Women in Combat: Framing the Issue

COL (ret) Elspeth Cameron Ritchie, US Army, MD, Chair of Psychiatry Medstar Washington Hospital Center
Elspeth.C.Ritchie@medstar.net
COL (ret) Ritchie INTRO

• Father and grandfathers in Army (WWI, WWII, Korea)
• Army Paid for medical school (GW, HPSP)
• Trained at Walter Reed 4 times
• Deployment and missions to Korea, Somalia, Iraq, Cuba
• Senior leadership positions in military medicine
• Now Chair of Psychiatry Medstar Washington Hospital Center
Recent Textbooks

- Combat and Operational Behavioral Health
- Forensic and Ethical Issues in Military Mental Health
- Women at War
- Intimacy post Injury
- PTSD and Related Disease in Combat Veterans
- Psychiatrists in Combat
- Gay Mental Health Providers
- Mental Health and Veterans
- Clinical Management of the Homeless Patient

- Next book: Decision Making Capacity
Women have been on the American battlegrounds for centuries. Left: Molly Pitcher took over her husband’s cannon in the Revolutionary War. Right: Statue of Deborah Sampson who fought under the alias of Deborah Sampson.
We Can Do It!
Framing the Issue

Revolutionary War: Molly Pitcher assumed her injured husband’s spot on the cannon; however, women continued to participated unofficially in each of our Nation’s early conflicts.

Turn of the Century: In 1901 women started serving officially on active duty in the US Army and 1909 in US navy.

WWI and WWII: Increasing numbers of women, primarily as nurses, secretarial and communications support.

1994 Direct Ground Combat Definition and Assignment Rule: Opened jobs except for in the direct ground combat elements.

Post 9/11: >300,000 women deployed to Iraq & Afghanistan for OEF/OIF.

2012: Some 355,904 female Service members comprise 16% of the total force.

2013: SecDef Panetta lifted the last remaining ban on women’s participation in combat.

2016: All military jobs open to female service members.
**All Combat Roles Now Open to Women, Defense**

By MATTHEW ROSENBERG and DAVE PHILIPPS  
DEC. 3, 2015

Defense Secretary Ashton B. Carter announced the decision to open all combat jobs in the United States military to women at a news conference on Thursday. By THE ASSOCIATED PRESS on December 3, 2015. Photo by Alex Wong/Getty Images. Watch in Times Video ➤

---

**Women in military finally getting respect**

By Gayle Tzemach Lemmon  
Updated 9:57 AM ET, Sat May 28, 2016

History of women in the U.S. military 01:26

www.cnn.com/2016/06/28/opinions/women-in-combat-opinion-lem
History of Research on Service Women’s Health

• 1994 start of the Defense Women’s Health Research Program (DWHRP), $40 million

• Disproved assumptions about female health & physiology esp. menstrual issues, G-force, amenorrhea

• DWHRP ended without building enduring infrastructure for research & policy in this area
Legacy of DWHRP

Areas for further investigation included:

• development of psychological support strategies for military families & dual service couples;
• solving the problems of high rates of musculoskeletal injuries among female service members;
• investigating the mechanisms of reproductive hazards; &
• fixing deficiencies in garrison & field care for gynecological health

**** ‘determining if neuropsychological response events occur with greater prevalence in women or have different clinical presentation’ persists as a clear indicator of the disparity in understanding women’s health & subsequent risk to operational readiness.
Preparing for January 2016

- Office of the Assistant Secretary of Defense for Health Affairs (OASD-HA) & the Uniformed services University of the Health Sciences (USUHS)
- Women in Combat (WIC): Optimizing Performance, Health and Well-being
- 4-6 April 2014.
Special Issues for Female Service Members in Deployment

Deployment and Combat Health

Reproductive

Musculoskeletal

Psychological reactions/Suicide

Sexual assault
Deployment vs Combat—a spectrum

Women in deployment

Woman's Health Task Force report from Afghanistan (link below)

Women in combat

Body armor

Home front issues

PTSD

TBI
Deployment Health; gynecological issues

- Genito-urinary issues
  - Lack of clean bathrooms
  - Bombs by the side of the road
  - Fluid restriction
  - Dehydration
- Menstruation
  - Regulating
  - Suppressing
- Birth control
Reproductive Issues

- Pregnancy (garrison)
  - Physical training
  - Deployment
  - Exposure to toxins
- Breast-feeding (garrison, field)
  - Maintenance of breast feeding
  - Exposure to petroleum products
- Motherhood (garrison, field, deployment, combat)
Musculoskeletal issues

- Heavy personal equipment
  - Kevlar helmets
  - Hair in a bun
  - Body armor
- Stress fractures
  - Pelvic
- Special issues for recruits
- Personal strength
Isolation and Social Support
Sexual assault and harassment

### Fiscal Year 2018: Sexual Assault in the Military

#### DoD Sexual Assault Prevalence
- 0.7% indicated an experience of sexual assault (Active Duty Men)
- 6.2% indicated an experience of sexual assault (Active Duty Women)

#### Individual Service Sexual Assault Prevalence

<table>
<thead>
<tr>
<th>Service</th>
<th>Women</th>
<th>Men</th>
<th>Women</th>
<th>Men</th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>5.8%</td>
<td>0.7%</td>
<td>7.5%</td>
<td>1.0%</td>
<td>10.7%</td>
<td>0.8%</td>
</tr>
<tr>
<td>Navy</td>
<td>4.3%</td>
<td>0.5%</td>
<td>5.1%</td>
<td>0.9%</td>
<td>7.0%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>2.8%</td>
<td>0.3%</td>
<td>2.8%</td>
<td>0.3%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**More Service Members Are Coming Forward to Make a Report**
After experiencing a sexual assault, how many Service members reported it to a DoD authority?

<table>
<thead>
<tr>
<th>Year</th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>0.6%</td>
<td>4.4%</td>
</tr>
<tr>
<td>2018</td>
<td>0.9%</td>
<td>5.1%</td>
</tr>
</tbody>
</table>

**Of female Service members who indicated an experience of sexual assault and reported it:**
- About 21% endorsed experiences consistent with legal criteria for retaliatory behavior

### Service Members’ Satisfaction with Response Resources

- 76% satisfied with support from Victim Advocate

### Sexual Harassment Rates in the Military

- About 1 out of 14 in 2006
- About 1 out of 3 in 2018
Suicide among military women

• Factors associated with stress and suicide
  Relationship loss, isolation, lack of social support
  Unemployment, Financial Insecurity, & Homelessness
  Deployment & war zone trauma
  Workload/work conflicts/harassment
  Previous mental health history &/or abuse
  Familiarity with & use of firearms

• Intervention and Treatment:
  VA/DoD Clinical Practice Guidelines
  Veterans/Military Crisis Line: 1-800-273-8255, press 1
  Vets4Warriors: 855-838-8255
Wounded Female Warrior

- Scant literature
- Changes in:
  - Body image
  - Sexual activity
  - Motherhood
  - Hormones
  - TBI
  - Aging process
National Imperative

• Women in the military contribute to the mission by adding diversity of thought & improve overall unit function

• Women as veterans promote military & public service, run businesses, volunteer, enhance communities, & raise families
References


Questions?