

Putting Research to Work for Military Families



Focus:
Multiple
Branches

Health Indicators for Military, Veteran, and Civilian Women

Lehavot, K., Hoerster, K. D., Nelson, K. M., Jakupcak, M., & Simpson, T. L. (2012). Health indicators for military, veteran, and civilian women. *American Journal of Preventive Medicine*, 42(5), 473-480. doi:10.1016/j.amepre.2012.01.006

SUMMARY: Data from a population-based study including civilians, Veterans Active Duty, and National Guard or Reserves members were used to compare the health status of women who have served in the military to that of civilians. Results indicate that although National Guard or Reserve women (similar outcomes) and Active Duty women (better outcomes) compared favorably, Veterans consistently reported poorer health outcomes than civilian women.

KEY FINDINGS:

- Veterans consistently reported poorer general health and a greater likelihood of a chronic health condition such as cardiovascular disease compared to civilian and Active Duty women.
- Veterans were more likely than civilians to report a history of depressive disorder and more likely than Active Duty women to report a history of anxiety disorder.
- Tobacco use and lack of exercise were most commonly reported among Veterans.
- National Guard and Reserve women were more likely to be overweight or obese and to report both depression and anxiety than Active Duty and civilian women.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Disseminate information regarding gender-based health risks for Service members and Veterans
- Offer opportunities for Service members and their families to engage in recreational or physical activities on base
- Educate Service members about how to maintain healthy habits once they leave the military

IMPLICATIONS FOR POLICIES:

Policies could:

- Support awareness campaigns regarding health risks for female Service members
- Encourage collaboration between the DoD and community-based health care agencies to meet the continued health needs of female Service members and their families
- Support programs that encourage health-promoting behaviors (e.g., physical activity, healthy eating) to help mitigate obesity and other health related concerns among Service members

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METHODS

- Data from the CDC Behavioral Risk Factor Surveillance System (BRFSS), a national telephone survey conducted annually to monitor health conditions and risk behaviors in U.S. adults, were used in the analyses.
- Analyzed data were from the 2010 BRFSS and this article focused on a nationally representative sample of Active Duty, National Guard or Reserve Veterans, and civilian women.
- Weighted proportions of health characteristics were summarized for women across military status groups.

PARTICIPANTS

- Participants included Active Duty military (n = 611), Veteran (n = 4,221), National Guard or Reserve (n = 995), and civilian (n = 274,399) women.
- Ages ranged from 18 to over 65 years and White, non-Hispanic represented the largest percentage across all groups (range: 60 to 69%).
- Military branch data were not provided.

LIMITATIONS

- Selected participants may differ from non-participants in a way that is not measured, but affected the outcome variables; the random-digit-dial landline telephone survey excluded all households with only cellular coverage.
- Cross-sectional data does not allow researchers to test health differences experienced as a woman transitions from civilian to Active Duty to Veteran status.
- Some outcomes were measured with just a single item and others (i.e., mental health) were collected in a small subset of the sample with could bias results.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Include longitudinal research that tracks military women's healthcare across the lifespan as they transition from military to civilian/retired status
- Explore which factors might lead to greater reports of health problems (e.g., deployment experiences, social support)
- Replicate the study with a male Active Duty, Veteran, and civilian sample

ASSESSING RESEARCH THAT WORKS



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