Purpose: Women Veterans tend to have a higher mental health morbidity than both civilian women and Veteran men, with a lifetime depression rate of 29% for Veteran women, compared to 16% of Veteran men, and a post-traumatic stress disorder (PTSD) rate of 21%, compared to 5% of civilian women. Mental health care for women Veterans is a critical unmet need that must be met. The literature describes a host of factors and experiences associated with women Veterans’ need for mental health care. Traumatic experiences, notably the types of trauma women Veterans uniquely experience, such as military sexual trauma (MST), make women more likely to be vulnerable to PTSD and co-morbid depression, more likely to experience a longer duration of PTSD symptoms, and in general, have a more pronounced reaction to trauma.

Women who serve in the military are also increasingly exposed to both the physical and psychological trauma of combat and its aftermath, particularly as women serve in broader military roles and as the nature of warfare changes, with a lack of a demarcated “front line”. Furthermore, women Veterans endorse more trauma outside of the military, compared to their civilian women and Veteran male counterparts. The literature suggests almost all female Veterans experience a traumatic event at some point in their lives, with estimates as high as 93%.

While a robust body of research describes the prevalence of and predisposing factors for women Veterans’ mental health conditions, less is known about how women Veterans experience these events, and how these events shape their identity. Understanding women Veterans’ identity is crucial to understanding their mental health needs and mental health decision making. Therefore, the purpose of this study is to assess and understand the experiences and identities of women Veterans before, during, and after military service that ultimately led to the use of mental health outpatient services.

Methods: This study used Grounded Theory qualitative research methods to characterize and describe how women veterans (WVs) use mental health outpatient services to reconstruct and reclaim their identity and sense of self when confronting multiple forms of trauma throughout the lifespan, including combat trauma, intimate partner violence (IPV), and military sexual trauma (MST). Community dwelling women Veterans were recruitment from online and in-person recruitment from August 2015 to March 2016. Participants eligible for this study were women ages 21-65 who served in
the regular armed forces, and attended at least one mental health outpatient visit in VA services or community-based services within the 12 months of recruitment.

**Results:** Twelve women Veterans revealed meaningful stories on their experiences of trauma and their use of mental health services. From the in-depth interviews, the process of reconstructing, reclaiming identity and sense of self was revealed. This includes identifying and recognizing trauma, defining transitions as changes in the structure of the environment, understanding changes in the roles and notions of gender based, and military based identities, and actively seeking out the stability inherent within structures such as the military. A broader Grounded Theory Process model emerged, linking the categories of Trauma, Transitions, Identity and Structure.

**Conclusion:** The findings of this study, combined with the pertinent literature indicate the pervasive presence of traumatizing events throughout the life of women Veterans, the mental health burden these women experience, and the importance and centrality of their military experience in molding their identity and sense of self. Despite the male-centered military and Veteran culture, women Veterans are joining and transitioning out of the military more than any other time in history. Their presence demands recognition of their experiences, and treatment that respects their backgrounds, service history, gender, and mental health needs. The development of the major concepts of “Trauma”, “Transitions”, “Identity”, and “Structure” offer another aspect of understanding the social worlds and significant interactions that shape the lives of women Veterans. These concepts give voice to their powerful and impactful stories have been silenced or ignored, and lay the basis for further research, practice, and policy change that can positively impact the lives of women Veterans and their families.

**Title:**
Clearing Away Past Wreckage: A Constructivist Grounded Theory of Women Veterans' Mental Health Service Use

**Keywords:**
Mental Health, Qualitative Research and Women Veterans

**References:**

**Abstract Summary:**
Women veterans are the largest veteran population yet have significant mental health disparities. By using constructivist grounded theory methods, women Veterans revealed meaningful stories on their experiences that led to mental health outpatient service use.

**Content Outline:**
*Clearing Away Past Wreckage: A Constructivist Grounded Theory of women Veterans' Mental Health Service Use*

1. Introduction
   1. Description of Mental Health Disparities among women Veterans and use of mental health services
2. Description of contributing events to disparity: types of trauma and predisposing factors
3. Dearth of literature on women Veterans experiences of traumatic events that led to mental health service use
4. **Statement of study purpose:** The purpose of this study is to assess and understand the experiences and identities of women Veterans before, during, and after military service that ultimately led to the use of mental health outpatient services

2. Methods
   1. Description of Study Design and Setting
      1. Protection of human subjects
   2. Sample description
   3. Recruitment and Data Collection
      1. Eligibility criteria
   4. Data Analysis
      1. Constructivist Grounded Theory methodology
      1. Coding methods
      2. Analytical techniques
   3. Study Findings
      1. Identity development process: Four major categories that represented women Veterans’ experiences surrounding mental health service use: (1) Identity (2) Structure, (3) Transitions, and (4) Trauma.
         1. Shifting Identify
            ▪ In-vivo quotes
         2. Pursuing Structure
            ▪ In-vivo quotes
         3. Managing Transitions
            ▪ In-vivo quotes
      4. Surviving Trauma
         ▪ In-vivo quotes
   2. Renegotiating Trauma: Significant process to reframe trauma
      1. Traumatic event
      2. Instability
3. Tipping Point
   ▪ Realization of need for services for the woman Veteran
4. Re-establishing identity with Mental health treatment
5. Regaining stability and moving forward
6. Re-establishing identify and owning experiences
4. Discussion
   1. Contributions to the body of knowledge
   2. Comparisons of what’s known in the literature around women and trauma
   2. Implications
      1. For practice
      2. For policy

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