



ADDRESSING THE NEEDS OF OUR WOMEN WARRIORS

AN ARMY MEDICINE PERSPECTIVE

by Lt. Gen. Patricia D. Horoho
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WOMEN HAVE BEEN SERVING in the Armed Forces for centuries. Currently women make up 15.7 percent of the Army. They serve as combat medics, truck drivers, artillery mechanics, tank system maintainers, weapons system crewmembers, military police and pilots. Their roles have been increasingly expanded and validated during our recent wars. Some women are currently serving at the tip of the spear in positions that only females can fill, such as female engagement teams. With the recent announcement of opening combat positions to all genders, we can expect that women will take on more roles that will put them in harm's way.

During my tenure as the Army Deputy Surgeon General, I became convinced that the Army Medical Department needed to take a proactive role in ensuring that the needs of our female warriors were heard and met. While serving under the International Security Assistance Force (ISAF) Joint Command (NATO) Commander in Afghanistan, I conducted a health services assessment

that included women's health as a special focus area. It was this experience that ultimately informed my decision to stand up a Women's Health Task Force.

My lead for both the Women's Health Assessment Team and the Task Force was Col. Anne Naclerio, a married, combat-wounded Army physician with 25 years of service, and a mother of two. Her team inter-

viewed over 150 servicewomen from across the theater of operations, serving in a wide range of roles. The sentiment from all was strikingly similar: These women spoke with a sense of pride and dedication to their mission. However, they also told us of the unique challenges facing women in the military, some of which impacted their ability to focus fully on their mission. These issues included field hygiene, medical issues, social integration and reintegration issues, Post Traumatic Stress, sexual assault and the fit and function of their uniform and body armor. The team put their findings in writing and made recommendations.

As the Army Surgeon General I chartered a Task Force to carry out these recommendations.

In the Task Force's first year they have:

- Developed enhancements to basic Army curricula to include education on female-unique topics.
- Developed a new *Warriors Guide to Readiness*, which is expanded to cover uniquely female issues.
- Launched a Women's Health Portal on the U.S. Army Public Health Command: <http://phc.amedd.army.mil/topics/healthyliving/wh/Pages/default.aspx>
- Developed a simple self-diagnostic kit for common female conditions, thus decreasing time spent away from the mission.

Col. Naclerio said, "I think one of the most important things we have done in our first year is to raise

awareness and build partnerships with the agencies and organizations that will help support these women both during and after their active duty service.”

Nearly 300,000 women have deployed in support of Operation Iraqi Freedom and Operation Enduring Freedom. One hundred fifty-two women have been killed in action, and 946 women have been wounded in action. (Defense Casualty Analysis System: <https://www.dmdc.osd.mil/dcas/pages/casualties.xhtml>) Twenty-four women have had a deployment-related major amputation. (*Medical Surveillance Monthly Report*, June 2012, Vol. 19, No. 6)



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Col. Naclerio will tell you from her personal experiences that while women don't necessarily have more challenges than their male peers, their challenges are unique. One example of this is the way in which women deal with their experiences regarding trauma and reintegration.

As the population of female Purple

Heart recipients grows, you have an opportunity through your organization to build support networks and increase awareness of the unique needs and challenges of women in the service of our country.

As members of the medical corps we oftentimes serve as witnesses to our soldiers' and their families' most devastating days and most triumphant moments. The Purple Heart medal is a testament to their heroism, sacrifice and resilience. We in the Army Medical Command are proud to boast as our motto: "Serving to heal; honored to serve." ✧

Grants Awarded for Improved Access to VA Health Care by Women Veterans

by Karin Romney, Support Manager, National Service Program

THIRTY-THREE ONE-YEAR GRANTS for projects that will improve health care access for women veterans have recently been awarded by the VA, the largest number ever for that purpose. The awards are part of the VA's continuing effort to improve access and quality of care for the increasing number of women veterans seeking care at the VA. The VA's goal is to achieve 100 percent accessibility for women veterans seeking help from the VA.

The grants are targeted at the following specific program areas:

- 1. Improving women's emergency health care services.** The grants will enable the purchase of new gender-specific equipment and supplies at several VA health facilities. In addition, the funds will provide for the development of new protocols to aid medical practitioners in managing common conditions in women.
- 2. Expanding women's health care education programs for VA staff.** Education grants will expand mini-

residency training for VA providers and nurses in primary care and emergency services. Courses will include training in gynecology and early obstetrics emergencies, military sexual trauma and performing breast and pelvic examinations.

- 3. Providing tele-health programs for female veterans in rural areas.** Tele-health initiatives that received grants involve tele-mental health, tele-gynecology, tele-pharmacy and telephone maternity care coordination. In general, tele-medicine is used to improve a patient's health by establishing two-way real time interactive communication between a patient and the physician or medical practitioner at a distant location. It helps eliminate distance barriers and can improve access to medical services that are not often available in remote rural communities. This form of electronic communication requires the use of interactive audio, video and digital telecommunications equipment for transmission of medical information and images from one site to another. ✧