

# Military Sexual Trauma Linked to Higher Risk of Homelessness Among Veterans | CEHS

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U.S. veterans who screened positive for sexual trauma in the military had a higher risk of postdeployment homelessness, with male veterans at greater risk than female veterans, according to an article published online by *JAMA Psychiatry*.

Military sexual trauma (MST) is defined by the U.S. Department of Veterans of Affairs as “psychological trauma, which in the judgment of a mental health professional employed by the Department, resulted from a physical assault of a sexual nature, battery of a sexual nature, or sexual harassment which occurred while the veteran was serving on active duty or active duty for training.”

About 25 percent of female and 1 percent of male veterans report having experienced MST during their military service. The Veterans Health Administration (VHA) started MST screening for all veterans seeking care in any of its medical facilities in 2004.

Adi V. Gudlapalli, M.D., Ph.D., M.S., of the VA Salt Lake City Health Care System, Utah, and coauthors used administrative data in their study of 601,892 veterans deployed in Iraq or Afghanistan who separated from the military between 2001 and 2011 and subsequently used VHA services. The average age of the veterans was nearly 39 and most of them were male, white and enlisted in the Army.

Veterans are generally screened once for MST when receiving VHA services. The screening is considered positive if a veteran answers in the affirmative to either of the following questions: “While you were in the military ... (a) did you receive uninvited and unwanted sexual attention, such as touching, cornering, pressure for sexual favors, or verbal remarks? (b) did someone ever use force or threat of force to have sexual contact with you against your will?”

Of 603,495 veterans screened for MST by a VHA clinician, 583,822 screened negative and 18,597 veterans screened

positive. Veterans who responded “decline” were excluded from the study sample, according to the study.

Among the veterans who screened positive for MST, rates of homelessness were 1.6 percent within 30 days, 4.4 percent within one year and 9.6 percent within five years, which were more than double the rates of veterans with a negative MST screen at 0.7 percent within 30 days, 1.8 percent within one year and 4.3 percent within five years, the results indicate.

“A positive screen for MST was significantly and independently associated with postdeployment homelessness,” the study notes.

The study also suggests a greater risk for homelessness among men with a history of MST than women.

The authors acknowledge limitations to their study, including a reliance on self-reported MST status. Also, because a positive screen for MST is associated with increased service use, there may be more opportunities to detect homelessness among veterans with a positive screen.

“In addition to the independent association of MST screen status with homelessness, results from this study indicate that MST status provides clinically important information as an early indicator for adverse postdeployment outcomes. ... Future research focusing on the temporal associations among sexual trauma, mental health diagnoses and treatment could yield important information on effective prevention and intervention of postdeployment homelessness,” the authors conclude.

([Differential Risk for Homelessness Among US Male and Female Veterans With a Positive Screen for Military Sexual Trauma](#), *JAMA Psychiatry*. Published online April 20, 2016. doi:10.1001/jamapsychiatry.2016.0101.)

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