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House Committee on Veterans' Affairs

Claims Summit 2010

Statement of Rachel Natelson Service Women's Action Network

Mr. Chairman and Members of the Committee:

Thank you for the opportunity to present the views of the Service Women's Action Network (SWAN) concerning the challenges confronting women claimants.

Women veterans face particular challenges in obtaining disability compensation from the VA. To begin, studies indicate an institutional bias in favor of claimants with combat experience, an advantage that disproportionately favors men. Not only do claim processors fail to understand the degree to which women are effectively, if not nominally, serving in combat positions, but they also fail to appreciate the extent to which servicemembers in non-combat occupations and support roles are exposed to traumatic events.

Among the most pervasive stressors experienced by military women are incidents of sexual assault and harassment. By some accounts, nearly a third of female veterans report episodes of sexual assault during military service, while 71 to 90 percent report experiences of sexual harassment. These experiences are closely associated with PTSD in a variety of studies; in fact, military sexual assault is a stronger predictor of PTSD among women veterans than combat history.¹ Likewise, studies indicate that sexual harassment causes the same rates of PTSD in women as combat does in men.² In spite of this correlation, the VA grants benefits to a significantly smaller percentage of female than male PTSD claimants.³

¹ Maureen Murdoch, et al., "Gender Differences in Service Connection for PTSD," *Medical Care* 41, no. 8 (2003), 950-961.

² Maureen Murdoch, et al., "The Association between In-Service Sexual Harassment and Posttraumatic Stress Disorder among Compensation-Seeking Veterans," *Military Medicine* 171, no. 2 (2006), 166-173.

³ Committee on Veterans' Compensation for Posttraumatic Stress Disorder, Institute of Medicine and National Research Council of the National Academies, *PTSD Compensation and Military Service* (Washington DC: The National Academies Press, 2007), p. 192.

Recommendations

SWAN supports the VA's proposed rule to extend a presumption of service-connection to veterans exposed to trauma during deployment. However, since statistics suggest that servicewomen are more likely to be sexually assaulted outside of combat zones than during deployment, we would propose extending such a presumption to all veterans who suffer from a traumatic event while in service. According to the Pentagon's 2008 Sexual Assault Prevention and Response Office (SAPRO) report, fewer than 10% of the assault incidents reported last year occurred in combat zones.⁴

Currently, PTSD claims based on in-service personal assault must be supported not only by a valid medical diagnosis but also by such supplementary evidence as law enforcement or rape crisis center records and statements from friends and family. In the absence of formal records, claimants may also point to such behavioral developments as transfer requests, deterioration in work performance, or episodes of depression and anxiety. Given the imperfect nature of these behavioral cues, not to mention the obstacles to documenting in-service assault claims, the VA should extend to MST claimants the same evidentiary relief it proposes to afford to veterans who experienced trauma during deployment.

In the meantime, to ensure that records of harassment and assault complaints may be accessed in support of VA claims, the military should incorporate EO complaint files into the proposed Joint Virtual Lifetime Electronic Record. While such a step would not address the issue of under-reporting, it would at least improve the accessibility of existing records.

To sensitize claim reviewers to the needs of assault and harassment victims, the VA should implement the recommendations of the Institute of Medicine Committee on Veterans' Compensation to collect gender-specific data on MST claim decisions, develop additional MST-related reference materials for raters, and incorporate training and testing on MST claims into its rater certification program.⁵ The agency should also establish a presumption of soundness for the diagnoses of its own treating physicians and counselors; claim reviewers should not have the authority to second-guess evaluations by agency medical professionals or to discount VA treatment records in favor of one-time Compensation and Pension (C&P) exam results.

Finally, SWAN proposes revising the current VA work credit system, which paradoxically prolongs the adjudication process by privileging speed over accuracy in initial claim determinations. By measuring employee productivity strictly by number of cases processed, the VA offers reviewers an incentive to take any shortcut necessary to clear their desks of pending claims. The resulting combination of too much work and too little time ultimately gives rise to premature—and inaccurate—determinations, setting in motion years of appeals. In order to encourage accurate determinations at the Regional Office level and remove the incentive to recycle claims, the agency should award work credit only after the final stage of review.

Thank you very much for your attention. I would be happy to answer any questions that the Committee might have.

⁴ U.S. Department of Defense, *FY08 Report on Sexual Assault in the Military*, p. 41.

⁵ *PTSD Compensation and Military Service*, p. 194.