



NATIONAL COALITION *for* HOMELESS VETERANS

“Military Sexual Trauma Among Homeless Veterans”

Pavao, J.; Turchik, J.A.; Hyun, J.K.; Karpenko, J.; Saweikis, M.;

McCutcheon, S.; Kane, V.; Kimerling, R. / [Full Report](#)

Quick Takeaways:

- Military Sexual Trauma (MST) was reported by 39.7% of female homeless veteran respondents and 3.3% of male homeless veteran respondents
- MST was associated with an increased incidence of mental health conditions and substance use disorders (SUD) in homeless veterans
- 97.9% of homeless women veteran and 95.3% of homeless male veterans receive mental health services through the Veterans Health Administration (VHA)

Summary:

As of 2013 when this study was published, few studies showed the effect MST has on male and female veterans' mental health and SUD. The goals of this study were to:

- “1) Estimate the proportion of female and male homeless veterans who have experienced MST
- 2) Examine the association between MST and mental health conditions
- 3) Describe mental health utilization among homeless women and men, and utilization of MST-related mental health care among those who report MST”

Study:

The VHA Support Service Center Homeless Registry (VSSC) identified 131,396 homeless veterans for this study. Of those identified, 126,598 homeless veterans were then classified as having MST through the VHA's MST Support Team Data Archive. The VHA National Patient Care Database (NPCD) provided data on demographics, diagnostics and VHA utilization (number of mental health visits). The Agency for Health Research and Quality's Clinical Classifications Software were used to map mental health diagnoses with classification from the International Classification of Diseases, 9th Edition Clinical Modification.

Findings:

Compared to all VHA users, veterans who were homeless were more likely to have MST history, as shown by the following findings:

- 39.7% of homeless female veterans compared to 22% of female VHA users had MST history
- 3.3% of homeless male veterans compared to 1% of male VHA users had MST history



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Homeless men and women veterans who had experienced MST were, on average, more likely to have mental health conditions than those homeless veterans who had no history of MST. Prominent diagnoses include:

- Depressive disorders (female: 73% with MST and 59.7% without) (male: 68.6% with MST and 61.9% without)
- PTSD (64.8% and 23%) (51.3% and 21.9%)
- SUD (45.3% and 33.4%) (68.6% and 61.9%)
- Anxiety disorders (35.2% and 27%) (28.9% and 19.8%)
- Bipolar disorders (22.5% and 15.5%) (17.9% and 10.3%)
- Personality disorders (16.5% and 9%) (12.8% and 6.1%)
- Adjustment disorders (16.8% and 19.7%) (16.1% and 16.1%)
- Schizophrenia and other psychotic disorders (10.6% and (9.7%) (18% and 11.8%)
- Suicide and intentional self-inflicted injury (7.7% and / 4.8) (10.6% and 6.2%)

Homeless female veterans with MST were more likely to be younger, non-white, single, have a service connected disability and have served in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or Operation New Dawn (OND).

Nearly all homeless veterans in this study received mental health services from the VHA (97.9% of women, and 95.3% of men). Those who experienced MST used the VHA services more frequently. Homeless women veterans with a history of MST compared to those without a history of MST had a median visit range of 24 visits versus 9 visits with 89.1% of visits being MST related. Homeless men compared at 27 visits versus 14 visits with 79.8% being MST related.

Conclusion:

The authors believe that even though many homeless veterans are receiving mental health services through the VHA, many are not and the barriers for them need to be studied. This analysis would assist workers in addressing issues such as treatment, housing stability and employment. The authors suggest studying trauma informed services in more depth so assistance can be given to more users of the VHA and those who do not receive services through the organization.

Source: Pavao, Joanne, et al. "Military Sexual Trauma Among Homeless Veterans." *Journal of Internal Medicine*. 28(Suppl 2). (2013): S536-41. Web. 16 June 2014.

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3695264/pdf/11606_2013_Article_2341.pdf.