

EXPLORING NEEDS OF UK FEMALE VETERANS

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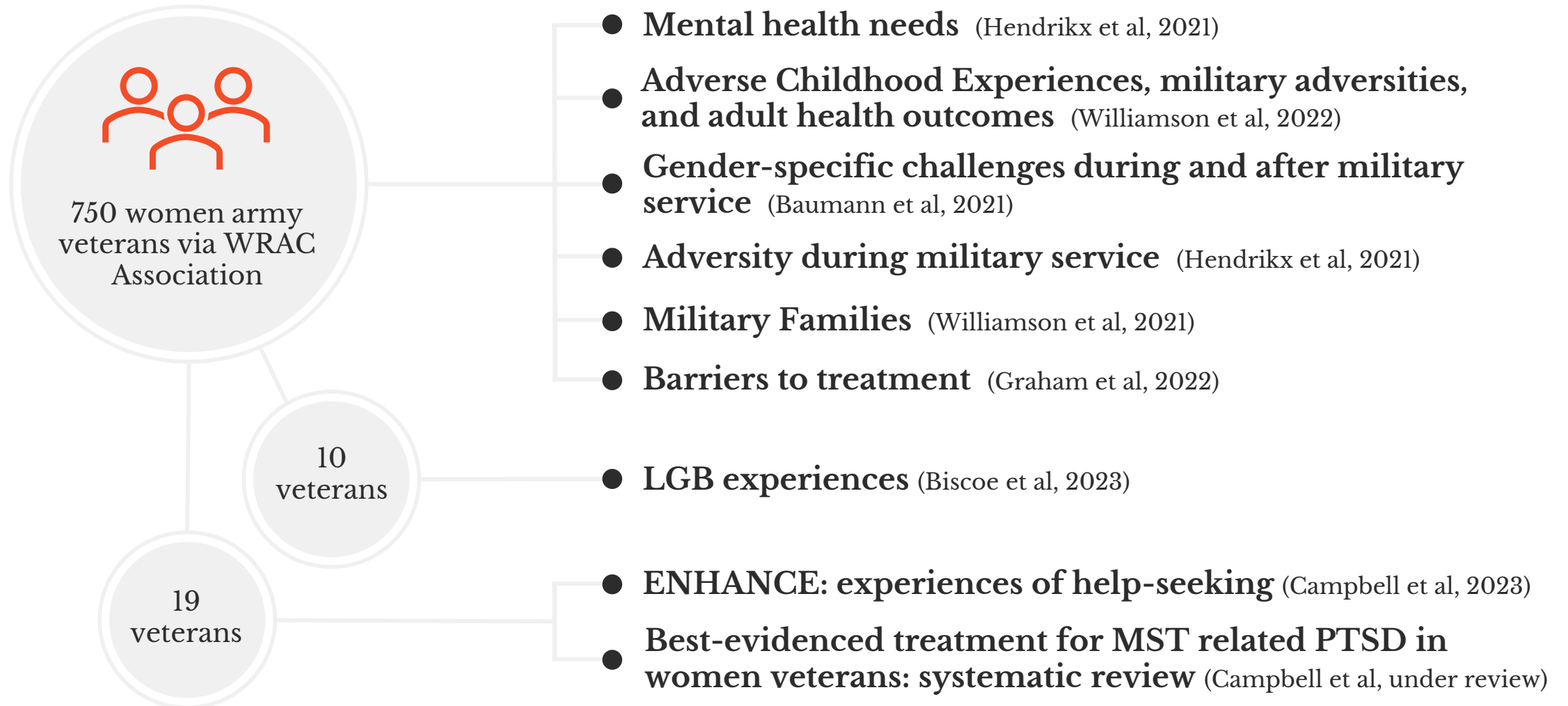
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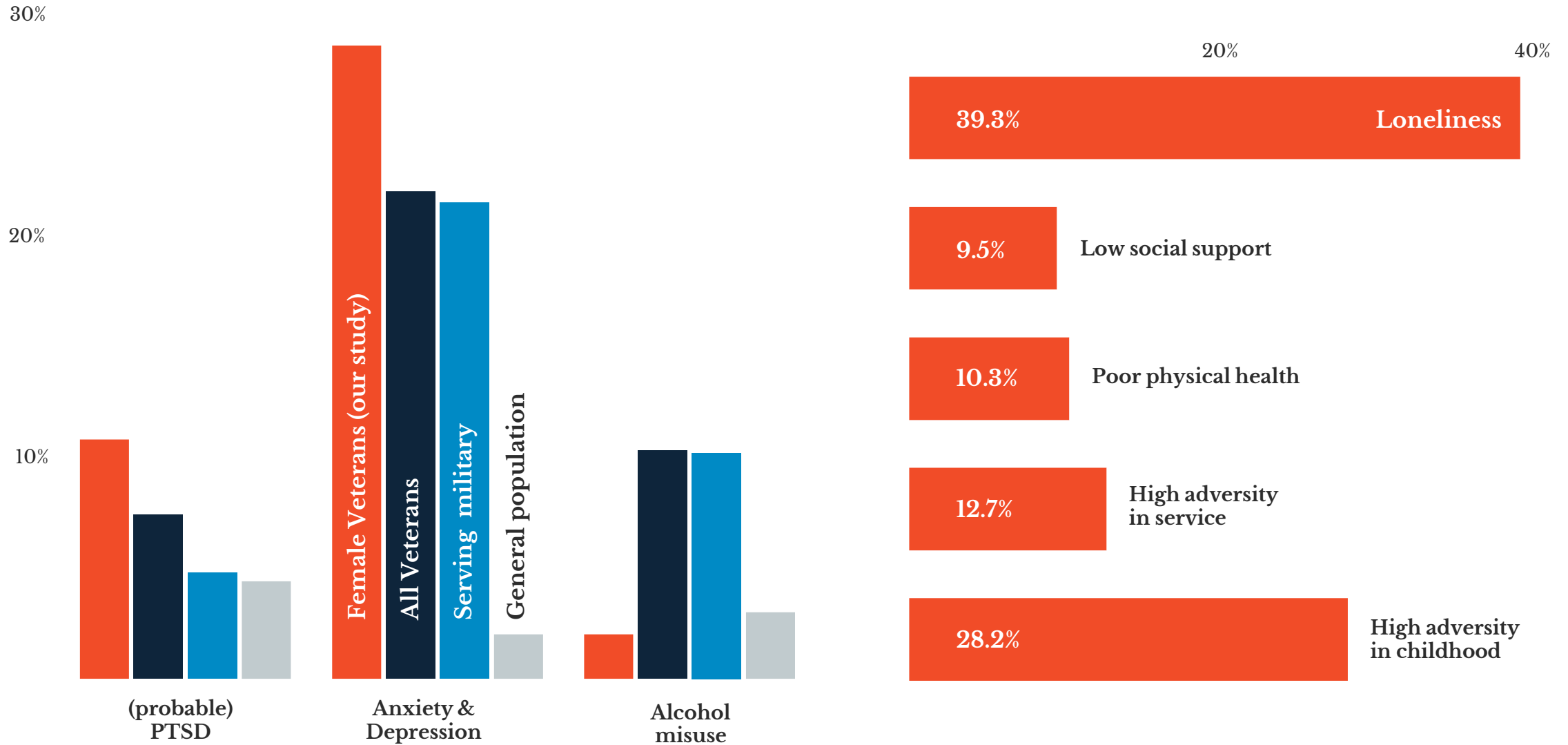
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COMBAT STRESS STUDIES TO DATE



FEMALE VETERAN HEALTH OUTCOMES

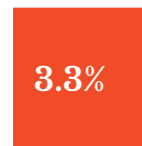
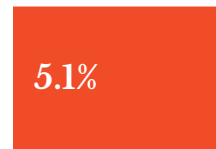


FEMALE VETERAN HEALTH PREDICTORS

	<i>Odds Ratio (95% CI)</i>	
	PTSD	CMDs
High ACEs	2.79 (1.22 to 6.39)*	1.55 (0.92 to 2.60)
High Military Adversity	2.47 (1.02 to 5.97)*	1.15 (0.60 to 2.19)
Physical Symptoms	8.06 (3.36 to 19.32)*	2.13 (0.99 to 4.56)
Low Social Support	5.06 (2.10 to 12.21)*	3.16 (1.40 to 7.10)*
Feeling Lonely	4.72 (1.55 to 14.35)*	5.42 (3.30 to 8.91)*

IN-SERVICE ADVERSITY & MILITARY SEXUAL TRAUMA

Prevalence



Sexual harassment

Sexual assault

Emotional bullying

Physical assault

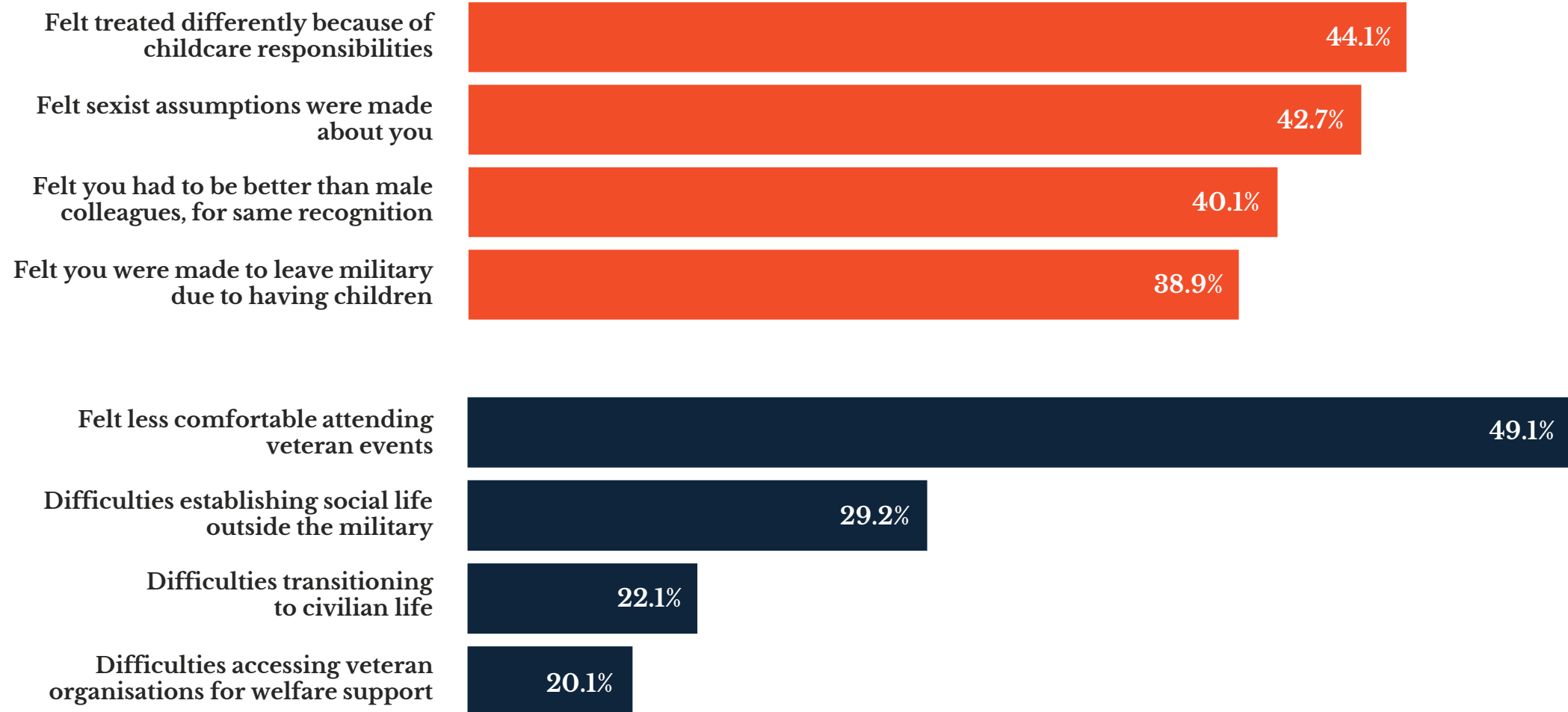
Association with PTSD



increased odds



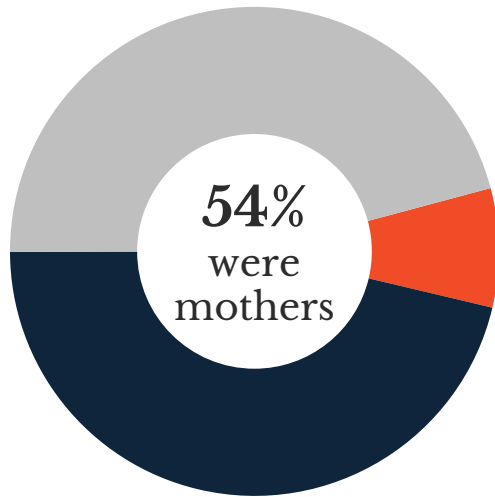
CHALLENGES DURING & POST MILITARY SERVICE



CHALLENGES VS. HEALTH OUTCOMES

	<i>Odds Ratio (95% CI)</i>	
	Military challenges	Veteran challenges
PTSD (PCL-5)	4.05 (1.41 to 11.7)*	2.19 (0.65 to 7.39)
CMDs (GHQ-12)	5.45 (1.52 to 3.95)*	1.44 (0.83 to 2.48)
Alcohol Misuse (AUDIT)	1.41 (0.72 to 2.76)	1.07 (0.50 to 2.28)
Physical Health (PHQ-15)	3.81 (1.33 to 10.9)*	1.04 (0.42 to 2.61)
Loneliness (UCLA-R)	2.77 (1.82 to 4.21)*	1.99 (1.21 to 3.28)*

TIMING OF FIRST CHILD



14.5% of mothers had first child **during service**



Poorer health outcomes as a veteran

1.14

Anxiety & Depression

1.06

Anger



Challenges during military service

2.23

Non-voluntary discharge

2.35

High in-service adversity

3.24

High gender-specific challenges

Significant Odds Ratios

BARRIERS TO SEEKING HELP

Gender Discrimination

Treated differently to men
*"a man would not have been
treated in that way"*

Services designed for male veterans
*"it is always orientated towards
the male point of view"*

Not seen as a veteran
*"female veterans not recognised
at my surgery"*

Access Barriers

Lack of services
"nowhere to turn for help"

Lack of awareness of support
"not aware I was entitled to support"

Mental Health Stigma

*"Felt I had to hide this
and could not seek help
within the service"*

"Treated with disdain"

Lack of Understanding from Professionals

*"being a woman we were not as
involved as men...so we don't know
enough to be affected"*

"book thrown at me"

"told to man up"

Sexual Orientation Discrimination

*"discharged for being gay
made me feel worthless"*

KEY MESSAGES

Our studies suggest:

- a **high rate of PTSD** was reported amongst female veterans
- **loneliness was particularly salient** and is linked to **health comorbidities**.
- there was a **high rate of in-service adversities**, and in particular **military sexual trauma (MST)**.
- PTSD was significantly associated with MST.
- having a **first child during service** was associated with **adversity during military service** and **poorer current health** as a veteran.



Office for
Veterans' Affairs

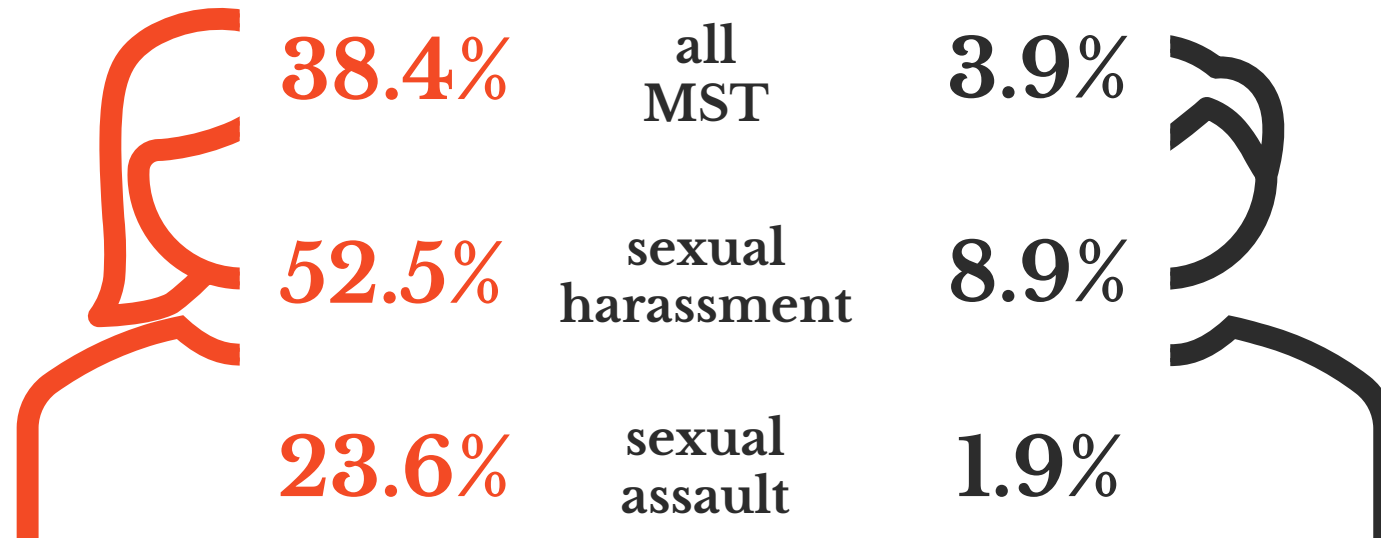
**COMBAT
STRESS**
FOR VETERANS' MENTAL HEALTH

THE ENHANCE STUDY

**Co-designed treatment recommendations for
female veteran survivors of MST**

MILITARY SEXUAL TRAUMA

There **is no consensus definition** of MST.
MST encompasses **sexual harassment, bullying** and **assault**.



(meta-analysis, 69 studies, US-military, serving/ex-serving, Wilson 2018)

ENHANCE: OVERVIEW



*Improving access to best-quality evidence-based treatment
for women veteran survivors of sexual trauma*



1 
Systematic
Review

2 
Qualitative
Study

3 
Knowledge
Mobilisation

ENHANCE.



Office for
Veterans' Affairs

ENHANCE WP1: SYSTEMATIC REVIEW

Evidence-based treatments for PTSD resulting from MST

- Narrative systematic review
- 1992-2022
- Traumatic response measure (PTSD resulting from MST)
- Female serving and veterans (outcomes stratified in mixed populations)

Results

- Trauma-focused and non-trauma focused therapies
- Mixed quality of studies
- Lack of comparisons made across interventions

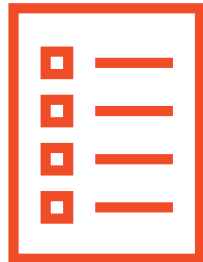
Cognitive Processing Therapy

- Most widely studied (and recommended by US VA)
- Good treatment response
- ... but elevated dropout rates

ENHANCE WP2: QUALITATIVE STUDY



Convenience sub-cohort from larger WRAC Association population used in other Combat Stress studies



Meet caseness for probable PTSD (PCL-5)
Consent to further research participation
Life Events Checklist (modified)



~60 minute recorded semi-structured interview
Reflexive Thematic Analysis (Braun & Clarke, 2008; 2021)

ENHANCE WP2: THEMES & SUB-THEMES

Attitudes to Mental Health & Help-Seeking

Views about the Self
Invalidation of Traumatic
Experiences
Consequences of Seeking
Help

Acknowledging Uniqueness

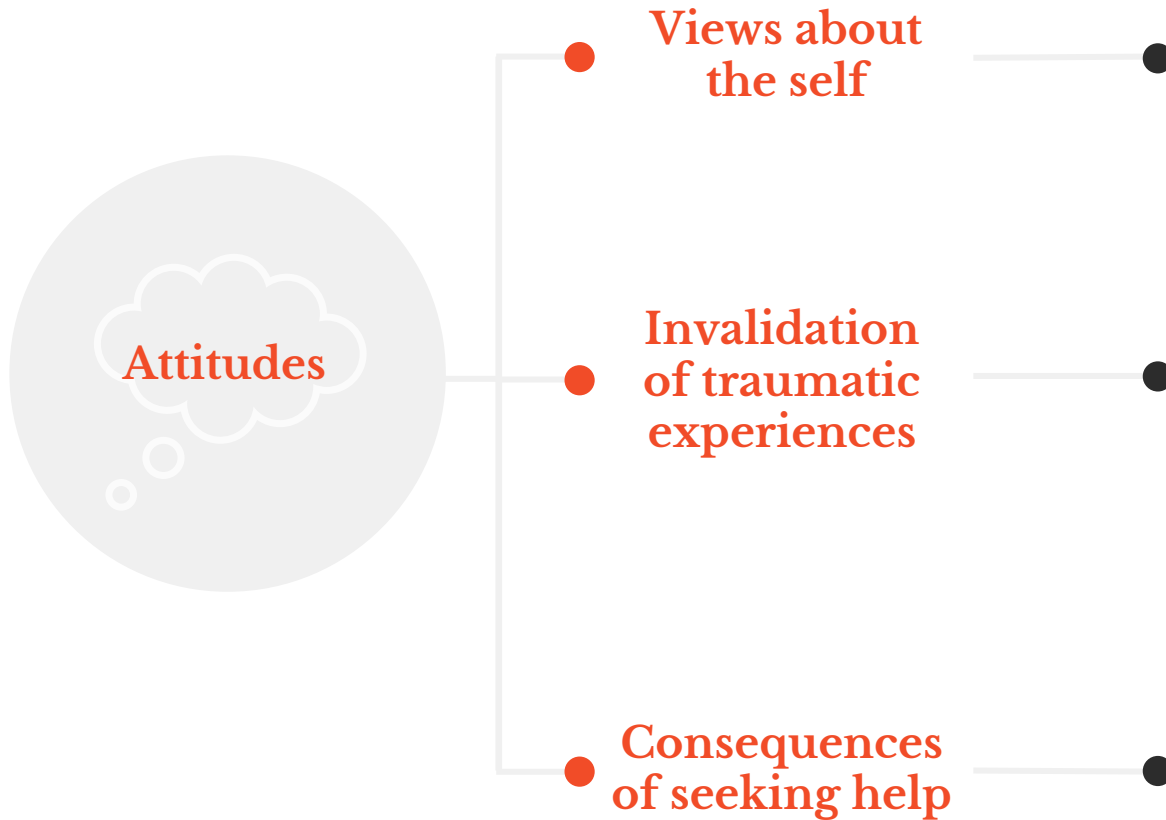
Military not Civilians
Women not Men

Care Provision

Validation & Outreach
Informed Gatekeepers
Applicability of Treatment

ENHANCE WP2: THEME ONE

Attitudes to mental health and help-seeking



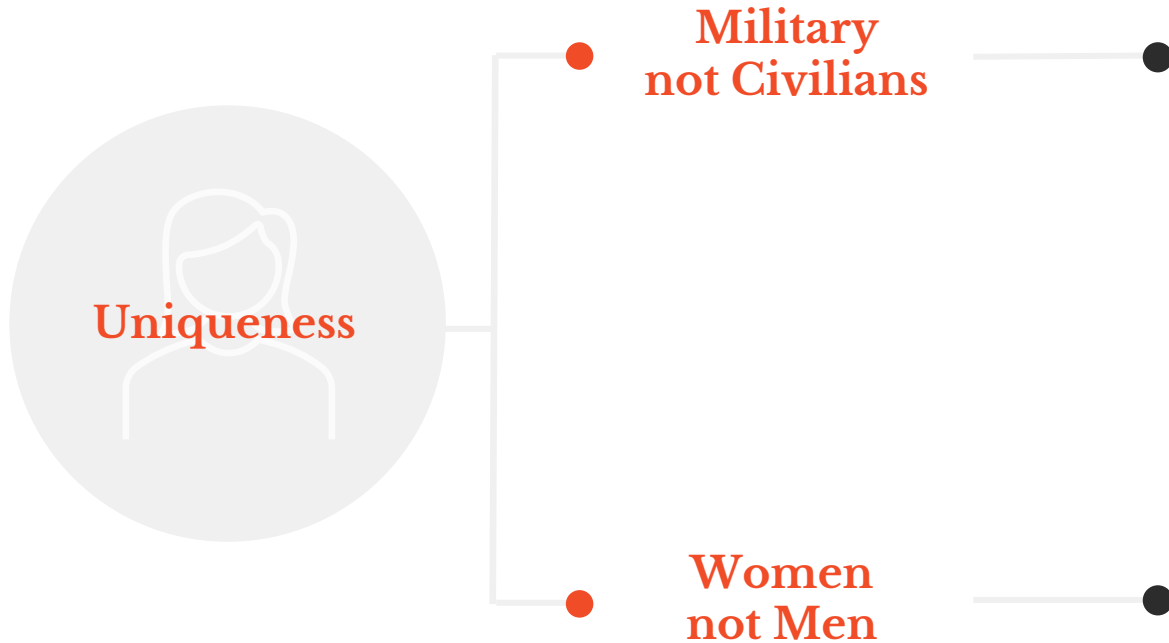
“
*...military people don't go sick...
...I was ashamed to ask [for help]...
...tried to re-educate me...*
”

“
*...a bit of a fraud...
...what I went through wasn't worth
[getting help]...
...it's not just about being on the frontline,
PTSD can happen through bullying...*
”

“
*...you'd have been kicked out...
...more stigmatising as a woman...
...[wouldn't seek help] because of my
conditioning in the Forces...*
”

ENHANCE WP2: THEME TWO

Acknowledging the uniqueness of woman veterans



“

*..It's a bond you have with someone who is an ex-squaddie
...sense of belonging...*

”

“

*...I didn't know if I would be a veteran.
I thought it was just for men...*

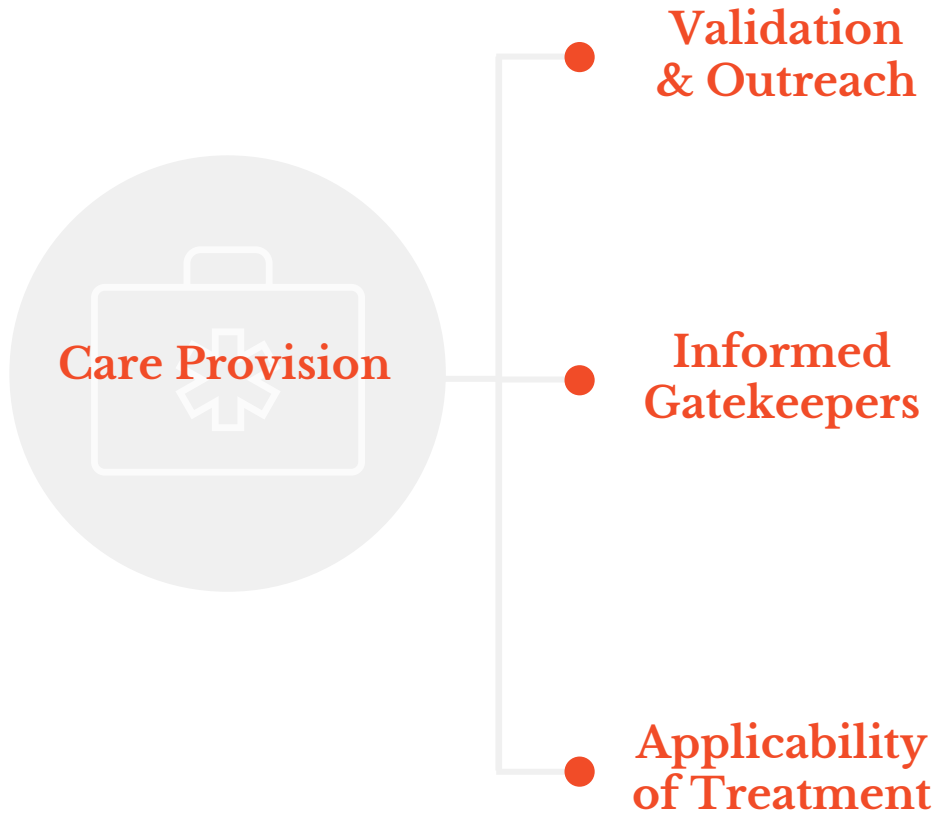
...the men are being taken care of and the women are just being shoved and forgotten...

...[I] wouldn't want to talk to a man about it...especially if they are ex-Forces

”

ENHANCE WP2: THEME THREE

Structural elements of care provision



“

...it's a given that a woman will go and get their own help...

...the onus always seems to be that you've got to go somewhere...it's not easy...

”

“

...they didn't ask – because I was a woman...

...they've not experienced the military female...

...they don't understand the difficulties that female veterans have gone through in comparison...

”

“

...the menopause lowered my defences...

...I said from the [start] that my PTSD wasn't from my military time... but the military gets dragged into it...

”

ENHANCE: FINAL CONSIDERATIONS

Military sexual trauma is **pervasive** and **disproportionately impacts** servicewomen.

- Lack of consensus definition and systematised reporting hinders understanding of prevalence.

MST is associated with **poorer health outcomes** in women veterans.

- Shown as significant cause of PTSD amongst servicewomen, as well as CMD, suicidal ideation and action, and wider psychosocial outcomes such as loneliness and parent-child bonding.

Need for **professional sensitivity** to MST and the **wider needs** of women veterans.

- Requirement for awareness and professional curiosity about women veterans' experiences.
- Further work required to overcome barriers to treatment and respond to the reported experiences.
- Need for balance between veteran-positive treatment environments and the potential difficulties inherent for those who have experienced military sexual trauma.

NEXT STEPS

Translating research into impact

- **ENHANCE+** is funded by the OVA (2024-2025) and builds on the work completed in ENHANCE.

EQUIP

Tiered professional
education
programme

Clinical capacity
building through
CPT training
provision

EXTEND

Production of
adjuvant treatment to
address lasting
negative consequences
of gender-minority
experiences during
service.

ESTABLISH

Improve understanding
of facilitators of
successful military
careers

Recommendations for
harnessing and
bolstering resilience

- **PhD: Understand the prevalence and impact of MST.** The project is funded by LISS/ESRC (2023-2026) and overcomes previous limitations by using a representative cohort of veterans. Whilst the PhD will focus on female veterans, but will also collect data on males

LAUNCHING IN 2024

Free training for health professionals working with women veterans.

Open to all health care professionals who come in contact with women armed forces veterans in the UK.

Launching in early 2024, the tiered training programme will feature:

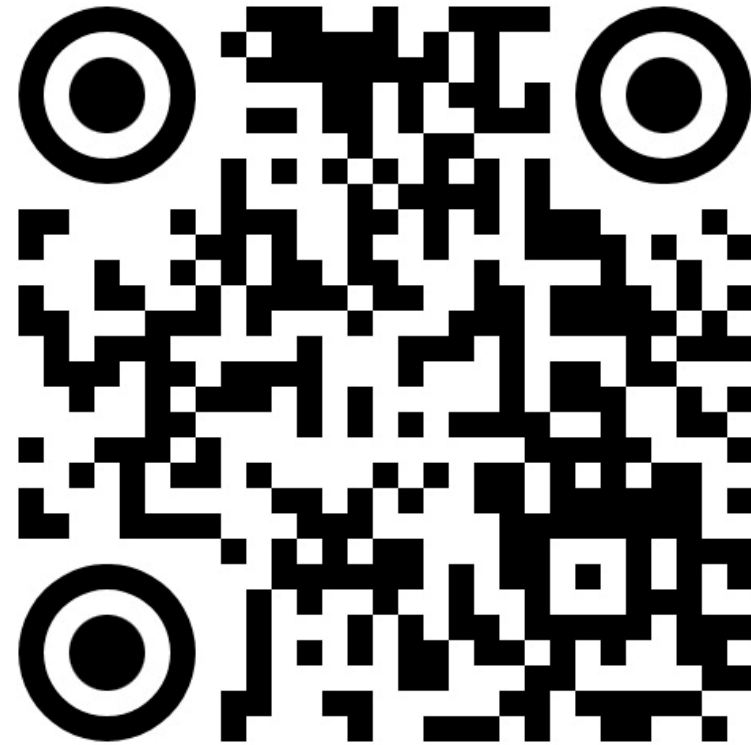
- a free online education course to help professionals better understand the experiences and needs of women veterans
- the opportunity to participate in live workshops advancing knowledge and sharing best practice
- fully-funded training places in Cognitive Processing Therapy (CPT) for appropriately qualified mental health professionals

To pre-register your interest, and be kept informed of when the training programme will launch, please enter your details below.

First Name (optional)

Last Name (optional)

Your Email (required)



veterans.training

THANKS FOR LISTENING

References, papers and more information available at
combatstress.org.uk/research

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UK
Psychological
Trauma
Society
2024
Annual
Conference
19 January 2024
Wolfson College, Oxford

**Trauma Care: Towards
an Integrated Approach**

ukpts.org/conference2024