

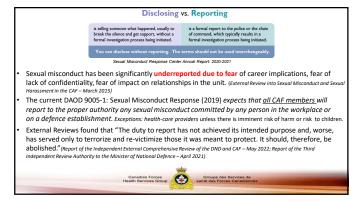
Disclosure I have no conflict of interest to report. Canadian Forces Health Service Group des Service de

Definitions Sexual Misconduct: Conduct of a sexual nature that causes or could cause harm to others, and that the person knew or ought reasonably to have known could cause harm, including actions or words that devalue others on the basis of their sex, sexuality, sexual orientation, gender identity or expression; jokes of a sexual nature, sexual remarks, advances of a sexual nature or verbal abuse of a sexual nature in the workplace, harassment of a sexual nature, including initiation rites of a sexual reviewing, accessing, distributing or displaying sexually explicit material in the workplace; and any Criminal Code offence of a sexual nature such as: sexual assault, voyeurism, publications, etc. (DAOD 9005-1 Sexual Misconduct Response) Military Sexual Trauma (MST): Refers to Sexual Assault or Sexual Harassment experienced during military service. (Veteran Affairs) - Sexual Assault: any touching of a sexual nature without consent - Sexual Harassment: includes the use of explicit or implicit sexual overtones, including the unwelcome and inappropriate promises of rewards in exchange for sexual favors Consider Forces Health Bervices Groupe des Bervices de Marchanses

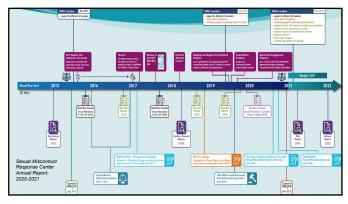
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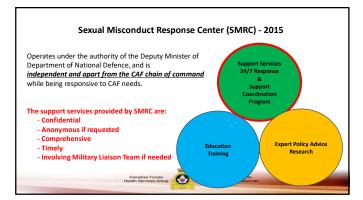
Impact of MST MST is an experience, not a diagnosis Traumatic impact on the lives and careers of the victims + Corrosive effect on discipline and morale Not everyone who experiences MST develops long-term health consequences but MST increases the likelihood of mental and physical health problems and readjustment challenges. Unique aspects of the military context affect the trajectory of recovery from MST. Interpersonal trauma suffered from a person-in-trust and also may be ongoing over time. "How this could be tolerated, ignored, not addressed/mis-handled?" Sense of Personal and Institutional Betrayal

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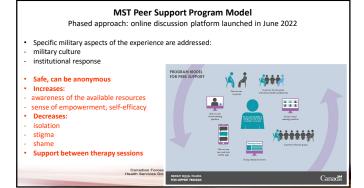


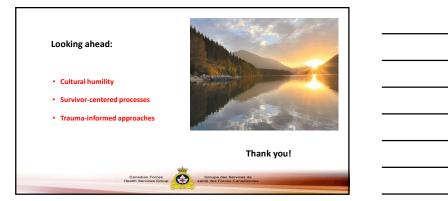










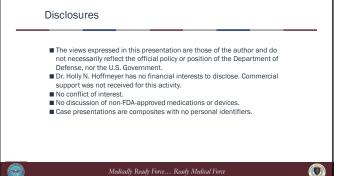




Integrating Gender-Sensitive Behavioral Health Care into Clinical Practice

Holly N. Hoffmeyer, Ph.D. February 1, 2023

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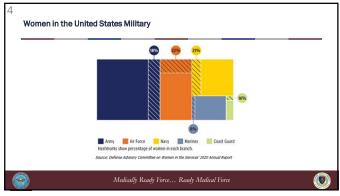
Agenda

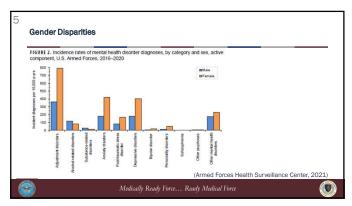
- Gender Disparities related to Behavioral Health
- Gender Sensitive Care in the Military Context
- VA/DoD Women's Mental Health Mini-Residency

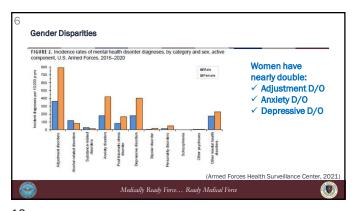


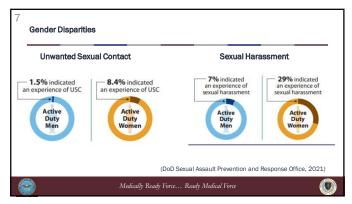
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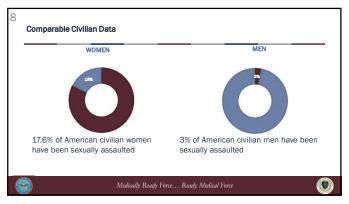


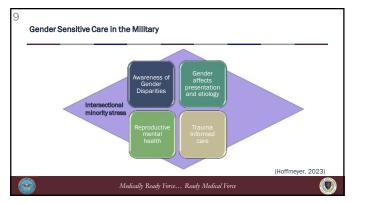


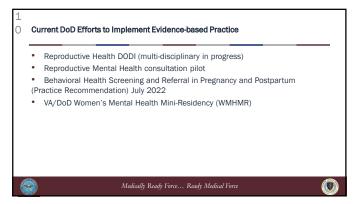


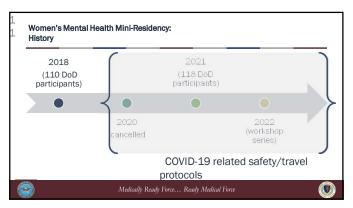














1 3 FY 2022 WMH Workshop Attendance Data			
Workshop Topic	1 st session	2 nd session	Total #
Impacts of Race-Based Stress	108	73	181
Inclusive Approaches to Sexual Assault Tx	44	24	68
Eating Disorders and Disordered Eating (VA)	39	35	74
Emotion Regulation (VA)	42	38	80
Perinatal Mental Health (VA)	18	38	56
Eating Disorders and Disordered Eating Bxs (DoD	59	49	108
Women at Midlife- Menopause (VA)	30	35	65
Transgender Affirming Care (DoD)	61	24	85
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FY 2022 VA/DOD Women's Mental Health Mini-Residency

- Outcome Survey results showed:
- At least 79% of DoD participants in all sessions endorsed "agree" or "strongly agree" to: I will be able to apply the knowledge and skills learned to improve my job performance
- Feedback was overwhelmingly positive from the workshops.
- "Sessions were extremely informative and perfectly targeted to military populations."
- "One area that I gained a lot of knowledge about was the generational impact of racebased stress, racism and trauma."
- "It gave ideas about inter-professional collaborative tactics, and encouraged folks to standup with colleagues for trans affirming care for clients"
- "This training was phenomenall The faculty were extremely knowledgeable, and they did a great job of keeping the training engaging and on pace to facilitate learning."



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2023 DoD/VA Women's Mental Health Mini-Residency

- Planning is on track for in-person 3 day event in June 2023
- Tentatively planned for greater Seattle area
- DoD has invited numerous SMEs to present breakout and didactic sessions.
- 200 participant capacity (100 VA and 100 DoD participants)
- Poster session sharing best practices



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References American Psychological Association, APA Task Force on Race and Ethnicity Guidelines in Psychology, (2019). Race and Ethnicity Guidelines in Psychology. Promoting Responsiveness and Equity. Retrieved from http://www.apa.org/about/policy/race-and-ethnicity-in-psychology.pdf Armed Forces Health Surveillance Center (AFHSC, (2021), Update: Mental Health Disorders and Mental Health Problems, Active Component, US Armed Forces, 2016-2020, MSMR, 28(8), 2-9. Defense Advisory Committee on Women in the Services (2020), 2020 Annual Report. Retrieved from DACOWITS, 2020 Annual Report WEB.pdf (defense, 80) Sexual Assault Prevention and Response Office, (2021). Department of Defense Annual Report on Sexual Assault in the Military Fiscal Year 2021. Retrieved from Becoms, I SAPR

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Improving cultural competence https://store.samhsa.gov/product/TIP-59-Improving-Cultural-Competence/SMA15-4849 Improving Cultural Competency for Behavioral Health Professionals https://thickulturalhealth.hhs.gov/education/behavioral-health Training resources for work with LGBT community https://www.samhsa.gov/behavioral-health-equity/bbt/curricula Behavioral Health Equity for Black and African-Americans https://www.samhsa.gov/behavioral-health-equity/black-african-american Behavioral Health Equity for Latinas https://www.samhsa.gov/behavioral-health-equity/hispanic-latino Behavioral Health Equity Asian American, Native Hawaiian, and Pacific Islander (AANHPI) https://www.samhsa.gov/behavioral-health-equity/lanhpi Behavioral Health Equity In LGBT https://www.samhsa.gov/behavioral-health-equity/lgbt Work with American Indians and Native Alaskans https://store.samhsa.gov/product/American-Indian-and-Alaska-Native-Culture-Card/sma08-4354



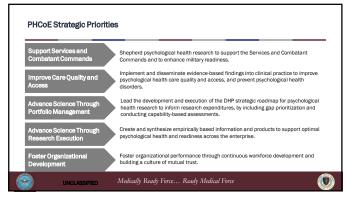
The views expressed in this presentation are those of the author and do not necessarily reflect the official policy or position of the Department of Defense, nor the U.S. Government There is no financial interest to disclose; commercial support was not received for this activity There is no conflict of interest and there is no discussion of non-FDA-approved medications or devices

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Mission Improve the lives of our nation's service members, veterans, and their families by advancing excellence in military psychological health (PH) care research Vision Be the trusted source and partner to facilitate evidence-based research and clinical practices across the continuum of care to enhance the psychological health of the military community Medically Ready Forc... Ready Medical Force



Context: Last Decade of WMH Research 2010 VA/DoD Integrated Mental Health Strategies #28: mental health needs for female military and veterans (women were approximately 14% of DoD force) Report to Congress on PTSD, identified need for more research to better understand mental health needs of minority service members, to include females IMHS #28 Work Group (2010 to 2016) tasked to study research needs, identify gaps Separate portfolio for women's mental health in 2010, but then re-distributed/absorbed into other portfolios 2020 began Increased emphasis from Secretary of Defense and Secretary of VA to better understand needs of female service members and veterans, to include mental health needs 2021: Women comprise 14% of DoD enlisted force; 15.7% of officer force; a fairly stable percentage of the total force over the last decade

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Summary literature review (2011) for research gap; updated (2018) summary literature review in 2018 identified as research priorities in studying gender differences in: Screening and prevention Anxiety Depression Psychotic disorders SUD/AUD Sulcide Pregnancy/postpartum Treatment preferences Both reviews were used to inform DHP research prioritization and funding: In PH portfolio in 2018, there were two DHP studies funded with solely female population; ten studies who included females in population and could conduct post hoc analysis by gender. In PH portfolio in 2022, there are 16 studies with female only populations; an additional eight studies examining gender differences

PHCoE Efforts

- PHCoE Sponsored FFRDC Reports
- Wong, E. C. The Behavioral Health of Minority Active Duty Service Members
- Newberry, S. Gender Differences in Response to Alcohol Use Disorder Treatment
- Jaycox, L.H. Gender Differences in Health Among U.S. Service Members
- PHCoE Publications/Posters
- Kelber, M. Women in Combat: The effects of combat and gender on the incidence and persistence of posttraumatic stress disorder or diagnosis
- Mental Health and Substance Use Disorder Needs of Female Service Members and Veterans: A Literature Review
- Quasten, R. Secret Stories The Impact of Miscarriage and Abortion on Warfighter Readiness
- McGraw, K. Gender differences among military combatants: does social support, ostracism, and pain perception influence psychological health?



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DoD DHP Funded WMH Studies

- Zlotnick, C. Addressing the Health Concerns of VA Women with Sexual Trauma
- Ramin, E. Association of Posttraumatic Stress Disorder and Heart Disease in Women Veterans: Examining Risk Factors and Effects of Pharmacotherapy on Clinical Outcomes
- Marmar, C. Biomarkers for PTSD in Female Iraq and Afghanistan Veterans
 LeardMann, C. Combat Deployment Is Associated with Sexual Harassment or Sexual Assault
- LeardMann, C. Combat Deployment Is Associated with Sexual Harassment or Sexual Assaulin a Large, Female Military Cohort: A Project from the Millennium Cohort Program
 LeardMann, C. Deployment and Reproductive Health of Servicewomen: A Project from the
- LeardMann, C. Deployment and Reproductive Health of Servicewomen: A Project from the Millennium Cohort Program
- Aclerno, R. Do You Really Expect Me to Get MST Care in a VA Where Everyone Is Male?
- Innovative Delivery of Evidence-Based Psychotherapy to Women with Military Sexual Trauma

 Riley, J. EAAA at USAFA: Intervention with the Fourth Degree Classes of Cadets



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DoD DHP Funded WMH Studies

- Kees, M. HomeFront Strong: Building Resiliency in Military Families
- Hawkins, S. How Maternity Leave Policies Impact Service Members' Leave Use and Postpartum Health Outcomes (Examining Maternity Leave for Mothers)
- Chen, C. Increased Risk of Heart Disease After Post-Traumatic Stress Disorder in Women: Role of Gonadal Hormones and Potential Preventive Interventions
- Jha, A. Investigating Resilience Training in Military Spouses
 Nguyen, S. is Military Deployment a Risk Factor for Maternal Depression? : A Project from
- Nguyen, S. Is Military Deployment a Risk Factor for Maternal Depression?: A Project from the Millennium Cohort Program
- MacDermid, S. Long-term consequences of mothers and fathers wartime deployments
 Aten, K. Managing Participation and Control of Online Workplace Communities
- Yuan, T. M-O-M-S Program Evaluation
- Millegan, J. Recent Sexual Trauma and Adverse Health and Occupational Outcomes Among U.S. Service Women: A Project from the Millennium Cohort Program



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Scaglione, N. Reducing Sexual Assault at the U.S. Air Force Academy: Adaptation, Implementation, and Evaluation of the Sexual Communication and Consent Program Inslicht, S. Sex Differences in Stress-Related Cardiometabolic Risk in PTSD Chartoff, E. Sex Differences in the Ability to Predict and Treat Opiate Abuse LeardMann, C. Sexual health difficulties among service women: the influence of posttraumatic stress disorder: A Project from the Millennium Cohort Program Brock, M. Sleep Disorders in Military Women: Identifying Casual Factors and the Impact of Treatment on Psychological Health and Resilience Morland, L. Telemental Health and Cognitive Processing Therapy for Female Combat Veterans with Military-Related PTSD Alkins, D. Using Propranolol to Block Memory Reconsolidation in Female Veterans with PTSD Disia, R. Women With Amputation: The Unique Needs of an Underserved Population

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Strategic Plan for investments in DHP funded PH research: Assess, protect, sustain, optimize psychological health Identify capabilities and gaps in funded research Prioritize funding based on input from subject matter experts and senior leaders across DoD and key federal partners Continue to fund and translate in alignment with priorities from strategic plan Malially Ready Force... Ready Madical Force

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Conclusion

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