeless women Veterans have disabilities.<sup>6</sup>
- 23% of homeless women Veterans have children under the age of 18.<sup>7,8</sup>

# GREATER RISK OF HOMELESSNESS

Women Veterans are 2-4 times more likely to be homeless than non-Veteran women



Source: Foster & Vince, 2009; Gamache, Rosenheck & Tessler, 2003

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### INTERSECTION BETWEEN HOMELESSNESS AND TRAUMA

Exposure to trauma is a significant risk factor for homelessness.<sup>9-12</sup> Women Veterans experience trauma at higher rates than the general population.<sup>13</sup>

- More than 50% of women Veterans experience some type of interpersonal violence before joining the military.<sup>14</sup>
- 27-49% of women Veterans have experienced childhood sexual abuse. 15
- 35% of women Veterans have experienced childhood physical abuse. 16
- As adults, 24-49% of women Veterans have experienced sexual assault.<sup>17</sup>
- 46-51% of women Veterans have experienced physical assault.<sup>18</sup>
- 39% of women Veterans report that they have experienced intimate partner violence.

## Exposure to trauma while serving in the military is prevalent.

Military Sexual Trauma (MST) is the term used by the Department of Veterans Affairs to refer to experiences of sexual assault or repeated, threatening acts of sexual harassment.

Of women Veterans accessing VA services:

- Approximately 1 in 4 women Veterans screen positive for MST.<sup>20</sup>
- Prevalence of sexual assault in the military among women Veterans ranges from 20-48%.<sup>21</sup>
- 80% of women Veterans have reported being sexually harassed.<sup>22</sup>
- 20% of women Veterans who served in OEF/OIF have been identified as having experienced MST.<sup>23</sup>

In addition to MST, 41% of women Veterans have been exposed to combat-related stress.<sup>24</sup>

## Women Veterans experiencing homelessness report even higher rates of trauma.

- 52% report pre-military adversity (including child abuse and intimate partner violence).<sup>25</sup>
- 79% describe some experience of being traumatized, victimized by a colleague or superior, or otherwise rejected and stigmatized during active duty.<sup>26</sup>
- 53% have experienced Military Sexual Trauma.<sup>27</sup>



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#### **IMPACT OF TRAUMA ON WOMEN VETERANS**

Exposure to traumatic stress increases risk of developing significant health and mental health challenges.

- According to the VA, approximately 20% of women Veterans of OEF/OIF have been diagnosed with Post-Traumatic Stress Disorder (PTSD).<sup>28</sup>
- Women Veterans with histories of civilian sexual assault are up to 5 times more likely to develop PTSD than those without sexual assault histories.<sup>29,30</sup>
- Women Veterans with histories of sexual assault in childhood are 7 times more likely to develop PTSD.<sup>31</sup>
- Women who experience Military Sexual Trauma are up to 9 times more likely to have PTSD.32
- Additional challenges associated with history of sexual assault include major depression, anxiety, physical health issues, and substance abuse.<sup>33-35</sup>

#### For women Veterans who are homeless:36

- 32% struggle with substance abuse issues.
- 45% screen positively for anxiety.
- 57% present with health related issues.
- 72% report being diagnosed with depression at some point in their lives.
- 74% screen positively for PTSD.

#### TRAUMA-INFORMED CARE: RESPONDING TO TRAUMA IN THE LIVES OF WOMEN VETERANS

As awareness of the prevalence and impact of trauma in the lives of women Veterans has increased, there has been a corresponding shift toward trauma-informed care as a best practice to support recovery. Trauma-informed care is an organization-wide approach that is "grounded in an understanding of and responsiveness to the impact of trauma that emphasizes physical, psychological, and emotional safety for both providers and survivors; and creates opportunities for survivors to rebuild a sense of control and empowerment."<sup>37</sup>

## Key components of trauma-informed care for women Veterans include:38

- Training all staff on trauma and its impact and the core principles of trauma-informed care.
- Creating safe and supportive environments.
- Providing comprehensive assessments that consider history of trauma, including trauma prior to, during, and after military service.
- Providing trauma-specific mental health services.
- Involving women Veterans in all aspects of program development.
- Adapting policies to support trauma-informed culture and practice and to avoid causing additional trauma.
- Offering specific services for the children of women Veterans.

## Preliminary outcomes associated with trauma-informed care demonstrate:39-44

- Improvement in functioning and a decrease in psychiatric and behavioral symptoms.
- Increased housing stability.
- Decreased need for crisis-based services.
- Enhanced self-identity, skills, and safety among children.
- Greater collaboration among service providers.

#### **LEARN MORE**

This fact sheet was developed with support from the Bristol-Myers Squibb Foundation as part of the *Mental Health & Well-Being* initiative. The National Center on Family Homelessness launched a multi-site demonstration project to implement a trauma-informed approach to serving women Veterans who are homeless in community-based organizations in Massachusetts. Learn more about this projects and access *Trauma-Informed Care for Women Veterans Experiencing Homelessness: A Guide for Service Providers* and other online resources at www.familyhomelessness.org.



#### **REFERENCES**

- Foster, L.K. & Vince, S. (2009). California's women veterans: The challenges and needs of those who served. Sacramento, CA: California Research Bureau.
- <sup>2</sup> Gamache, G., Rosenheck, R., & Tessler, R. (2003). Over-representation of women veterans among homeless women. American Journal of Public Health, 93(7), 1132-1136.
- <sup>3</sup> U.S. Government Accountability Office. (2011). Homeless women veterans: Actions needed to ensure safe and appropriate housing. Washington, DC: Author.
- <sup>4</sup> U.S. Department of Veterans Affairs. (2013). VA healthcare utilization among OEF/OIF/OND Veterans, 4th quarter FY12, V1a. Washington, DC: Veterans Health Administration Environmental Epidemiology Service, Environmental Health Strategic Health Care Group, Office of Public Health.
- U.S. Government Accountability Office, 2011.
- <sup>6</sup> U.S. Government Accountability Office, 2011.
- U.S. Government Accountability Office, 2011.
- Mulhall, E. (2009). Women warriors: Supporting she 'who has borne the battle.' New York, NY: Iraq and Afghanistan Veterans of America.
- <sup>9</sup> U.S. Department of Labor Women's Bureau. (2011). Trauma-informed care for women veterans experiencing homelessness: A guide for service providers. Retrieved from http://www.dol. gov/wb/trauma/traumaguide.htm
- <sup>10</sup> Hamilton, A.B., Poza, I., & Washington, D.L. (2011). Homelessness and trauma go hand-in-hand: Pathways to homelessness among women veterans. Women's Health Issues, 21(4), 203-209.
- Washington, D.L., Yano, E.M., McGuire, J., Hines, V., Lee, M., & Gelberg, L. (2010). Risk factors for homelessness among women veterans. *Journal of Health Care* for the Poor and Underserved, 21(1), 82-91.
- 12 Foster, L.K. & Vince, S., 2009.
- <sup>13</sup> Zinzow, H.M., Grubaugh, A.L., Monnier, J., Suffoletta-Maierle, S., Frueh, B.C., (2007). Trauma among female veterans: A critical review. *Trauma, Violence, & Abuse, 8*(4), 384-400.
- <sup>14</sup> Zinzow, H.M. et al., 2007.
- <sup>15</sup> Zinzow, H.M. et al., 2007.
- <sup>16</sup> Zinzow, H.M. et al., 2007.
- <sup>17</sup> Zinzow, H.M. et al., 2007.

- <sup>18</sup> Zinzow, H.M. et al., 2007.
- <sup>19</sup> U.S. Department of Veterans Affairs. (2011). National Center for PTSD: Intimate Partner Violence. Retrieved from http:// www.ptsd.va.gov/public/pages/domesticviolence.asp.
- <sup>20</sup>Kimerling, R. & Hyun J. (2012). Conducting research with VA data on military sexual trauma [PowerPoint slides]. Cyberseminar presented by U.S. Department of Veterans Affairs (VA) Women's Health Services Research and Development Service (HSR&D).
- <sup>21</sup> Foster, L.K. & Vince, S., 2009.
- <sup>22</sup> Foster, L.K. & Vince, S., 2009.
- <sup>23</sup> U.S. Department of Veterans Affairs Center for Women Veterans. (2010). Women Veterans – A proud tradition of service. Advisory Committee on Women Veterans Report. Retrieved from www.va.gov/WOMENVET/docs/ACWV\_ Report\_2010.pdf
- <sup>24</sup> Kelly, U. A., Skelton, K., Patel, M., & Bradley, B. (2011). More than military sexual trauma: interpersonal violence, PTSD, and mental health in women veterans. *Research in Nursing Health*, 34(6), 457-467. doi: 10.1002/nur.20453
- <sup>25</sup> Hamilton, A.B. & Poza, I., 2011.
- <sup>26</sup> Hamilton, A.B. & Poza, I., 2011.
- <sup>27</sup> Washington, D.L. et al., 2010.
- <sup>28</sup> United States Government Accountability Office. (2009). VA health care: Preliminary findings on VA's provision of health care services to women veterans. Retrieved from: http://www.gao.gov/new.items/ d09899t.pdf
- <sup>29</sup> Suris, A., Lind, L., Kashner, T. M., & Borman, P. D. (2007). Mental health, quality of life, and health functioning in women veterans: Differential outcomes associated with military and civilian sexual assault. *Journal of Interpersonal Violence*, 22, 179–197.
- <sup>30</sup> Suris, A., Lind, L., Kashner, T. M., Borman, P. D., & Petty, F. (2004). Sexual assault in women veterans: An examination of PTSD risk, health care utilization, and cost of care. *Psychosomatic Medicine*, 66, 749-756.
- <sup>31</sup> Suris, A. et al., 2004.
- 32 Suris, A. et al., 2004.
- <sup>33</sup> Suris, A., & Lind, L. (2008). Military sexual trauma: A review of prevalence and associated health consequences in veterans. *Trauma, Violence & Abuse, 9*(4), 250-269.
- <sup>34</sup> Zinzow, H.M. et al., 2007.

- <sup>35</sup> Kimerling, R., Gima, K., Smith, M. W., Street, A., & Frayne, S. (2007).The Veterans Health Administration and military sexual trauma. *American Journal* of *Public Health*, 97, 2160-2166.
- <sup>36</sup> Washington, D.L. et al., 2010.
- <sup>37</sup> Hopper, E.K., Bassuk, E.L., & Olivet, J. (2010). Shelter from the storm: Traumainformed care in homeless service settings. The Open Health Services and Policy Journal, 3, 80-100.
- <sup>38</sup> U.S. Department of Labor, Women's Bureau, 2011.
- <sup>39</sup> Cocozza, J.J., Jackson, E.W., Hennigan, K., Morrissey, J.B., Reed, B.G. & Fallot, R. (2005). Outcomes for women with cooccurring disorders and trauma: Programlevel effects. *Journal of Substance Abuse Treatment*, 28(2), 109-119.
- <sup>40</sup> Community Connections. (2002). Trauma and abuse in the lives of homeless men and women. Online PowerPoint presentation. Washington, DC. Retrieved from http://www.pathprogram.samhsa. gov/ppt/Trauma\_and\_Homelessness.ppt.
- <sup>41</sup> Finkelstein, N., Rechberger, E., Russell, L.A., VanDeMark, N.R., Noether, C.D., O'Keefe, M., Rael, M.V. (2005). Building resilience in children of mothers who have co-occurring disorders and histories of violence. *Journal of Behavioral Health Services and Research*, 32(2), 141–154.
- <sup>42</sup> Morrissey, J.P., Elliz, A.R., Gatz, M., Amaro, H., Reed, B.G., Savage, A., Banks, S. (2005). Outcomes for women with co-occurring disorders and trauma: Program and person-level effects. *Journal of Substance Abuse Treatment*, 28(2), 121–133.
- <sup>43</sup> Noether, C.D., Brown, V., Finkelstein, N., Russell, L.A., VanDeMark, N.R., Morris, L.S., & Graeber, C. (2007). Promoting resiliency in children of mothers with co-occurring disorders and histories of trauma: Impact of a skills-based intervention program on child outcomes. *Journal of Community Psychology, 35*, 823–843.
- <sup>44</sup> Rog, D.J., Holupka, C. S., & McCombs-Thornton, K. L. (1995). Implementation of the homeless families program: Service models and preliminary outcomes. *American Journal of Orthopsychiatry, 65*, 502–513.