



Systematic Review of Women Veterans Health Research 2004-2008

EXECUTIVE SUMMARY

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PREFACE

HSR&D's Evidence-based Synthesis Program (ESP) was established to provide timely and accurate syntheses of targeted healthcare topics of particular importance to VA managers and policymakers, as they work to improve the health and healthcare of Veterans. The ESP disseminates these reports throughout VA.

HSR&D provides funding for four ESP Centers and each Center has an active VA affiliation. The ESP Centers generate evidence syntheses on important clinical practice topics, and these reports help:

- develop clinical policies informed by evidence,
- the implementation of effective services to improve patient outcomes and to support VA clinical practice guidelines and performance measures, and
- set the direction for future research to address gaps in clinical knowledge.

In 2009, an ESP Coordinating Center was created to expand the capacity of HSR&D Central Office and the four ESP sites by developing and maintaining program processes. In addition, the Center established a Steering Committee comprised of HSR&D field-based investigators, VA Patient Care Services, Office of Quality and Performance, and VISN Clinical Management Officers. The Steering Committee provides program oversight and guides strategic planning, coordinates dissemination activities, and develops collaborations with VA leadership to identify new ESP topics of importance to Veterans and the VA healthcare system.

Comments on this evidence report are welcome and can be sent to Nicole Floyd, ESP Coordinating Center Program Manager, at nicole.floyd@va.gov.

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BACKGROUND

The body of literature dedicated to women veterans' health and health care issues has grown significantly since the publication of one previous systematic review focused on women veterans¹. To address the growing demand and potential needs of women veterans in the Department of Veterans Affairs (VA) Healthcare System, this project sought to assess the state of women veterans' health research and stratify the literature into domains relevant for VA research and policy.

Because of the broad survey nature of this synthesis, no key questions were developed.

METHODS

We conducted a systematic review of the scientific literature on women veterans' health and health care published from 2004 to 2008. Articles were identified by searching multiple scientific databases, and supplemented through direct contact with Department of Defense, VA and other experts in the field. Article titles were screened by the whole synthesis team, and those articles deemed potentially relevant to the review were each independently evaluated by two of three reviewers (BB, CH, FB) using a standard screening form. Disagreements in assessment were resolved by consensus with input from at least one senior member of the research team. Articles were considered for inclusion if the study related to U.S. veterans or military personnel and met at least one of the following three criteria: (a) included women veterans, compared men and women, or analyzed women separately; (b) involved active duty military women and a health condition or functional status that requires medical attention; or (c) were relevant to women veterans' health in VA or how VA care is delivered to women. We excluded articles that were non-systematic reviews, editorials, commentaries or of unclear study design. Because of the heterogeneity of the studies, no formal meta-analysis could be performed. Articles were classified according to subject category and narratively summarized in evidence tables.

RESULTS

We retrieved 675 articles, of which 380 were unique and passed a title screen for relevance. Of these, 185 articles were rejected because the inclusion criteria were not met: 48 did not relate to U.S. veterans or military personnel; 106 failed to meet at least one of the other three inclusion criteria; 31 articles were excluded because the study design was not appropriate (non-systematic reviews, editorials, commentaries, and unclear designs). The remaining 195 articles were categorized by study design, funding source, period of military service (if specified) of study subjects, research topic area, and health conditions addressed.

Nearly 60 percent of studies were supported by VA funds. We identified 85 articles focused on psychiatry and mental health issues, across the broad categories of PTSD, general mental health, trauma (including military sexual trauma) and other conditions. The next largest set of articles focused on quality of care (54); access and utilization (48); post-deployment health issues, especially related to OEF/OIF veterans (33); and organizational research (7). Categories were not mutually exclusive.

CONCLUSIONS

The literature on women veterans has increased substantially. The baseline review covering the more than two decades between 1978 and 2004 included 182 articles. The updated review covering the 5-year period 2004 to 2008 included 195 articles. Therefore, more women veterans health articles have been published in the past 5 years than in the 23 years before that.

Consistent with the previous systematic review, most VA women's health research continues to be observational. However, more articles are shifting from a descriptive to an analytical focus (e.g., determinants of care or health), and there has been a modest increase in the number of clinical trials—two in the baseline review, 5 in this update review.

Although the focus on mental health among women in the military and women veterans remains high, with a continuing emphasis on PTSD and MST, important new work has been published on prevalence of mental health conditions in different settings and for different subgroups and on non-trauma-related mental health problems (e.g., depression, serious mental illness). Emphasis on access, utilization, and quality of care for women veterans has increased, as has a focus on post-deployment health. These topics were identified in the baseline review as vital gaps in the literature and map to VA research priorities. Therefore, the past 5 years have seen substantial alignment between priority areas for women veterans' health research and the research topics being pursued.