Despite their growing numbers, women who have served in the U.S. military continue to encounter challenges accessing the services and support they need. Programs designed to support veterans’ health and well-being largely focus on men. Women’s military experiences and postservice needs differ from those of men, and veteran women as a population differ from nonveteran women. Few studies have explored these differences, and this has translated to potentially missed opportunities to improve support for women during and after their transition from military to civilian life.

Adagio Health provides health, wellness, and nutrition services to diverse communities in Western Pennsylvania and neighboring counties, regardless of income. It launched its Women Veterans Initiative in 2018 with the goals of providing culturally sensitive care to the more than 15,000 women veterans in its service area and engaging in partnerships and outreach to increase awareness of women veterans’ experiences and community-level support. Adagio Health asked the RAND Corporation to assess the needs of these veterans to provide a clearer picture of this often-underserved population, available programs and resources, gaps in support, barriers to access, and opportunities to better meet the needs of women who served.

**Characterizing Women Veterans’ Needs and Available Resources**

Few studies have focused specifically on the health and well-being of women veterans, but there is some evidence that veteran women fare worse than veteran men and nonveteran women in terms of physical health, mental health, trauma and violence exposure, alcohol or substance use, and social support. Women veterans’ reproductive health outcomes are even less studied.

RAND researchers drew on national and regional survey data; patient data from Adagio Health; and the literature on women veterans’ experiences, needs, and outcomes, along with an inventory of policies and available services, resources, providers, and other sources of support for women veterans. Interviews with women veterans and service providers offered additional insights and context for this needs assessment.

Western Pennsylvania’s women veterans closely resemble women veterans nationally in that they are more likely than their nonveteran counterparts to be middle-aged (35–54 years old), white, college-educated, divorced, and living without a spouse or partner. However, veteran and nonveteran women in
the region have similar employment statuses, household incomes, and housing situations.

Women veterans’ needs vary with their age. Younger veteran women (20–39 years old) tended to need more support for self-care, vision, and ambulatory needs than their nonveteran counterparts in the same age group. Older veteran women (ages 40–64) more often faced independent living and cognitive difficulties. Veteran women in the Adagio Health service area are less likely than veteran women nationally to have a service-connected disability rating and, thus, less likely to qualify for U.S. Department of Veterans Affairs (VA) disability compensation benefits.

Adagio Health began prescreening all patients for mental and behavioral health indicators during the study period. A notable preliminary finding was that 10.2 percent of veteran women patients had a positive prescreen for a behavioral health issue, compared with 6.5 percent of Adagio’s nonveteran women patients. Similar percentages of veteran women patients and nonveteran women patients screened positive in follow-up tests for symptoms of depression, posttraumatic stress disorder (PTSD), substance use, and other mental and behavioral health conditions. In terms of routine physical health screenings, veteran women patients had worse average blood pressure readings across visits than their nonveteran counterparts, but the two groups had similar body mass index scores.

Women veterans, as shown in the table below. Some programs in Adagio Health’s service area offer both in-person and remote services, hold events in multiple counties, or attract veterans from outside the region; the figure on the following page maps these programs’ general distribution relative to where women veterans live.

These resources are concentrated in counties with higher populations of women veterans, which are also home to larger urban centers. It is possible that women veterans in rural areas face resource limitations and transportation barriers. It is also unclear whether there is enough capacity to meet demand for these resources and whether the available services align with the needs of women veterans in the region. Interviews with

<table>
<thead>
<tr>
<th>Category</th>
<th>Number of Regional Programs or Providers</th>
<th>Number of National Online Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health and substance use</td>
<td>163</td>
<td>20</td>
</tr>
<tr>
<td>Individual and family support</td>
<td>13</td>
<td>31</td>
</tr>
<tr>
<td>Housing and utilities</td>
<td>11</td>
<td>10</td>
</tr>
<tr>
<td>Social enrichment</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>Benefits</td>
<td>8</td>
<td>12</td>
</tr>
<tr>
<td>Employment and career development</td>
<td>7</td>
<td>32</td>
</tr>
<tr>
<td>Wellness</td>
<td>7</td>
<td>13</td>
</tr>
<tr>
<td>Military sexual trauma and sexual assault</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Income support</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Sports and recreation</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>Clothing, food, and transportation</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Education</td>
<td>4</td>
<td>17</td>
</tr>
<tr>
<td>Legal and Veterans Court</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Physical health</td>
<td>3</td>
<td>9</td>
</tr>
</tbody>
</table>

SOURCES: National Resource Directory; RAND Mental Health Addiction Treatment Tracking Repository.

NOTE: Some programs offer more than one type of service.
women veterans and other stakeholders highlighted several challenges that women veterans in the Adagio Health service area face in navigating services and benefits and accessing the support they need.

Interviewees noted that these challenges are often interconnected. For example, women veterans who are unable to access adequate care for mental health conditions can have difficulty finding and maintaining steady employment. Interviewees also echoed research findings that transportation and caregiving demands are significant barriers to accessing services. For example, despite the availability of housing resources for veterans, many of these programs do not accommodate veterans with children and other dependents, such as elderly parents, living in the veteran’s household.

Opportunities to Address Challenges and Improve Support for Women Veterans in Western Pennsylvania

The assessment of women veterans’ needs pointed to several recommendations to further enhance Adagio Health’s Women Veterans Initiative to address service gaps for underserved populations of women veterans in the region.

Develop Strong Relationships with Women Veteran Patients

For women veterans, prior negative experiences with care and a lack of recognition of their veteran status can prevent them from seeking care or engaging with needed services and supports. Continually investing in developing respectful and trusting relationships with these patients is paramount.

Collaborate with Agencies and Organizations to Develop Partnerships and Referral Pathways

Women veterans’ inability to connect with needed services and supports can be exacerbated by trust issues and a lack of knowledge of available resources. Because women veterans do not always receive the referrals they need, Adagio Health should consider further strengthening its network of partner agencies and organizations, including VA.

Expand Services to Better Meet the Needs of Women Veterans

Despite experiencing high rates of PTSD, depression, and military sexual trauma, women veterans often do not receive the mental and behavioral health treatment they need. Reproductive health services can also be difficult to access, given the current political landscape. Adagio Health should explore opportunities to expand further into underserved areas, including in neighboring states.
Provide Multiple Channels to Ensure That Women Veterans Are Aware of Available Services and Supports

Women veterans noted that their lack of awareness of services and supports posed additional challenges during their transition from military service to civilian life, a situation that was compounded by feelings that they were not real veterans. Adagio Health could amplify its efforts to share information about benefit eligibility and available services and programs during visits, expand its presence at community events and on social media, and otherwise increase awareness of its specialized care for women veterans.

Address Women Veterans’ Feelings of Isolation and Lack of Social Support

A lack of social support can lead to feelings of isolation and exacerbate mental health problems. Women veteran patients might benefit from peer support, social enrichment, recreational activities, and other opportunities to interact with fellow women veterans and get involved in their communities—including greater access to Adagio Health wellness retreats.

Partner with Agencies and Organizations to Address Unmet Needs and Reduce Barriers to Accessing Health Care and Other Services

Women veterans often encounter concrete barriers to accessing services, such as child care demands and a lack of transportation. Adagio Health could work to further develop strategic partnerships to address specific unmet needs while helping its women veteran patients overcome access barriers.

Expand Trauma-Informed Approaches to Care

Although a history of trauma and intimate partner violence is common among women veterans, this group does not always have access to trauma-informed, evidence-based care. More actively promoting Adagio Health’s status as a provider of trauma-informed care can further signal its ongoing commitment to serving women veterans with respect and sensitivity.

Considerations for Women Veteran Service Providers

Efforts to meet the needs of women veterans in Western Pennsylvania should take into account the following considerations drawn from this needs assessment:

- Recognize the interconnectedness of the issues and challenges that women veterans face.
- Individualize and tailor assistance for veteran women in ways that address their unique needs that differ from those of veteran men and nonveteran women.
- Be intentional in reaching women veterans; it takes a great deal of effort and time to build trusted relationships with underserved populations.
- Use systematic, ongoing data collection to help identify unmet needs and gauge the progress of improvement efforts.
- Explore additional opportunities to solicit input and feedback from women veterans.