

Congress of the United States
House of Representatives
Washington, DC 20515-3011

March 22, 2019

The Honorable Robert Wilkie
Secretary of Veterans Affairs
810 Vermont Ave., NW
Washington, DC 20420

Dear Secretary Wilkie,

We write to request that you implement specific measures to track and prioritize both the cultural and physical transformation within Department of Veterans' Affairs medical facilities to equitably serve women veterans. We are deeply concerned that VA has failed to keep faith with women veterans, who are the fastest growing population within the veteran community.

VA provides a unique and irreplaceable system of integrated healthcare that is comprehensively designed to address the complex health needs of veterans. Although American women have served their nation in uniform since the Revolutionary War, VA medical facilities too often still reflect an institution that was not built for them. Currently, women comprise nearly 20 percent of serving military personnel and 10 percent of the veteran population. The women veteran population is projected to grow to 17 percent of the total veteran population by 2040. VA must plan ahead for this rapid growth.

Women veterans in our districts and Veteran Service Organizations repeatedly report that VA is still not keeping pace with the transforming demographics of the veteran population. Recent reports of widespread sexual harassment at VA facilities is particularly concerning. Nearly one in four women veterans report sexual harassment at VA facilities. When 1 in 4 women veterans also report having experienced unwanted sexual attention while serving, it is doubly concerning that the very system intended to address their trauma is failing to foster a safe environment for them. For example, the lobby of the East Orange Campus of the VA New Jersey Health Care System was recently rearranged to reduce harassment of female veterans occurring during the intake process. Yet simply re-arranging the chairs in the waiting room has failed to adequately address these concerns. VA's own 2015 Study of Barriers for Women Veterans to VA Health Care noted that women veterans experienced unwanted sexual attention at VA facilities. We request that you make public VA's system-wide efforts to combat sexual harassment at VA facilities.

Accessing basic preventative healthcare for women veterans, including pap smears and mammograms remains limited. A National Guard veteran who served during Operation Enduring Freedom recently shared how she is required to first check-in at VA Manhattan before being

placed on a bus for a two-hour drive to get a mammogram at VA Brooklyn. Community care will not simply resolve this issue. Women veterans who are sent to private facilities for mammograms and other basic services have experienced devastating personal credit issues because VA and billing contractors have failed to process billing properly and share information in a timely manner. At a minimum, every VA facility must have a women's health primary care provider.

Barriers to access and inequity in care for women veterans discourage the use of VA facilities, and utilization levels do not adequately reflect the true demand for women's health services. This is a matter of life or death, particularly when women veterans experience major health concerns not prevalent in the civilian population. For example, women veterans develop breast cancer at a higher rate and a younger age than non-veteran women. That is why VA should determine specific measures of the necessary requirements to invest and expedite women's resources and services to increase capacity and reduce barriers to care.

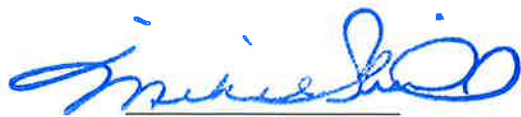
We understand that VA is planning upgrades at numerous facilities to better serve women veterans, such as separate entrances and parking accommodations that will take several years to implement. VA's construction priority list was established over decades and contains billions of urgently needed repairs. The 2019 VA Strategic Capital Investment Planning Process (SCIP) list of construction projects has approximately \$120 million in unfunded facilities improvements for female veterans. Therefore, we urge you to create a separate priority list of construction upgrades at VA medical facilities to accommodate women veterans that will enable Congress to have better oversight of the process and expedite these construction projects to completion.

There also needs to be separate tracking and support for women veterans in the VA homeless support programs, as women veterans are the fastest-growing cohort of homeless veterans across the country. Far too few residential facilities are specifically dedicated to assisting women veterans. In 2005, the VA opened the Mary E. Walker House in Coatesville, Pennsylvania, a 30-bed transitional residence for homeless female veterans. In the decade since its opening, the residence has helped hundreds of female veterans, though there is a near constant waiting list. There is clearly more demand for this type of service nation-wide.

Furthermore, cultural change at the Veterans Health Administration starts with leadership that sets clear priorities. We are deeply concerned that after removing Dr. Carolyn Clancy, you have failed to nominate an Under Secretary of Veterans Affairs for Health. We urge you do so promptly and give this nominee the charge to make VA open and accessible to all who have served and sacrificed for our nation.

Finally, the Center for Women Veterans, established by Public Law (P.L.) 103-446, is responsible for oversight of the cultural transformation necessary to equitably serve women veterans. We understand a new director was recently appointed to this position and we request a report as to her qualifications to hold a position that requires complex and comprehensive understanding of women veterans. Additionally, we request a report as to the resources the Center for Women Veterans requires to best serve our nation's two million women veterans.

Sincerely,



Mikie Sherrill
Member of Congress



Donald J. Bacon
Member of Congress



Jeff Van Drew
Member of Congress



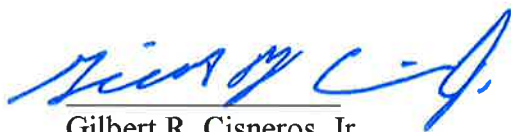
Max Rose
Member of Congress



Abigail Spanberger
Member of Congress



Jennifer Wexton
Member of Congress



Gilbert R. Cisneros, Jr.
Member of Congress



Elissa Slotkin
Member of Congress



Jared Golden
Member of Congress



Jason Crow
Member of Congress



Eleanor Holmes Norton
Member of Congress



Chrissy Houlahan
Member of Congress

Alcee L. Hastings

Alcee L. Hastings
Member of Congress