

# WOMEN WARRIORS BACK HOME

Tricare and VA ramp up to work with the fastest growing population within the armed forces: female servicemembers.

By Shari Lopatin, TriWest Healthcare Alliance

At 5 feet 3 inches and 110 pounds, U.S. Army CPT Robin Brown was often called Tinkerbell by the Soldiers she commanded “because I was always standing around with my hands on my hips yelling at people,” she said.

Deployed to Iraq in 2003 at age 28, CPT Brown commanded Bravo Company, 1st Battalion, 82nd Aviation Regiment, from Fort Bragg, N.C. She also piloted a Kiowa Warrior helicopter, parachuted from planes, and led a company of 26 Soldiers, all men. CPT Brown represents a new type of warrior, one of the fastest growing populations within the U.S. armed forces: women.

As of September 2007, women comprised 8 percent of the veteran population, according to the Department of Veterans Affairs (VA). In 2010, that number is expected to reach 14 percent. These women warriors often face unique reintegration barriers upon returning home. The Department of Defense (DoD) and VA, among other government agencies, are working to keep up with the growing demand and provide women with the care they need.

## CPT Brown's Story

“I was always the only woman in my company. And I never flew with another woman,” CPT Brown said, noting that because of her Army upbringing in a military family, she felt comfortable around men in a military setting. She formed a special camaraderie with CW2 Jeff Sumner, her flying partner, or “stick buddy.” The pair became comfortable with their flying techniques and learned to trust one another.

That bond may have saved the team's life on Dec. 9, 2003, four months into CPT Brown's second deployment to Iraq. They were flying back to their air base between Fallujah and Ramadi when their helicopter was hit by an SA16 (shoulder-fired heat-seeking missile) fired by insurgents hiding within the desert brush along the outskirts of the base. Within moments, the helicopter went diving toward the ground.

“It seemed like we fell forever, but it was only a few seconds,” CPT Brown said.

With the helicopter's engine and hydraulics damaged, CW2 Sumner switched the aircraft into auto-rotation to keep the rotor blades turning while CPT Brown radioed “Mayday!” With the helicopter shaking violently, the duo landed the Kiowa in a plowed field. Both CPT Brown and CW2 Sumner ducked from



CPT Robin Brown washes her clothes in the Iraqi desert.

danger inside the cockpit, waiting for the furiously rotating helicopter blades to stop beating. They didn't know where the insurgents were hiding.

The helicopter ablaze, CPT Brown and CW2 Sumner quickly climbed from the cockpit and ran toward a large irrigation ditch near the field. They knew they had to get as far away from the smoking aircraft as possible. They sprinted from ditch to ditch, taking turns covering each other and crouching behind bushes. As smoke billowed into the Iraqi sky, a crowd of locals formed around the fallen helicopter. Their sister helicopter called for a rescue. Within an hour, two Black Hawk helicopters landed for the Kiowa pilots. CPT Brown remembers it “felt like five hours” before their rescue crew arrived.

“As we're running to the Black Hawk helicopter, our fellow Soldiers were all there, and I don't know if they were more excited to see us or we were more excited to see them. They kept high-fiving us,” CPT Brown said, laughing. “It's like a movie for a moment. We were so giddy because we were so excited.” The Black Hawk airlifted CPT Brown and CW2

Sumner back to safety, and both came through without physical injuries.

Because these events happened toward the beginning of the Iraq War, CPT Brown said that not as much awareness existed about the need for counseling and for assistance with post-traumatic stress as it does today. No one came to check how she was, emotionally, after everything calmed down.

“I had a lot of trouble sleeping for a long time,” she said, admitting that while she loved serving in uniform, the fact that no one followed up on her mental state bothered her. To this day, CPT Brown is not sure if she experienced post-traumatic stress. She knows she hasn't suffered long-term effects from the experience, though.

“I loved the Army and I miss it every day,” said CPT Brown, who after eight years eventually left the Army in February 2005 to spend more time with her husband and start a family. “[Serving in the Army] is very exciting. It's an adrenaline rush. You just feel a lot of personal pride. You go to work every day, and what you do really matters.”

## Service Impact on Women

The Iraq and Afghanistan wars are the first in which many servicewomen are exposed to repeated combat situations, according to a June 2007 report from the DoD Task Force on Mental Health. Despite policy restrictions on women fighting in direct ground combat, “female military members are an integral part of the large support force....The lack of frontlines and the insurgent nature of the current conflicts have made avoidance of many combat situations very difficult,” the report stated. This puts women at risk for the same trauma their male counterparts experience, including post-traumatic stress.

The National Center for Post-Traumatic Stress Disorder (PTSD) found that women are more likely to develop chronic PTSD than men. Yet a comparison of male and female veterans from the Vietnam and Gulf wars suggested men are three times more likely to receive a PTSD diagnosis than women, according to the

DoD's 2007 mental health report.

Besides facing PTSD, women are more prone to military sexual trauma than men. Among veterans in the VA health care system, 23 percent of women reported sexual trauma, and 55 percent of women experienced sexual harassment in the military, according to the National Center for PTSD. Servicemembers victimized by sexual trauma deal with depression, substance abuse, suicidal thoughts, and other health problems.

DoD has made great strides in providing assistance to victims of sexual assault, according to the most recent report released Dec. 4 from the DoD Task Force on Sexual Assault in the Military Services. For one, restricted reporting of sexual assault is now available, which gives the victim access to immediate medical care and counseling without engaging law enforcement or military command. The task force further recommended improving medical care for victims of sexual assault, especially for those in war zones, as well as ensuring they understand their rights and are given the opportunity to meet with legal counsel to minimize confusion during the investigation.

Because of the emphasis on military sexual trauma, the VA has devoted a Web page with information and resources to this issue. On it, the VA advises that it "provides free, confidential counseling and treatment for mental and physical health conditions related to experiences of military sexual trauma. You do not need to be service-connected and may be able to receive this benefit even if you are not eligible for other VA care. You do not need to have reported the incidents when they happened or have other documentation that they occurred."

### Support Networks for Coping

Servicewomen who have experienced trauma, whether it's sexual or combat-related, cope differently than their male counterparts, said Dr. Heidi Kraft, clinical psychologist, former Navy psychologist, and author of *Rule Number Two: Lessons I Learned in a Combat Hospital*. "Women, compared to men, tend to turn more to support networks [when dealing with trauma]...and that social support gives them the backing they need to process and cope," she said.

Dr. Kraft said that one possibility why women may struggle emotionally is because of the way military personnel are deploy-

ing to combat, as "individual augmentees." These servicemembers are pulled from one unit to augment another, where they don't know anyone. Then, after a long combat deployment, they return to the original unit, where no one understands. This disrupts a servicewoman's support network of people with whom she fought, and it affects women in the Guard and reserve, too.

"The theory is that Guard/reserve service is especially difficult because of the stark contrasts between combat deployments and civilian life," Dr. Kraft said. "Women reservists are at special risk, but so are male reservists."

Marge Crowl, director of behavioral health at TriWest Healthcare Alliance, the company that administers Tricare's military health benefit in 21 Western states, agrees with Dr. Kraft. She served in the U.S. Army Reserve Nurse Corps and deployed to Saudi Arabia for Operation Desert Storm in 1990. There, she commanded a medical unit and endured nightly scud missile explosions, among other frightening experiences.

"When I returned to civilian life, my reintegration process was made much easier because of my support network," she said. "I had a job at the VA, and there were several of us deployed from the VA at the same time. We all lived through similar experiences so there was camaraderie in my workplace, forming an understanding environment of my situation."

But not everyone else returned with the same experience. Ms. Crowl said some women returned to find themselves in the middle of divorces or their relationships ending. Had she been at a different point in her life, she is not sure how she would have handled returning to the civilian world.

### Resources for Servicewomen

Women can visit the VA Center for Women Veterans online to find various sites that address issues such as behavioral health and sexual trauma. If they are eligible Tricare beneficiaries, women can also find valuable benefit information by visiting the Tricare mental health resource center online.

One new program, the Tricare Assistance Program or TRIAP, is a gender-neutral program that offers non-clinical, online videoconference counseling from

## Support for Female Servicemembers

**Defense Task Force on Sexual Assault**  
[www.dtic.mil/dtfsams](http://www.dtic.mil/dtfsams)

**DoD's Sexual Assault Prevention and Response Office (SAPRO)**  
[www.sapr.mil](http://www.sapr.mil)

**Tricare Mental Health Resource Center**  
[tricare.mil/mentalhealth](http://tricare.mil/mentalhealth)

**VA Center for Women Veterans**  
[www1.va.gov/WOMENVET](http://www1.va.gov/WOMENVET)

**Women Veterans Health Care**  
[www.publichealth.va.gov/womenshealth](http://www.publichealth.va.gov/womenshealth)

**Military Sexual Trauma Help**  
[www.publichealth.va.gov/womenshealth/trauma.asp](http://www.publichealth.va.gov/womenshealth/trauma.asp)

**VA's National Center for PTSD**  
[www.ptsd.va.gov](http://www.ptsd.va.gov)

**Rape Crisis Centers near U.S. Military Bases**  
[www.veteransforamerica.org/woundedwarrior/military-women/rape-crisis-centers](http://www.veteransforamerica.org/woundedwarrior/military-women/rape-crisis-centers)

**Grace After Fire: a social network by women veterans, for women veterans**  
[www.graceafterfire.org](http://www.graceafterfire.org)

**Rule Number Two: Lessons I Learned in a Combat Hospital**  
[www.rulenumbertwo.com](http://www.rulenumbertwo.com)

### Tricare Regional Contractors:

**North Region**  
1-877-874-2273  
[www.healthnetfederalservices.com](http://www.healthnetfederalservices.com)

**South Region**  
1-800-444-5445  
[www.humana-military.com](http://www.humana-military.com)

**West Region**  
1-888-TRIWEST (874-9378)  
[www.triwest.com](http://www.triwest.com)

master's- and Ph.D.-level therapists. Available from one's home computer, it is accessible 24/7/365 for eligible Tricare beneficiaries. Best of all, it's non-reportable and confidential, offering support for life issues including relationship problems, self-esteem, and stress management. Clinical support is also available as needed via videoconference or face-to-face from a Tricare network behavioral health provider.

These resources didn't exist for CPT Brown during her time serving in the Army. But now that they are available and accessible, she highly encourages women to use them if the need arises. "I think it says a lot that the military has done so much in such a short amount of time," CPT Brown said. "That's a big step in five years." ●