

## The American Legion Guide

# Women Veterans

## Identifying Risks, Services, and Prevention

*“From the storm lashed decks of the Mayflower...to the present hour; women has stood like a rock for the welfare and the glory of the history of the country, and one might well add...unwritten, unrewarded, and almost unrecognized.”*

Clara Barton, February 1911

### Women in the Military

American Women have been great patriots, warriors and healers for this Nation’s military efforts from the Revolution to those in uniform today. Images of Molly Pitcher loading a cannon and the quill of the slave Phillis Wheatley are part of American history, just as the Yomenette of WWI, WWII Women’s Army Corps (WACS), the Vietnam nurse, and today’s female pilots. American Women have answered the call to serve with the same honor and integrity as their male counterparts, but often do not identify themselves as veterans. However, these women *are* veterans too.

According to the VA Center for Women Veterans, there are approximately 1.2 million women veterans in America today, and they make up approximately 15 percent of the active duty forces. This number is expected to grow upwards of 20-25% in the new millennium. In a VA study on the health status of women veterans, Women using the VA were younger than the men (52 vs. 62 years of age), better educated, and less likely to be married.

In recent years, in part due to the public awareness raised through the Vietnam Women’s’ Memorial and the Women In Military Service For America (WIMSA) Memorial, women veterans are getting the recognition and attention they deserve. For too long, women were allowed to think that they were not veterans. If asked if she was a veteran, a woman would say, “No.” But, if asked if she had ever served in the armed forces, she would say, “Yes.” So, very often women were not properly identified as veterans, and were overlooked for benefits and services. The message to female veterans is getting out, but there is still much to be done in getting these veterans the services and treatment they need and deserve.

### Transitioning from Active Duty

There are many reasons why women choose to join the military. Most join for the educational and health care benefits and career opportunities. Very often, young people join the military seeking a better quality of life. They leave home filled with the hope that the military will provide them with the atmosphere

they need to succeed. When these individuals separate from service or retire, they may lose the support, direction, and discipline the military provided. When they transition, it is often at the place of their last assignment, where they do not have the social or family supports they had before entering the military or while on active duty.

Many women, like their male counterparts, make the transition from active service back into their communities without faltering. The experiences they had while in the military go a long way to assist them in their careers and life goals as an advantage. However, for other men and women the transition is not as easy depending upon their experiences and community support systems. Although most people leave active duty feeling good about the decision to “get out,” transitioning off of active duty can be a difficult time. Women veterans face unique challenges and conditions once they transition from active duty back into the community.

There are many unforeseen challenges when leaving active duty. It is a major life event that requires planning. Retiring or transitioning can be a very exciting time, but if not properly planned can lead to complicated obstacles and difficulties in coping. The American Legion recommends that women veterans consider the following issues and resources.

#### **I. Women Veterans’ Benefits Issues:**

Women veterans are entitled to the same VA and DoD benefits as their male counterparts based on their service eligibility. Women veterans can file a claim with the VA for pension or compensation, as well as home loan guaranties and educational benefits. Any veteran who needs VA assistance should contact an American Legion Department Service officer in their state to file a claim. There are several benefits issues women veterans may need to consider as they transition from active duty, or if they seek VA benefits at a later date.

- **Compensation and Pension**

Any veteran with an other than dishonorable discharge who becomes injured or ill while on active duty can file a claim for VA monetary compensation. VA rates service-connected disabilities from zero to 100 percent and is paid monthly. Dependents can be included in the monthly allotment. These benefits are non-taxable.

- **Child-care**

Without DoD medicine or Tricare, providing health care for children becomes a primary concern for parents. When separating from active duty, it maybe best to enroll in Tricare’s family plan for \$460.00 unless a job with benefits is already available. VA can only care for veterans, and is not currently authorized to care for dependent children (or spouses) of veterans.

- **Homelessness/Housing**

Among the homeless population in America today, approximately a third are veterans. In general, women are 15 percent of the homeless population. There are also more families being reported as homeless. Women veterans can be at risk for homelessness because of the lack of support they may encounter as they transition from active duty. Women are more likely to be primary care providers to children, and when they have trouble securing housing, not only are they at risk for homelessness, but so are their children. Women seeking shelter from abusive relationships are also at risk for becoming homeless. There are VA Home Loan Programs and Residential Treatment Programs that can assist veterans with their housing needs. (See section on VA Home Loan Guaranties and Psychosocial Rehabilitation.)

When buying a home, it is important for veterans to check on their state and county property tax laws, since in some states, disabled veterans and their surviving spouses are exempt from property tax.

- **Employment**

For all veterans who serve in a Military Occupational Specialty (MOS) that does not translate into the civilian marketplace, the ability to find an appropriate job can become difficult. Women who have served often face the difficulties of finding a job that matches the pay they had while on active duty. Data on salaries shows disparity still exists in the job market between pay for men and women. Women must consider their earning potential in the private sector as they leave active duty.

On the other hand, military service and training can go a long way in preparing a woman for the job market, and can be impressive to prospective employers and supervisors. There are 105 professions that the military trains in that do convert to a civilian occupation. Therefore, women should always include their military service on their resume, (avoiding military jargon) and in filling out job applications.

The Department of Labor offers job-search assistance that is specialized for veterans. VA operates a Vocational Rehabilitation program for disabled veterans who want to return to the workplace. Federal civil service jobs will give “veterans’ preference points” to honorably discharged veterans (grades Major and below) who have campaign medals or awards can be given a five point preference for hiring. Veterans who are service-connected at 30 percent or greater can be rated with a 10 point hiring preference. In some states, veterans’ preference points are granted for state jobs, but it varies between the states. Women veterans should explore these options when seeking employment.

***Special Note:***

If a veteran was an Army medic or Navy Corpsman, she can use military training as a qualification for Emergency Medical Technician (EMT) employment. Military training records, a DD2586 file can be used to get an EMT certificate.

**Don't forget to keep copies of your DD214 in a safe place!**

- **Education**

There are similar obstacles to finding a good job, as there are difficulties in obtaining the education and training necessary to get a good job. Often military training does not correlate to the requirements of a job in the private sector. So, even though a veteran may have performed the same job function while in the service, they are not qualified to perform that job in the civilian market. They may need to be re-trained or credentialed to meet industry, state, or federal standards that may be different from DoD standards.

However, military training, in some cases, can also be used to waive credit requirements with some universities or vocational schools. Proper documentation from the military will be required. Most schools have a veteran counselor who can offer guidance on these issues. An appointment should be made with one of these counselors before enrolling in any courses.

VA offers a variety of educational benefits depending upon when a veteran was on active duty. Depending on dates of service, veterans can participate in the Montgomery GI Bill, Vietnam Era GI Bill, or the Veterans' Educational Assistance Program. Contact an American Legion Department Service Officer for more information on VA educational benefits and eligibility.

- **Incarceration**

According to the US Department of Justice (DOJ), in 1998, there were 84,427 women sentenced to state or federal prisons. Since 1990, the number of women incarcerated has almost doubled. In a 2000 DoJ report, the number of incarcerated veterans was about 225,700. The number of female veterans is about 1 percent of the total incarcerated veteran population.

Substance abuse and a history of violence place many women at risk for incarceration because the risks they take may also be illegal. Women tend to commit crimes (take risks) related to their survival. They are trying to cope, and often trying to provide for themselves and their children. Women, who have been victimized in the past, are at risk for prostitution and other crimes to satisfy a partner (i.e. selling drugs, check forgery, robbery.)

Incarcerated veterans or their dependents may apply for the same compensation, Dependency and Indemnity Compensation (DIC), and pension benefits. However, there are restrictions if a veteran is incarcerated. If a veteran is convicted of a felony then she can generally only collect ten percent or less.

Incarcerated dependents receiving DIC can only collect half the amount paid to a veteran receiving compensation for a ten percent rating.

Disabled veterans collecting VA compensation, who are incarcerated may not receive the same VA benefits as they did prior to being incarcerated. The veteran's dependents, however, may receive a portion of such benefits. If a veteran's family can show financial need then they may be able to collect an apportionment of the veterans benefit. An American Legion Service Officer can assist a family in filing a claim.

There is a 60-day grace period after a veteran is incarcerated when a veteran or their dependents can still collect full payments. Failure to notify VA of a veteran's incarceration will cause the loss of all financial benefits until any overpayment is recovered.

Once a veteran is released from a correctional facility, she should notify VA since she can resume collecting previous benefits.

80 percent of women veterans involved with the criminal justice system have children, even if they are the non-custodial parent. Efforts to return these women back into their communities as healthy productive members must include planning for their children.

## **II. Women Veterans' Health Issues:**

Once discharged from the military, veterans lose their health care coverage, but can apply to VA. However, since women are often the primary caregivers of their children, they may need to seek other health care coverage that includes children. There are several important health issues that women veterans should be aware of and have checked periodically. The following medical conditions should be of major concerns for all women in America and veterans in particular.

- **Sexism and Sexual Harassment**

Sexual harassment is defined as unwanted, offensive, and uses coercion for sexual attention, and is made job-related. The harassment is primarily verbal, but can include some touching. In a 1996 study conducted by the Department of Defense (DoD), 64 percent of the women on active duty experienced some form of sexual harassment within a 12-month time period. In a various VA studies, 55 to 90 percent of women veterans reported experiencing sexual harassment while on active duty. The unfortunate reality is that women face sexist attitudes and harassment in our society especially when competing for positions and resource that have been traditionally seen as male dominated professions. Women in the military have had to deal with a dominant male culture while on active duty, and sometimes face sexist practices and even harassment. Many women leave the military prematurely

when they feel they are not being treated fairly by their male counterparts or by the culture of the armed forces. This treatment causes undo stress for women that can lead to emotional and physical health problems, such as depression anxiety, sleep difficulties, headaches, and, sexual dysfunction, and stomach problems. VA offers a variety of mental health treatment programs, which can help women veterans overcome the stress caused by sexual harassment.

- **Sexual Trauma**

In studies conducted by VA, approximately 13-20 percent of the women veterans reported being assaulted or raped while on active duty. Some women reported multiple attacks. Sexual assault is defined as unwanted sexual contact (not limited to penetration) with the threat, or use of force.

In a male dominated culture, women remain under-valued and sometimes unwanted by their commands, which leads to an atmosphere where abuses and assaults can occur. In spite of the fact that DoD has attempted to improve its record on women, many female veterans are still reporting being assaulted. In a 1996 study, 4 percent of the active duty women reported a rape or an attempted rape. Eight percent of the women who served in the Gulf War reported being raped. The men they serve with or under their command often attack women. Since rape is not a crime of passion, but power, the women are usually younger and have lesser rank causing most of them to not want to report the crime. There are many other complicating factors effecting military women, who have been raped, which differ from other women. Military women are faced with issues of betrayal, role identification (Soldier/Victim) and loyalty to their service after being assaulted. All too often, when they do report the crime, they are the ones who are medically boarded or given bad discharges from the military, thereby effecting their careers, financial stability, and their future. The American Legion Department Service Officer can assist women veterans with other than honorable discharges who want to try to upgrade those discharges.

These traumatic experiences can lead to the development of **Post-traumatic Stress Disorder (PTSD)**. Symptoms of PTSD include:

- nightmares,
- flashbacks,
- Intrusive thoughts,
- sleep disturbances,
- hypervigilance,
- memory impairment,
- depression,
- anger,
- numbing,
- guilt,
- shame,
- foreshortened sense of future, and

- isolation.

VA operates unique programs designed to meet the needs of women veterans who were raped or sexually assaulted. A Women Veterans Coordinator can make a referral to a local treatment program. There are inpatient and outpatient services available. There are four stress disorder treatment teams, and a women veterans' division at the VA National Center for Post-Traumatic Stress Disorder in Boston, Massachusetts.

Women who have been raped may also suffer from chronic pelvic pain and stomach problems, low self-esteem, sleep difficulties, eating disorders, hypertension, respiratory problems, apprehension to becoming pregnant, sexual dysfunction and other relationship problems. Research has shown that women who have been victimized are more likely to experience abuse or maltreatment again in their lives.

- **Domestic Violence**

As for any woman, the problems of domestic violence are paramount, and safety is the primary issue. For women who have been in the military, the isolation that they may have experienced in changing stations, or being in an unknown community may have heightened the potential to be in an abusive relationships. Women who have been previously abused are at greater risk to be harmed by a partner. Domestic violence, or rape, like any other assaults on women is about power and control, not love.

Military women are reluctant to report being assaulted by their partner because of the isolation, lack of social supports, and fear that reporting the attack will harm their careers. However, the Department of Defense (DOD) operates a **Family Advocacy Program (FAP)**, and active duty women should **report the crime** to them.

Women veterans should not feel trapped in an abusive relationship. There is help available. They should contact the Women Veterans' Coordinator at the local VA hospital for further assistance and guidance.

As with sexual harassment and trauma, domestic violence survivors are also prone to develop **PTSD** symptoms and other emotional and physical conditions, which can be treated by VA.

- **War Zone Stress**

More and more women are being exposed to war zone actions, humanitarian missions, peacekeeping forces, and disaster relief. Women in the military transport and treat the wounded, police dangerous areas and fly into hostile territory. They are not only at risk for personal assault, but face some of the same combat threats as their male counterparts. In

spite of the job satisfaction that comes with these missions, the risks are just as great for women as they are for the men in a war zone.

**Service Connection for Women Veterans Suffering from PTSD:**

Women veterans who have been in a war zone or disaster area, have survived sexual harassment, sexual assault, rape, domestic violence, stalking, or a hate crime while on active duty and have been diagnosed with PTSD or other related conditions, can file a VA claim for service-connection disability.

**Evidence that can be used to support a claim includes:**

- Military records and awards
- Private civilian records
- Treatment records for a physical injury for the assault, but not reported
- Civilian police reports
- Reports from Crisis Centers
- Testimonial statements from friends (civilian and military), family, co-workers, clergy
- Personal diary or journal
- Request for changes in military assignment
- Increase in sick call or leave slips
- Change in military performance evaluations
- Increased use of prescription and over-the-counter medications
- Substance abuse and/or other compulsive behavior
- Request for a pregnancy test
- Request for HIV test or counseling for sexually transmitted diseases
- Counseling statements in personnel file
- Breakup of marriage or relationship
- Reports to Child Protective Services (in cases of domestic violence)

**To file a claim: Contact An American Legion Department Service Officer in your state.**

• **Substance Abuse**

Alcohol and/or drugs become a coping mechanism when stress, depression and anxiety build. Women tend to become addicted to substances through the significant others in their lives. Individuals who grow up in an addictive environment are predisposed to becoming addicted themselves. In spite of new awareness inside of the military, it is still a culture that encourages drinking as a means of being a “team player.” In a male dominated culture, there is also the pressure to be “one of the guys,” and have a few drinks. Unfortunately, these

drinking episodes, which are seen as opportunities to enhance unit camaraderie can also lead to date violence and assault when things get out of control.

According to the Center on Women Veterans, Women veterans are less at risk for substance abuse disorders than their male counterparts. VA does have inpatient and outpatient substance abuse treatment programs that are available for women. There is a Women's Addictive Disorder Unit at the VA Medical Center in Cleveland, OH that any female veterans can be referred.

The DoD Tricare system offers 8 sessions a year for addiction counseling with a \$10 - \$25 co-payment.

- **Sexually Transmitted Diseases:**

Women who have been raped, have had unprotected sex, or are intravenous drug users are susceptible to being diagnosed with a Sexually Transmitted Disease (STD), Hepatitis, or HIV/AIDS. VA operates an HIV/AIDS program that can help female veterans manage and control their disease.

- **Environmental Health Hazards:**

Women who served in a combat zone (Vietnam or the Persian Gulf) may develop illnesses related to environmental exposures, such as Agent Orange. The VA has conducted specialized studies on Female Vietnam and Gulf War veterans and exposures, especially related to birth defects. Female veterans who fit into either of these categories should get an Agent Orange or Persian Gulf Registry exam at their local VA hospital.

- **Heart Disease:**

Heart Disease is the number one cause of death in American women today, but is the least discussed. One in two women or 44.4 percent will die of heart disease and stroke, compared with one in 27 who will die of breast cancer. This rate increases among African American women. 42 percent of women compared to 24 percent of men will die within a year of a heart attack. Post-menopausal women are more likely to have a heart attack. Heart – or cardiovascular disease develops when the blood vessels or arteries that supply blood to the heart and brain become clogged from a buildup of cells, fat and cholesterol, which can lead to a heart attack or stroke.

<b>RISK FACTORS FOR CARDIOVASCULAR DISEASE IN WOMEN VETERANS:</b>
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| <ul style="list-style-type: none"><li>• <b>Age</b> – advanced age increases risk.</li><li>• <b>Hereditary</b> – including genetics and race. African American women are more prone to severe hypertension.</li></ul> |
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- **Cigarette and tobacco smoke** – smokers have twice the risk for heart attack and death than non-smokers. Second-hand smoke is also a risk factor
- **High Blood Cholesterol Levels** – Increased cholesterol levels are influenced by age, gender, hereditary, and diet.
- **High Blood Pressure** – Causes the heart to work harder thereby weakening it over time this leads to stroke, heart attack or failure, or kidney failure. Risk increases in women who smoke, are overweight or have diabetes or elevated cholesterol levels.
- **Physical Inactivity** – Lack of exercise increases risk. Any physical activity done regularly can help lower risk.
- **Overweight** – Excess weight adds to the strain on the heart. It causes other diseases like diabetes. Being overweight by 10 or 20 pounds can make a difference in a woman's risk for heart disease.
- **Diabetes** – A diagnosis increases risk for heart disease and stroke. Once diagnosed it is critical to control and monitor.
- **Stress** – Women veterans experience a variety of stresses ranging from daily living stresses and traumatic stress brought on by rape, domestic violence or war zone experiences. (See section on PTSD.)

- **Cancers:**

Women should be aware of their family history for certain illnesses that can increase their risk. There are other risk factors that increase with age or lifestyle habits such as dietary, drinking and smoking. Women should discuss these risks with their health care provider, and seek additional information for these diseases.

The cancers that most often effect women **are breast, lung, colorectal, endometrial, and ovarian and cervical** cancer. Breast cancer is primary cause of cancer-related death among American women. Early diagnosis and treatment can save lives. The VA offers screening for all types of cancers, including mammography and Pap tests. All women should have an annual gynecological exam each year, including a **Pap test**. Women over age 40 should begin to get regular **mammograms** and yearly after the age of 50. Breast self-examination should be done monthly, so that any changes can be recognized early. (See breast self-examination guide.)

#### **BREAST CANCER SELF-EXAM GUIDE**

At the same time each month, check for any changes in the normal look or feel of your breasts. Look for a lump, hard knot, or skin that thickens or dimples. Report any changes to your doctor or nurse. Go for regular breast exams and Pap tests. Ask about a mammogram.

### **Check your breasts using these steps:**

**Lying down:** Place a pillow under your right shoulder. Put your right hand under your head. Check your entire breast area with the finger pads of your left hand. Use small circles and follow an up-and-down pattern. Use light, medium, and firm pressure over each area of your breast. Gently squeeze the nipple for any discharge. Repeat these steps on your left breast.

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**Before a mirror:** Check for any changes in the shape or look of your breasts. Note any skin or nipple changes such as dimpling or nipple discharge. Inspect your breasts in four steps: arms at side, arms overhead, hands on hips pressing firmly to flex chest muscles, and bending forward.

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**In the shower:** Raise your right arm. With soapy hands and fingers flat, check your right breast. Use the same small circles and up-and-down pattern described in "Lying Down." Repeat on your left breast.

Courtesy: The Susan G. Komen Breast Cancer Foundation

### **Services Available for Women Veterans:**

#### ***Veteran's Affairs (VA):***

Women veterans make up less than five percent of the VA population, but this number continues to rise. Currently, there are approximately 164,000 women users of VA as oppose to almost three million men. However VA is sensitive to this ratio, and there are several programs specifically designed to meet the needs of women veterans. In recent years, VA has tried to be more in tune to issues of privacy, pajamas, and services and equipment that women veterans need.

- **Psychosocial Rehabilitation Programs**

The VA's Psychosocial Rehabilitation (PSR) Programs consists of over 250 work based programs nationally that are made up of **Compensated Work Therapy (CWT)**, **Incentive Therapy (IT)**, **Therapeutic Printing Plants (TPP)**, and **Vocational Rehabilitation Therapy (VRT)**.

The **Residential Rehabilitation** components consist of 48 CWT/Transitional Residences (CWT/TR). Additional 875 **Psychosocial Residential Rehabilitation (PRRTP)** beds were established in FY 98. The mission of the

VA's Psychosocial Rehabilitation Programs is to provide a supportive, stable, structured program utilizing work based individualized rehabilitation treatment that will allow the veteran to strengthen vocational identity and maximizes her potential based on skills, abilities and rehabilitation needs. The program assists all veterans in improving the quality of their lives.

**Transitional Residence** enables individuals to function effectively at home, work, and community. Transitional Residence programs place special emphasis on meeting the special needs of women, and veterans with addiction, homelessness, and/or PTSD. Each veteran is referred by a physician for assistance in developing an individualized plan to return to work. As such, participants in the programs are considered employees of a company, but are also participants in a VA program. Veterans' earnings come directly from companies and government agencies. No government entitlements subsidize the veteran's earnings in CWT.

A variety of assessments are made, and some participants begin with a situational assessment in a workshop setting in which work is brought in from supporting companies. The next step is supported employment where veterans may work on a transitional basis at local companies, or for a federal agency, including VA. These supported employment sites provide an opportunity for veterans to learn new skills while under the direct supervision of the companies' management.

The **CWT** continues to grow as a result of the support local companies and government agencies provide. CWT resembles private sector rehabilitation in many ways: providing evaluation, work experience, and job placement activities via the use of sheltered workshop, and/or placement in work assignments.

It may also include participation in non-pay activities: job seeking skill seminars, vocational groups, etc.

**PRRTPs** served nearly 21,000 veterans in programs for Serious Mental Illness, PTSD, Addictive Disorders, and Homelessness. These residential programs function as alternatives to acute hospitalizations and enhance VA's continuum of psychiatric care. Since 1996, nearly 2,000 residential rehabilitation beds have been established, providing rehabilitative services to over 33,000 veterans.

Job placement services are performed by VA Vocational Counselors who operate local Job Banks and work closely with the local Department of Employment and Training DVOP's, and LVER's, Department of Labor and local skills training centers, veterans programs, state vocational rehabilitation agencies, and VA benefits. Psychosocial rehabilitation addresses such issues as returning veterans to community living, community housing options, transportation, money management, recreation, community resource utilization, family re-unification, and legal advocacy.

- **VA Women Veteran Residences**

In several areas, VA operates community-based domicillaries for post-discharge homeless female veterans. These residences operate as transitional housing for women who have been homeless or have had substance abuse or mental health problems. Currently, these houses do not take children.

- **Home Loan Guaranties**

Loan guaranties are made to servicemenbers, veterans, reservists and unremarried surviving spouses. VA Guaranties can be used to: purchase a home, condominium or trailer, build a home, repair, alter or improve a home, or refinance a loan for a primary residence. A VA loan guaranty will allow a veteran to borrow up to \$204,000 with no money down. A veteran can obtain a home loan guaranty certificate from a VA Regional Office or with assistance from an American Legion Department Service Officer.

- **VA Hospital Women Veterans Coordinators**

Each VA hospital has a representative responsible for coordinating the care of female veterans. It is their job to ensure that these veterans are receiving the proper care and necessary referrals.

- **VA Hospital Gynecological Services**

There are 130 women's clinics in the VA system, and eight Women Veterans' Comprehensive Health Care Centers. Women veterans can find out more about the services available to them locally by contacting their local VA hospital Women Veterans Coordinator.

VA Uniform Benefits Package covers osteoporosis screening and bone density treatment, menopausal care and hormone replacement therapy, infertility services, tubal ligation, birth control pills, maternity care, including labor and delivery (usually on a contract with a VA affiliated facility). VA does not cover abortion or new born care.

- **VA Center for Women Veterans**

In 1994, Congress passed Public Law 103-446 requiring VA to create the Center to oversee all of its programs that effected women with the Director reporting directly to the VA Secretary. The purpose of the Center is to ensure women veterans have access to VA benefits and services, and that VA is responsive to the specific needs of women. The Center conducts outreach and education, reviews policies and programs, coordinates women veteran services with county, state, and other federal providers, and monitors VA research relating to women. The Center provides information to women veterans through its Internet home page at <http://www.va.gov/womenvet/index.htm> or by phone at **202-273-6193**.

- **Advisory Committee on Women Veterans**

Established in 1983, by Public Law 98-160, Congress authorized the Committee to assess the benefits and health care needs of women veterans, review VA programs, make recommendations, and follow-up. The Committee convenes three times a year, and visits at least one VA facility to conduct a site visit. The Committee issues reports on the status of women veterans, which can be obtained by contacting the VA Center for Women Veterans.

### ***Department of Labor:***

There is a Women's Bureau within the Department of Labor (DOL) that can help women looking for jobs. In addition, there are **Disabled Veterans Outreach Program Specialists (DVOPS)** and **Local Veterans Employment Representatives (LEVR)** who can help veterans find jobs. Each local office of the Department of Labor should have a DVOP or LVER counselor. When applying for unemployment benefits, a women veteran should identify herself as a veteran.

### ***The American Legion:***

- **Membership**

Since its inception in 1919, women have always been eligible to join The American Legion, as long as they meet the timetable requirements. Female Legionnaires have participated in all of the Legion programs, and have held office and have chaired committees at the post, department, and national levels. The American Legion offers a variety of membership benefits, including Life Insurance, Health Care Supplemental Coverage, Prescription Discounts, Eye Care Plan, Travel discounts, Scholarships, and FNBO Bank financial options. The American Legion operates a **National Emergency Fund** for Legionnaires effected by a natural disaster, and a **Temporary Financial Assistance Program** for other types of family crisis that have resulted in financial hardship. Contact The American Legion Post nearest you listed in the telephone book to join.

#### **American Legion Eligibility Dates:**

August 2, 1990 –  
December 20, 1989 – January 31, 1990  
August 24, 1982 – July 31, 1984  
February 28, 1961 – May 7, 1975  
June 25, 1950 – January 31, 1955  
December 7, 1941 – December 31, 1946  
April 6, 1917 – November 11, 1918

- **Department Service Officers**

There are American Legion Department Service Officers (DSO) in each state who can assist in filing a claim for benefits or accessing VA health care that have been described in this guide. DSO's are specially trained to recognize and handle benefits issues, claims and discharge upgrades for women veterans. In

some areas, there are female DSO's. DSO's can be found listed on the Internet at <http://www.legion.org> or by calling **800-433-3318**.

- **Hire Quality**

The American Legion sponsors the Hire Quality Employment and Networking Services to specialize in helping veterans' transition from military service to new civilian careers. Hire Quality maintains a job database that matches a veteran's skills to the job description, screens candidates for potential employment, and arranges interviews. There is no charge for this service. Contact Hire Quality at **800-414-4733** or on the Internet at <http://www.hire-quality.com>.

- **Persian Gulf Task Force**

The American Legion operates a special unit that deals with the issues of gulf war veteran's claims and health care access. Temporary Financial Assistance (TFA) is also available through this program and is designed to help Gulf War veterans and their families in times of crisis or disability. For more information on the Persian Gulf Task Force or other environmental hazards, call **202-861-2700**.

- **The American Legion Auxiliary**

A female veteran can be a dual member of the Auxiliary based on her own membership in The American Legion. The membership of the Auxiliary is all female, and mirrors the structure of The American Legion. Most Legion Posts have a corresponding Auxiliary Unit attached to it. Auxiliary members are eligible for many of the same benefits as Legionnaires. There is an **Auxiliary Emergency Fund** for members that provides financial support in the event of a family crisis, and offers assistance to "**displaced homemakers**" who need job training because of divorce, illness, or death of a spouse. Contact an American Legion Post nearest you, listed in the telephone book, to join an Auxiliary Unit.

**Resources Listings:**

- Alcoholics Anonymous 202-966-9115
- Al-Anon 800-356-9996
- American Cancer Society 800-ACS-2345
- The American Heart Association 800-242-8721
- **The American Legion 800-433-3318**
- **The American Legion Auxiliary 317-955-3845**
- American Red Cross 800-301-3535
- Assoc. Traumatic Stress Specialists (ATSS) 803-781-0017
- Child Abuse Hotline 800-633-5155
- Cocaine Hotline 800-262-2463
- DOD – Family Advocacy Program 202-433-5032

- Domestic Violence Hotline 800-799-7233
- Drug Abuse Hotline 800-662-HELP
- Hire Quality 800-414-4733
- National Alliance for the Mentally  
III – Veterans Committee 800-461-5453
- National Alliance of Breast Cancer Organizations 800-719-9154
- National Org. of Victims Assistance 888-777-4443
- National Women’s Health Center, US Public  
Health Services, Dept. HHS 800-994-WOMAN
- Social Security 800-772-1213
- Susan Komen Breast Cancer Foundation 888-782-7607
- Tricare 888-887-4111
- VA (General Information) 800-827-1000
- VA Center for Women Veterans 202-273-6193
- VA Compensated Work Therapy 800-355-8262
- VA Mammography Help Line 888-492-7844
- VA Persian Gulf 800-PGW-VETS