Eliminating Health Barriers Focus Group Project: Demographic Information¹

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Project Background

From July 2013 to August 2014, a series of informal focus group discussions and one-on-one interviews were conducted with women veterans across California, with an emphasis on reaching veterans in rural areas. Women veterans were recruited through partnerships with local women veteran organizations, word of mouth, and through various social media tools like Facebook, Twitter, and other online networks. Focus group participants and interviewees were provided with childcare and transportation assistance, as well as gift cards to compensate their time. The purpose of the focus groups was to identify current barriers to needed health care services, including mental health, physical and dental care. The Project included 63 veterans from multiple service eras and branches of the U.S. Military, including the National Guard and Reserve. Ages of participants ranged from 23 to 95.

The Project is a collaborative effort spearheaded by the California Women's Law Center and the following partners: California Statewide Collaborations for our Military and Families, Women Veterans Strategic Alliance, Legal Aid Society-Employment Law Center, Eduardo "Eddie" Ramirez, MSqt USAF (Ret.) (OneVet OneVoice Founder), Kathleen West and Angela Rich, U.S. Army Veteran. The Project was made possible by a grant from Swords to Plowshares and The California Wellness Foundation.

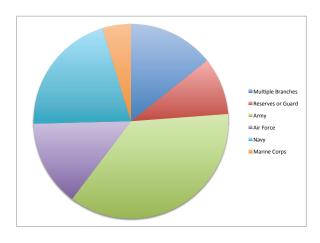
Statewide Focus Groups and Individual Interviews

A total of 8 focus groups and numerous one-on-one interviews were conducted with women veterans from the following locations: Bakersfield, Chico, Durham, Fresno, Grass Valley, Los Angeles, Madera, Marina, Monterey, Napa, Newport Beach, Novato, Pacific Grove, Sacramento, Salinas, Santa Cruz, Santa Rosa, Shafter, Shasta City, Taft, Whittier and Yreka.

Branches of Service Represented

Representatives from all military service branches, except for the Coast Guard, participated in the Project. Members of the National Guard and Reserve also participated.

Multiple Branches - 9 (14%) Reserves or Guard - 6 (10%) Army - 23 (37%) Air Force - 9 (14%) Navy - 13 (21%) Marine Corps - 3 (5%)

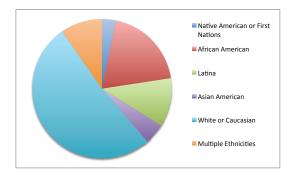


¹This is an informational report highlighting important issues discussed in the focus groups. The issues were identified through a preliminary review of the notes and transcripts of the focus group discussions. It is not based on any formal statistical or other analytical evaluations or analyses.

Ethnic Background of Project Participants

The focus group participants came from diverse ethnic backgrounds.

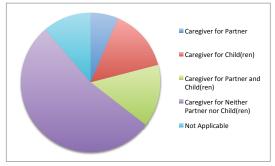
Native American or First Nations - 2 (3%) African American - 12 (19%) Latina - 7 (11%) Asian American - 3 (5%) White or Caucasian - 32 (52%) Multiple Ethnicities - 6 (10%)



Marital and Caregiver Status

Nineteen women (30%) of the focus group participants were married at the time of participation. All others were single, separated, divorced or widowed. Twenty-two women (36%) of focus group participants were caregivers for dependent children and/or other family members and were also responsible for managing the health care needs of their partners and/or children, as well as their own health care.

Caregiver for Partner - 4 (6%) Caregiver for Child - 9 (15%) Caregiver for Both - 9 (15%) Caregiver for Neither - 33 (53%) Not Applicable - 7 (11%)



Military Occupational Specialties During Service

Women veterans who participated in the focus groups and individual interviews were from diverse occupational backgrounds. Representatives from the following occupations participated in the Project: combat medic, nurse, tank mechanic, administrative specialist, cook, weather forecaster, accounting specialist, journalist, intelligence analyst, electronic & technology specialist, military police, linguistic interpreter and combat swimmer/trainer. In addition to these formally recognized military jobs, some women performed additional tasks, such as gunners and drivers on convoys.

Five Key Issues from the Focus Group Project

Preliminary review of notes and transcripts from the focus group discussions and one-on-one interviews revealed five key issue areas that were identified by women veteran participants as barriers to health care access and treatment.

The five issue areas are as follows:

- Mental Health Care (see Women Veterans & Mental Health Care):
- Employment (see Women Veterans, Health Care and Employment);
- Family Care (see Women Veterans and Family Care Issues);
- Medical and Dental Care (see Women Veterans and Medical and Dental Care); and
- National Guard and Reserve (see Unique Barriers for Women in the National Guard and Reserve).

You can find more information about each of these issues by visiting our website at: www.cwlc.org/healthbarriersproject.