

# THRESHOLDS

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## WOMEN VETERANS HEALTH INITIATIVE

Serving Chicago's Women Veterans with Severe Mental Illness

Women veterans are a rapidly growing population that faces a range of complex challenges. Many are single mothers struggling with Military Sexual Trauma (MST), and are now the fastest growing segment of the homeless population. These harsh realities have only recently started to enter the national consciousness. Despite the growing body of research on women veterans, there remains a woeful lack of services catered to their unique needs. The Thresholds Women Veterans Health Initiative raises the bar for women-designed, veteran-focused services.

By providing a women-only "one-stop shop" for rapid housing placement, employment and education services, benefits linkage, trauma therapies, substance abuse treatments, child care, primary care, and psychiatry, Thresholds has the opportunity to provide unparalleled service for this often-invisible group. Because of its on-site research division, the Thresholds Institute has the unique capability to evaluate program data and create a scalable model for other service providers to replicate.

## WOMEN VETERANS HEALTH INITIATIVE

Recent military engagements in Iraq and Afghanistan have seen more women than ever before in active service. Compared to the 41,000 women deployed in the Gulf War, roughly 200,000 women have served or are serving in these conflicts. The number of women going into combat in direct roles is increasing. The national women veteran population has grown to an estimated 1.9 million, according to the Department of Veterans Affairs (VA). Women account for 13 percent of service members who fought in *Operation Enduring Freedom*, *Operation Iraqi Freedom*, and *Operation New Dawn*, according to VA data.

Alarming rates of PTSD, substance abuse, unemployment, and homelessness plague both male and women veterans alike. However, the cause of these negative outcomes, and the barriers to recovery, are often quite different for women. Programs for veterans can be alienating towards women, as many do not tailor their services to their unique challenges.

### PTSD and Military Sexual Trauma (MST)

The dynamics of rape and sexual assault that occur in the armed forces are different than in civilian life. MST triggers feelings of betrayal in survivors as it upsets deeply held belief systems about loyalty to fellow service members and respect for chain of command. Perpetrators of MST usually outrank their victims and thus wield control over them. Victims of MST often feel that they need to make a choice between their military career and seeking justice for their trauma. As such, incidents of rape, sexual assault, and sexual harassment go widely under-reported, most often because of shame or fear of stigmatization and retribution.

Although under-reporting of MST is rampant, the U.S. Department of Veterans Affairs calls MST “an epidemic.” Estimates of the prevalence of MST are alarming:

- In 2011, 23% of women veterans who utilized the Veterans Health Administration (VHA) screened positive for MST (VHA, 2012).
- A Pentagon survey of 108,000 active-duty service members estimates that 26,000 people were sexually assaulted in the military last year, a sharp increase from 19,000 in 2010.
- While an estimated 26,000 people were sexually assaulted in the military last year, only 3,374 cases were reported (Pentagon, 2013).
- A higher proportion of women veterans (22%) are diagnosed with mental health problems than male veterans (VA, 2008).

“The number of women veterans in this country has doubled since the end of the Vietnam War and is projected to double again in the next five to 10 years.”

– Dr. Patricia Hayes,  
VA’s National Director of  
Women’s Health

MST can create a host of mental health and psychological issues, including PTSD-related symptoms (debilitating anxiety, depression, insomnia, extreme mood swings), as well as trust and relationship-building issues, employability problems, and more complex issues like substance abuse and self-harm. Furthermore, since women don’t self-identify as veterans to the degree men do, they often do not seek treatment through the VA, which is often considered patriarchal and unfriendly towards women. A 2011 study by the VA reported that women veterans were approximately 30% less likely to enroll in the VA’s healthcare network than men. As such, women veterans can be harder to reach, and therefore treat, than their male counterparts.

“Reverberations from MST often set off a downward spiral for women into alcohol and substance abuse, depression, and domestic violence.”

– Lori Katz, co-founder of Renew, a treatment program for women with MST

### Homelessness and Unemployment

Young women veterans, including many with children, are increasingly adding to the homeless population. Outreach that specifically targets women veterans is needed to ensure that these women receive the tailored treatments and services they need.

- Women veterans are the fastest growing segment of the homeless population. Of the 141,000 U.S. veterans who spent at least one night in a homeless shelter in 2011, nearly 10% were women, up more than 20% from 2009 (Dept. of Defense, 2012).
- Women veterans are 2.7 times as likely to become homeless as women who never served in the military (VA, 2012).
- Post-9/11 women veterans had a 19.9% unemployment rate in 2012, a sharp increase from 14.7% a year earlier (VA, 2013).

## Women Veterans and the Need for Child Care

For women veterans, balancing the challenges of post-military life with child-rearing can be especially challenging. Safety, for themselves and often their children, is a central concern. A 2012 government accountability report noted that the VA lacked safety standards for shelter providers, even though many women voiced fears of sexual harassment and assault at these predominantly male residences. That same report also stated that many shelter programs do not accept children.

- More than 40% of women on active duty have children (IAVA, 2009).
- More than 30,000 single mothers have deployed to Iraq and Afghanistan (IAVA, 2009).
- More than 60% of the VA's shelter programs do not accept children, according to a 2012 government accountability report. Many programs that do accept children restrict their ages and their number.

“While male returnees become homeless largely because of substance abuse and mental illness, experts say that women veterans face those problems and more, including the search for family housing and an even harder time finding well-paying jobs.”

– Patricia Leigh Brown,  
New York Times

## Services

Leveraging the knowledge and resources of our existing Veterans Project, Thresholds is uniquely positioned to launch an innovative and comprehensive initiative that addresses the multifaceted needs of women veterans. The Thresholds Women Veterans Health Initiative's holistic service model includes the following:

### Peer-to-Peer Support

The program is shaped and administered by women, including women veterans and those who are themselves in recovery from mental illness.

### Outreach and Case Management

Staff connect with veterans through VA pipelines, shelters, other social services, and women's organizations. Case managers connect women veterans with valuable public benefits, help them obtain key personal documents, and provide assistance with navigating an often complex VA system.

### Housing

As a participant of the Chicago Partnership to End Homelessness, Thresholds operates on the principle of Housing First, meaning that housing should be provided even when an individual is not ready to receive other services. Housing Locator staff links these women to community- and agency-based housing, using HUD Supported Housing vouchers and Thresholds' Client Assistance Fund as means of short-term rental assistance.

### Supported Employment (SE) and Education

Thresholds uses SE to help our members find/maintain jobs of their choosing. The model has been shown to be more effective than traditional employment programs for veterans served in the VA system (Resnick et al., 2009). Staff also assesses each woman's education background, links them to post-secondary institutions and other career advancement opportunities, and provides pre- and post-enrollment support.

### Child Care

Women veterans with young children can take advantage of Thresholds' Therapeutic Nursery (1110 W. Belmont Ave.), which provides hands-on education and child development. The day care is free of charge.

### Cognitive Restructuring Treatment (CRT)

The Initiative implements CRT, an intervention proven to treat PTSD, in individual and group settings. Dartmouth Medical School Professor of Psychiatry Dr. Kim Mueser, PhD., pioneered the research around CRT and oversees its implementation and ongoing fidelity at Thresholds.

### Substance Abuse Treatment

Thresholds successfully treats co-occurring conditions of mental illness and addiction with the evidence-based Integrated Dual Disorders Treatment, a highly effective model derived from more than 25 years of research and development.

### Physical and Psychiatric Health Care

Through a long-standing partnership with University of Illinois at Chicago's College of Nursing, Thresholds maintains two Integrated Health Care clinics staffed by nurse practitioners to ensure both physical and mental health needs of veterans are met. The program links veterans to an agency or community-based psychiatrist.

### Holistic Health

Our women veterans can take advantage of Chicago Botanic Gardens' monthly horticulture therapy workshops that use plants, gardens, and other aspects of nature to improve social, spiritual, physical, and emotional well-being. Also, through staff trainings conducted by the Shambhala Center, our staff is learning to incorporate the practice of mindfulness and meditation into their work and their work with women veterans.

### Research

Research staff uses Initiative evaluation data in Year 1 to inform the creation of a scalable model for other providers to implement. Because of its on-site research division, the Thresholds Institute, our agency has the opportunity to be a pioneer in the holistic care of women veterans outside the VA.



## CELESTA DAVIS' STORY

*When I got out of the Navy, I felt pretty good. I had three kids, and I had dreams of becoming a real estate agent. But in 2010, I lost my job and, soon after, lost my house. I had to spend some time in shelters. I came to Thresholds in 2011. They helped me find housing for my kids and me. That was so important. Home is where you're comfortable, where you can be yourself. I finally was able to cook again – something I missed doing so much when I was living in shelters.*

*I've worked with the PTSD Therapist, who's helped treat my post-traumatic stress and depression. My Supported Employment Specialist helped me find my current job as a leasing agent. I am currently studying for my real estate broker's license. It's what I've wanted to do for as long as I can remember. I'm really excited about it.*

## Help Thresholds Serve Our Veterans

Thresholds strives to fund the Women Veterans Health Initiative exclusively through private dollars. Your support would help bolster our current program offerings and increase our enrollment capacity. With your help, Thresholds can profoundly improve the standard of care for women veterans—both locally and nationally. This population is worth caring for, and we ask for your support of this worthy cause.

For more information, contact Emile Dawisha, Manager of Institutional Giving, at (773) 572-5207 or [emile.dawisha@thresholds.org](mailto:emile.dawisha@thresholds.org).

## Generously Funded By:



## Our Mission

Thresholds assists and inspires people with severe mental illnesses to reclaim their lives by providing the supports, skills, and the respectful encouragement that they need to achieve hopeful and successful futures.



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