

Veteran Reintegration Program

Analytic Report July 14, 2021



Veterans Reintegration Survey Results on Female Veterans in Ukraine

About the Series

The Veterans' Reintegration Survey (VRS) explored veterans' general experiences as they transition from military service due to the ongoing conflict that began in 2014. The topical areas in the VRS include veterans' service experience, healthcare, employment, well-being, and sociopolitical perspectives.

This report presents the VRS findings on female veterans' benefits, including their demographic profile, service experience, health conditions, and employment opportunities.^{1, 2}

Key takeaways:

- Female veterans are 1.66 times more likely to seek mental healthcare services compared to their male counterparts.
- Female veterans struggle more than male veterans with reintegration, exacerbated by their perceived stigmatization by the civilian population.

Policy Recommendations

- Establish systems to prevent and stop sexual- and gender-based violence in military settings.
- Establish robust mental health programs. Given that female veterans recognize the benefits of mental healthcare more than do their male counterparts, support programs should make the most of that attitude to encourage female veterans to address mental health issues.
- Set up support services to facilitate female veterans' successful reintegration into civilian life by providing employment and educational training opportunities. In addition, work with women's veteran organizations that serve these needs.

Female Veterans' Demographic Profile

Education. More female veterans have attained higher education levels compared to male veterans. The VRS defines higher education as having completed at least basic higher-education-level studies (levels as defined in the Ukraine education system). *Table 1* shows that 69%* of female veterans have completed at least basic higher education studies compared to 48% of male veterans. A higher share of female veterans (44%*) said that they were proficient in at least one foreign language compared to male veterans (31%).

¹ All data noted with an asterisk (*) are statistically significant (95% confidence level that women are different, i.e., have a higher or lower rate, than men).

² Given that veterans were sampled using the snowball approach, the sample of veterans is likely better connected to the NGOs and other veterans than the overall veteran population, which may skew some of the results of the survey. The results presented in this report are based on a sample of 205 female veterans.

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Table 1: Veterans' Completed Education Levels (% share)

	<i>All</i>	<i>Females</i>	<i>Males</i>
Some secondary (Grades 7-9)	1 %	1 %	1 %
Complete general secondary (Grades 10-11)	8 %	3 %	9 %
Vocational, w/o general secondary	5 %	0 %	6 %
Vocational, w/ completed general secondary	9 %	6 %	10 %
Incomplete higher/Special technical	25 %	20 %	26 %
Basic higher	11 %	14 %	11 %
Completed higher	39 %	53 %	37 %
Graduate degree	1 %	2 %	1 %

Marital status and home ownership. Table 2 presents the distribution between female and male veterans by marital status and home ownership: 47%* of female veterans were married, and 21%* were divorced or separated; 43% of female veterans reported owning an apartment compared to 53% of male veterans. Conversely, a higher share of female veterans (32%*) rented an apartment compared to male veterans (20%).

Table 2: Veterans' Marital Status and Home Ownership

	<i>Females</i>	<i>Males</i>
Married*	47 %	58 %
Divorced or separated*	21 %	13 %
Owens apartment	43 %	53 %
Rents apartment*	32 %	20 %

*Statistically significant at $p=0.05$.

Female Veterans' Service Profiles

Table 3 shows that female veterans served an average of 787 days in the military compared to 753 days for male veterans. Fewer female veterans served in a combat role (37%), while male veterans mostly served in a combat role (81%). Nearly 40% of female veterans had combat experience compared to 79% of males. Combat experience includes engagement in a firefight or combat, regardless of whether the veteran was assigned to a combatant position or not.

Table 3: Veterans' Service Profiles

	<i>Females</i>	<i>Males</i>
Duration of service (Ave. days)	787	753
Combatant assignment* (%)	37 %	81 %
Combat experience* (%)	39 %	78 %

*Statistically significant at $p=0.05$.

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Physical and Mental Health Services

Physical health conditions

Figure 1 shows that 65% of female veterans reported an illness or injury as a result of direct participation in the conflict compared to 72% of male veterans.

About the same percentage of female and male veterans sought physical healthcare after ending their service (70% and 72%; Figure 2). The decision to seek care was independent of having a medical condition as a direct result of the conflict.

Despite the majority of female veterans experiencing illness and injuries, as well as seeking physical healthcare, their percentage of registered disabilities was relatively lower.

Only 11%* of female veterans had registered or were in the process of registering for disability status compared to 20% of male veterans (Figure 3). The main reason for this low registration rate was lack of information and documentation about the process from the military, reported by about the same percentage of female and male veterans (33% and 32%).

Mental health conditions

The VRS results suggest that female veterans are more likely to believe that mental healthcare can be beneficial for them. Figure 4 shows that a larger share of female veterans sought mental healthcare services (47%) compared to male veterans (30%). Such tendency is also true for general population: 7% of women and 4% of men sought mental healthcare services in the last 12 months.

Figure 1: Distribution of Veterans by Sex Who Incurred an Injury or Illness as a Result of the Conflict

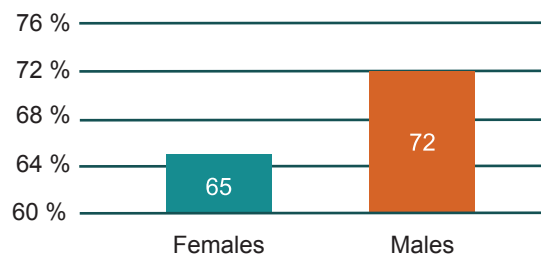


Figure 2: Percentage Distribution of Veterans by Sex Who Accessed Physical Healthcare Services

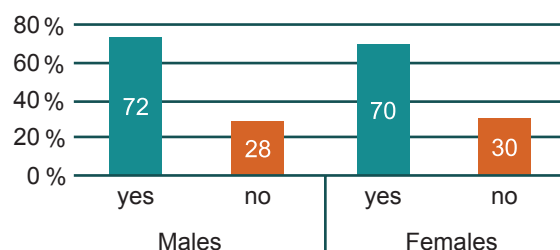


Figure 3: Distribution of Veterans by Disability Status (Completed or In-Process)

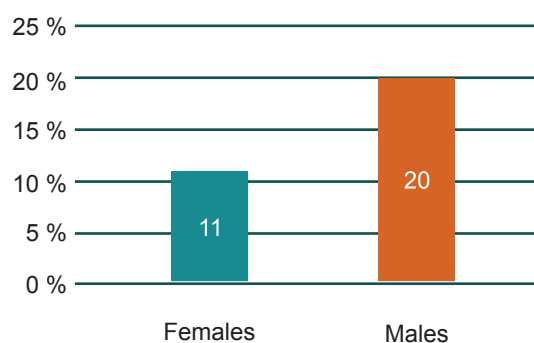
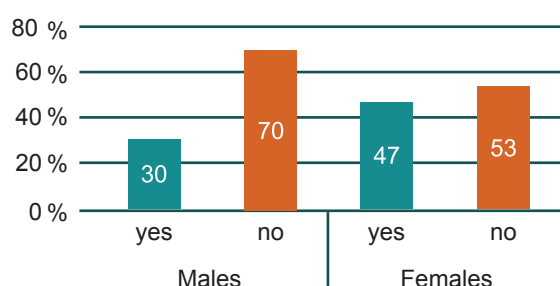


Figure 4: Percentage Distribution of Veterans by Sex Who Accessed Mental Healthcare Services



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Table 4: Commonly Reported Mental Health

	Females	Males
Trouble sleeping at least several times a week	58 %	57 %
Frequent fear or anxiety*	37 %	29 %
Occasional thoughts of self-harm*	15 %	9 %

*Statistically significant at $p=0.05$.

Table 4 shows the common self-reported mental health symptoms among veterans. More female veterans reported having frequent fear or anxiety (37%*) and occasional thoughts of self-harm (15%*) compared to male veterans.³ In the general population, more women report fear or anxiety compared to men (19% and 12%, respectively), though the percentages are about the same for thoughts of self-harm.

Additional analysis of VRS data shows that female veterans are 1.66 times more likely than male veterans to utilize mental healthcare services.⁴ Qualitative data also reveal that female veterans are more likely to be aware of mental health issues and willing to seek medical service for these conditions (see Box 1).

Women Vets Experience Lower Employment and Economic Conditions

Female veterans experienced a decline in employment rates as a result of their military service, with 66% stating that they had a full- or part-time job after leaving the military compared to 82% prior to entering service.

³ "Frequent" refers to "at least several times per week," and "occasional" to "at least sometimes, several times per month, or less often."

⁴ We applied logit regressions to test the effects of individual and intervening variables on physical and mental health-care utilization. We can provide a full report on the design.

BOX 1: "I lost all my motivation, everything positive. I'd never have thought that I could get depressed. I get up and smile, I go to sleep and smile, and then, my strength just left me completely." (FGD4, female veteran and volunteer)

Figure 5: Employment Status of Veterans

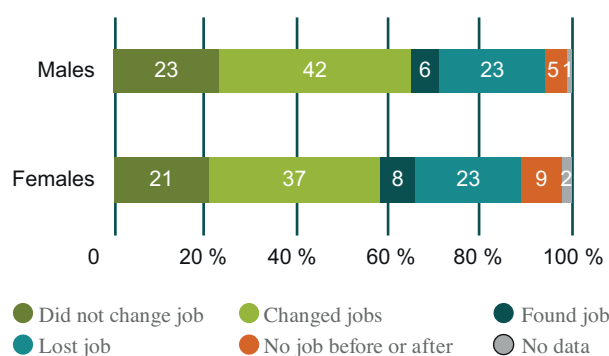


Figure 5 shows that 37% of female veterans changed jobs, 21% did not change jobs, and 8% found a job after their service. Of the 23% of female veterans who lost their jobs after their service, the percentage point breakdown is as follows: 12% were unemployed but still in the labor force; 8% were temporarily jobless; 2% were permanently outside the labor force; and 1% were ill, on disability, or on maternity leave.

The employment conditions suggest that female veterans would be generally less satisfied with

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Table 5: Distribution of Responses for Professional Services Rated Extremely Useful (Rated 10 on a 0–10 Scale)

	<i>Females</i>	<i>Males</i>
Opening a business	57 %	52 %
Aid for further education	54 %	44 %
Identifying skills and career paths	47 %	41 %
Developing communication skills	46 %	38 %
CV writing	43 %	31 %
Job interview preparation	42 %	32 %
Describing military experience to employer	38 %	27 %
Business start-up loans	30 %	35 %

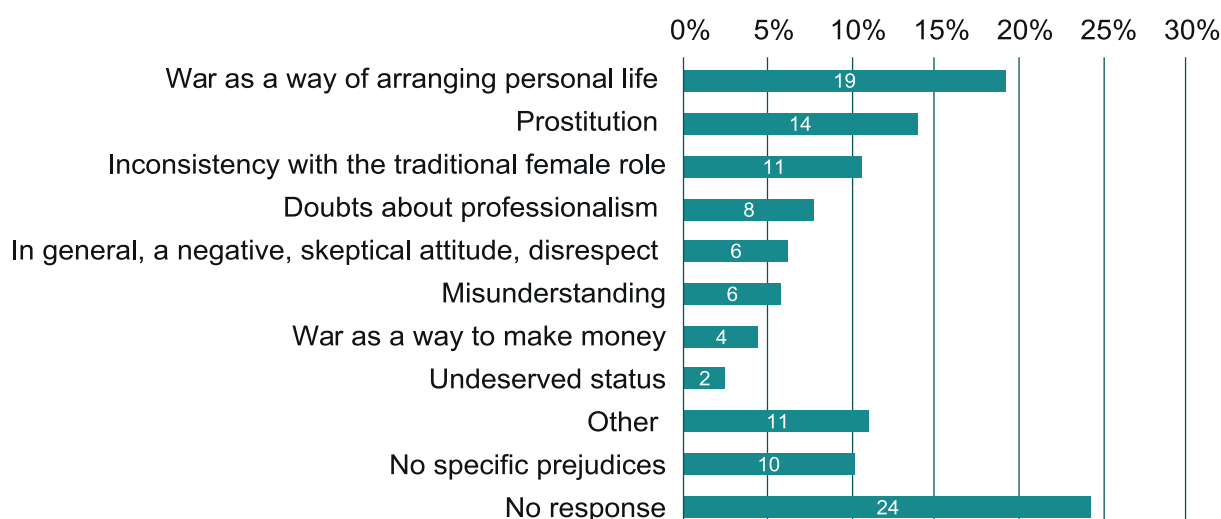
their economic situation, and indeed, VRS results showed more dissatisfaction (40%) than satisfaction (32%). This trend reflects that of the general population, with women reporting lower satisfaction with personal economic situation than men (24% vs. 30%). While the majority of female and male veterans reported similar earnings, 54% from each group in the salary range of \$216–539 ⁵ (U.S. dollars) per month, there were indicators of greater economic vulnerability for

female veterans. A greater share of female veterans (7%) reported having no income compared to male veterans (3%). A higher share of female veterans (13%*) reported that they relied on social assistance compared to male veterans (5%).

Most (70%*) female veterans stated a willingness to receive professional development services compared to 59% of male veterans. Also, a higher share of female veterans found most professional services “highly” or “extremely” useful.

⁵ Using the average nominal exchange rate of 27.826 UAH: 1 USD between January 1-February 28, 2021. Source: OANDA <https://www1.oanda.com/currency/converter/>

Figure 6: Specific prejudices that civilians have about female veterans (on opinion of the latter)



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Women Vets Feel Social Stigma

Most female veterans (66%) reported that they faced some specific stereotypes and prejudices from civilians due to their gender (*see Figure 6*). The most common were beliefs that women went to the military to arrange their personal life, with 19% reporting this. Other reported prejudices include the accusation of prostitution, reported by 14% of respondents, with 11% saying that civilians see their military service as inconsistent with traditional female roles.

Table 6 shows that the perceived reintegration experiences and relationships of female veterans are more complicated: Two-thirds of female veterans (66%) reported that they had at least some difficulty reintegrating into civilian life compared to just over half of male veterans (55%). Additionally, about the same proportion of female veterans (64%) reported being harassed or discriminated against because of their veteran status compared to less than half of male veterans (49%).

Policy and Programming Implications

The VRS findings on female veterans point to the need to explore the following areas for policy and programming purposes:

Establish systems to prevent and stop sexual- and gender-based violence in military settings.

As illustrated by the VRS and other studies, female veterans are often the victims of discrimination during and after their service. Women veterans report cases of sexual- and gender-based violence during their service, confirmed by a number of researchers, gender experts, and advisors at the General Staff. Reporting of such cases and help-seeking is usually complicated in the military setting. Sexual- and gender-based violence is a major contributor to posttraumatic stress disorder (PTSD), depression, and other mental health issues. Such cases demoralize women and hinder their successful reintegration into civilian life. Such abuse must be eradicated, so that female veterans can fully exercise their rights while in the service and successfully adapt to postservice life. The Ministry of Veterans Affairs (MoVA) should work closely with the Ministry of Defense, Ministry of Interior, state Border Guard Service, and other entities in the security and defense sector as well as international experts to prevent and stop the permissive environment for sexual- and gender-based harassment, create a system to reduce tolerance and perpetuation of sexual- and gender-based violence, and improve response and protect female veterans. To support gender mainstreaming and ensure that gender issues are given attention and integrated into the na-

Table 6: Reintegration experiences and relationships

	<i>Females</i>	<i>Males</i>
Reported having difficulties reintegrating into civilian life	66 %	55 %
Reported harassment or discrimination against because being a veteran	64 %	49 %
Had fewer amount of civilian people they would call friends than before they served	56 %	43 %
Communicate with fellow ATO veterans every day	57 %	47 %

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tional strategies, MoVA should engage gender expert advisors at all levels of management for guidance on gender-sensitive programming and monitoring of gender discrimination. The first step in introducing gender-sensitive approaches in the male-dominated and patriarchal military structure is to raise awareness on sexual- and gender-based violence. This could be done by trainings and awareness-raising campaigns that target key personnel and decision makers in the security and defense sector. It is equally vital to incorporate mandatory courses and trainings about gender equality and prevention of sexual violence in military universities and the military educational system.

Provide mental health support to female veterans

In addition to being victims of discrimination during their military service, female veterans often face stigma from the general population and thus experience challenges to reintegrating into civilian life. National and local governments should prioritize the needs of female veterans in a holistic reintegration policy, including providing access to psychological support. According to the VRS, female veterans are 1.66 times more likely to seek mental health-care services compared to their male counterparts. This important discovery should be leveraged to recruit female veterans in psychological support, where they can serve as role models to promote normalization of seeking mental health support. Engaging female veterans who are most open and receptive of such services can create a positive ripple effect. As more female veterans experience the positive outcomes of counseling, more will be encouraged to consider such counseling. This experience could inform and shape mental health information campaigns. Moreover, support programs should also strengthen the capacity of mental health profes-

sionals and volunteers who work with veterans and their families.

Support female veterans' organizations

Returning to civilian life, women veterans face special challenges, including reproductive health, domestic violence, and childcare. During the postpartum period, women often experience stress, which is often exacerbated by PTSD. When this happens, the women often do not know where to turn for help. In these situations, many female veteran organizations and associations provide a refuge for female veterans to discuss such issues and find solutions together. MoVA, government institutions, and international donors should actively support female veterans' associations. Women note that in such associations, they often find understanding and support and are able to discuss issues that they are not comfortable discussing with men. In addition, women veterans often experience loss of reproductive health during their military service. In that case, women should be diagnosed at an early stage so that treatment can be most successful, which requires involvement at the institutional level. Donors and nongovernmental organizations (NGOs) should support such grassroots organizations and opportunities, and encourage them to develop communities, especially in regions that have economic hardship.

Address discrimination against women

As the VRS has demonstrated, veterans believe that they are discriminated against when trying to return to civilian life. More than one-third of employed veterans and a quarter of unemployed veterans stated that employers usually do not want to hire them. Female veterans often experience double discrimination as veterans and as women; 64% reported that they had been har-

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assed or discriminated against because of their veteran status, compared to 49% of male veterans. Stereotypes and prejudices about women not being able to perform professional military service and accusations that they provide sexual favors to male veterans are common in society. Based on VRS results, most female veterans (66%) reported that they faced such stereotypes and prejudices from civilians. When providing mental health support to women veterans, professionals should ensure that gender-sensitive consultations consider the trauma of stereotypes and exclusion that women experience.

Concurrently with these efforts, further work needs to be done to create a more positive image of female veterans in society as a whole. This work can be spearheaded by the MoVA and enhanced by the efforts of Ukrainian NGOs. These activities can range from public education campaigns and panel discussions with popular figures and opinion leaders to creating short films, blogs, vlogs, and community events celebrating female veterans' contributions to the country to debunking stereotypes of women in military and promoting positive images of women veterans as military personnel with a high level of professionalism and commitment. In its messaging to the general population, MoVA should include women veterans and demonstrate their contributions to the country.

Promote economic integration of female veterans

With regard to their economic situation, female veterans are more vulnerable than male veterans. Moreover, female veterans are generally more dissatisfied than satisfied with their personal economic situation. However, more female veterans have attained higher educational levels than their male counterparts, and women veterans are significantly more open to educational and career development opportunities. For example, 70% of female veterans would like to receive professional development services compared to 59% of male veterans. Similar to their openness to psychological support, women veterans' regard for education could be leveraged by MoVA to support women's professional development. In collaboration with NGOs, MoVA should encourage women to take part in skills development and career training that will enhance their opportunities in the job market. Skills development is especially useful for veterans who want to change careers. MoVA could facilitate discussion between different employers and internship programs. Female veterans living in rural areas and women with disabilities should be prioritized as they often experience double and triple levels of marginalization.