

**The State of Women Veterans' Health Research: Results of a Systematic Literature Review  
Evidence Tables**

<b>Table 2c. Evidence Table of Health and Performance of Military/VA Women: <i>Mental Health and Homelessness</i></b>						
<b>Author</b>	<b>Women Veteran Specific?</b>	<b>Sample characteristics</b>	<b>Sample size [N]</b>	<b>Design</b>	<b>Main measures</b>	<b>Description</b>
Leda, 1992 (91)	Yes	Database of homeless veterans in the VA Homeless Chronically Mentally Ill (HCMI) Veterans Program, 1988-1991	19283 male veterans; 310 women veterans	Observ. Study- Assess risk or prognosis	Psychiatric and substance abuse disorders	Evaluated characteristics of a homeless veteran population. 1.6% of the population was female which was consistent with expected numbers. Women homeless veterans were younger, less likely to be employed and more likely to be homeless for less than one month. More women veterans were diagnosed with major psychiatric disorders but fewer had substance use disorders.
Willer, 1995 (92)	Yes	All female veterans in treatment at the Mental Hygiene Clinic of the West Side VA in Chicago, during 3 months in 1993; random sample of male veterans from the same clinic	51 women veterans; 46 male veterans	Observ. Study- Assess risk or prognosis	Demographic characteristics; psychiatric diagnoses; trauma history; functional level	Evaluated for gender differences in psychiatric diagnoses. Women were significantly more likely to have affective disorders and less likely to have anxiety disorders. Men were more likely to be diagnosed with PTSD while women were more likely to report at least one type of traumatic experience. Women experienced more of all types of traumatic experiences except combat trauma. Women were more likely to have completed college or high school but functional levels were similar between men and women.

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Leon, 1990 (70)	Yes	Sample of Vietnam theater and era nurses recruited from various sources, most from the Midwest	36 Vietnam theater and 32 Vietnam era nurses	All Other Observational	Professional preparation and nursing duties in Vietnam; cognitive or behavioral coping strategies; traumatic experiences; pre and post-Vietnam adjustment; personality inventory; coping inventory; impact of event scale	Evaluated coping patterns of Vietnam nurses and their effect on their psychological functioning. Coping patterns that included expressing feelings, seeking emotional support and trying to find meaning in traumatic events were associated with good current psychological functioning. Self-blame, anxious thoughts and withdrawal at the time of stressful encounters were associated with poorer current functioning. There were no significant differences between the two groups.
Butterfield, 1996 (93)	Yes	Convenience sample of women veterans visiting the Durham VA Medical Center's women's health center between 7/1/94 and 12/30/95	500 women veterans	Observ. Study – Assess risk and prognosis	PRIME-MD-PQ – screen for mental disorder symptoms; trauma questionnaire	Evaluated the prevalence of mental disorder and trauma and their relationship. 37% of the sample endorsed depression and 55.8% anxiety. 41% reported some sort of trauma exposure. In regression analyses, women with any history of trauma were significantly more likely to endorse symptoms of depression, anxiety or panic disorder. Rape and battering were associated with alcohol abuse symptoms.

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Bader, 2001 (94)	Yes	Convenience sample of patients from a VA women's health clinic in 1999	209 women veterans	Observ. Study – Assess risk and prognosis	PRIME-MD-PHQ – screen for mental disorders	Evaluated the prevalence of mental illness and impairments in social and occupational functioning. 45% of women screened positive for at least one mental health disorder and 46% for 2 or more co-existing disorders. Women younger than 50 years and those with a service-connected disability were more likely to have a psychiatric disorder.

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Gamache, 2003 (95)	Yes	Samples of homeless women from the Access to Community Care and Effective Services and Supports program (ACCESS, 1994-1998) and from the National Survey of Homeless Assistance Providers and Clients (NSHAPC, 1996); the Current Population Survey (national survey of domiciled women)	ACCESS: 2658 women – 117 veteran and 2548 non-veteran;  NSHAPC: 832 women – 26 veteran, and 806 non-veteran	Observ. Study – Assess risk and prognosis	Sociodemographic characteristics; clinical characteristics including addiction severity, childhood abuse, diagnostic data for psychiatric disorders, conduct disorder and family instability	Estimated the proportion of veterans among homeless women and their risk of homelessness relative to that of non-veterans. The proportion of veterans among homeless women (4.4% and 3.1%) was greater than the proportion among domiciled women (1.3%). Homelessness was 3.6 times more likely for veterans than for non-veterans with the highest risk of homelessness in the 45-55 year age cohort.