



# The Deborah Sampson Act

## EMPOWERING WOMEN VETERANS

Deborah Sampson Gannett (December 17, 1760 – April 29, 1827) disguised herself as a man in order to serve in the Continental Army during the Revolutionary War. She served 17 months in the army under the name “Robert Shirtliff” of Uxbridge, Massachusetts, was wounded in 1782, and was honorably discharged in 1783. She trail blazed a path for generations of women to serve in uniform. Today, women are the fastest growing group of veterans, but many VA facilities don’t have the ability to provide equitable care or services to women veterans.

### EMPOWER WOMEN VETERANS BY:

- **Expanding** the capabilities of the women veterans call center to include text messaging.
- **Permanently** giving women veterans access to reintegration and readjustment counseling services in group retreat settings.
- **Providing** opportunities for family members to join a veteran or service member in counseling in a group retreat setting.

### IMPROVE LOCAL SUPPORT FOR WOMEN VETERANS BY:

- **Addressing** women veterans’ top 10 unmet legal needs including prevention of eviction or foreclosure, child support, and restoring a driver’s license.
- **Authorizing** an increase of \$20 million to the Supportive Service for Veteran Families (SSVF) Program to better serve homeless women veterans and their families.
- **Requiring** the VA to identify gaps in programs that provide assistance to women veterans who are homeless or at-risk.

### ELIMINATE WOMEN VETERANS’ BARRIERS TO VA CARE BY:

- **Authorizing** \$20 million to retrofit VA medical centers with privacy and security measures like installing locks on exam rooms or purchasing privacy curtains.
- **Requiring** the VA to have at least one full- or part-time women’s health primary care provider on staff.
- **Annually** authorizing an additional \$1 million for the Women Veterans Healthcare Mini-Residency Program, which provides training on women veterans care for VA primary and emergency care clinicians.
- **Creating** a training program for community providers to care for women veterans.
- **Studying** whether the Women Veteran Program Manager program is short-staffed.

### IMPROVE THE QUALITY OF VA CARE FOR WOMEN BY:

- **Centralizing** information for women veterans in one place on the VA website.
- **Requiring** the VA to report on the availability of prosthetics made for women.
- **Requiring** the VA to report on the number of women veterans enrolling in and using VA healthcare.
- **Studying** if the VA has enough women’s health providers on staff.
- **Examining** the quality and effectiveness of various spaces in which the VA provides care to women veterans, including general primary care clinics, separate but shared spaces, and women’s health centers.

### STRENGTHEN VA MATERNITY CARE BY:

- **Increasing** the number of days the VA can provide care to a newborn child of a women veteran who is receiving maternity care from the VA from seven to 14.

U.S. SENATOR FOR MONTANA



**JON TESTER**