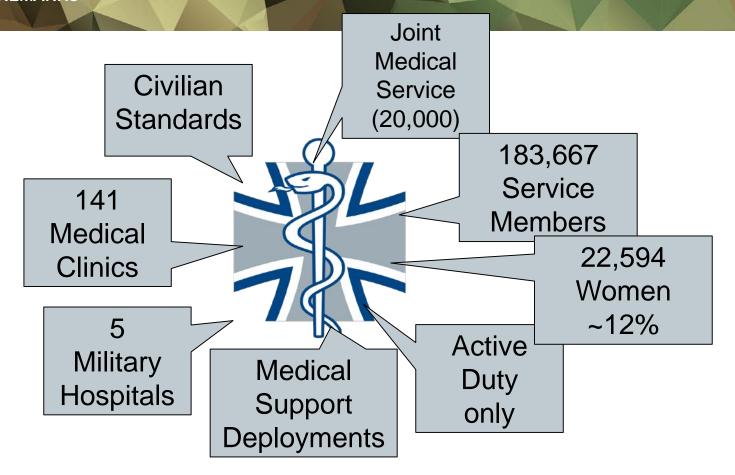


BUNDESWEHR MEDICAL SERVICE



HEALTH CARE DELIVERY





Sanitätsdienst – Kdo SanDstBw

The guiding principle
of the Bundeswehr Medical Service
is to provide sick, injured or wounded personnel
medical care,
the outcome of which corresponds
to standards in Germany.



Sanitätsdienst – Kdo SanDstBw

Civil Service Act (SGB V):

- Basis for health care delivery in Germany
- System of solidarity and self-responsibility
- Sets standards of care (necessary services, efficiency principle)
- Defines compulsory insurance/statutory health insurance system
- Necessity of gender specific services

Federal Civil Service Remuneration Act (BBesG):

- Health Care benefit for service members
- Military health care delivery (MTF)
- Civilian capacities in case of emergency or after referral
- Necessary services and economically adequate
- At least to the standards of the Social Security Act

<u>Health Care benefit for service members (BwHFV):</u>

- Treatment, prevention and rehabilitation, screening, vaccinations and other prophylaxis
- Pregnancy, delivery, and legal abortion
- Includes dental, inpatient/outpatient care, palliative treatment, organ donation, pharmaceuticals/medical aids, sociotherapy, care homes, in-vitro fertilization









WOMEN'S HEALTH CARE



WOMEN'S HEALTH CARE

Concept for Women's Health Care:

- Part of health care benefit of female service members
- German MTFs do not have OB/Gyn departments
- OB/Gyn services mainly through civilian referrals close to duty station or home
- Except hospital in WESTERSTEDE after "German DHB" recommendation in 2011: Civ-mil cooperation, military expertise/assessment, telemedicine
- Annual Screening
- Part of PHA through report of civ gynecologist
- Health promotion programs are 'gender neutral'
- In case of military relevance services can be augmented
- MTF can provide additional services free of cost (e.g. cosmetic surgery in MTF)
- No contraceptives

Screening:

- Cervix carcinoma screening (age 20+)
- Breast cancer screening (age 30+)
- Additionally: Mammography (age 50+)
- HPV vaccination (girls & boys; age 9-14+; STIKO RKI recommendation)

Readiness:

- Pregnancy leads to immediate removal from deployment
- OB/Gyn assessment before deployment obligatory
- Contraceptives after live vaccine and during malaria prophylaxis

WOMEN'S HEALTH CARE

Women's Health Care related mental care:

- Part of regular mental care in MTF or
- Civilian expertise if gender specific (e.g. pregnancy depression)

Reproductive Health Services:

- Follows civilian regulations (medically necessary, age 25-40/50, married, only own eggs/sperm)
- 100% of costs for diagnostics and 50% costs of IVF (includes cryopreservation if medically necessary)
- No 'social freezing'

Women specific occupational aspects:

- Gender specific sport and Basic Fitness Test requirements
- Institute for Preventive Medicine
- Strength-load disbalance and trainability
- Osteoporosis prophylaxis: Following S3 guidelines of German osteological society

Research:

- Big Social study on integration of women in military (Truppenbild ohne Dame?)
- Diss.: Prevalence and risk factors for mental health of female service members
- PrevMed Institute Research examples:
 - Index finger muscle fatigue and pistol firing failure
 - Strength training for women
 - Physical fitness registry
 - Physical performance and resilience of female soldiers

MENTAL HEALTH



Sanitätsdienst – Kdo SanDstBw

MENTAL HEALTH ACCESSION SCREENING

Situation:

- 12-month prevalence of affective disorders in the German Armed Forces is 11-15% and thus comparable to a gender-matched general population¹
- Suicide is the most frequent specific cause of death of active soldiers of the German armed forces²
- Mental health conditions, mostly depression or anxiety disorders, were found in over 20% of deployed soldiers
- Stigmatization, shame and fear play a role in seeking therapy (desire to solve the problem by oneself (73.7%), insufficient knowledge about effective treatments (31,6%), fear of military career consequences (26,3%), and worries about what comrades might think (26,3%))³
- Predictors are psychiatric anamnesis, amount of stressors, insufficinet social support, difficulties in emotion regulation, value/moral orientation

Concept:

- Supervision and advice through line psychologists
- Concept for mental casualties (Prevention, enhancement of mental fitness, training, therapy, rehabilitation)
- Concept mental fitness (currently under review)
- Communication of risk profiles to commanders to raise attention and preventive measures before, while, after deplyment
- After deployment voluntary mental fitness screening to sensitize and motivate, not to select or exclude
- Resiliance enhancement through training and CHARLY (blended learning, coping strategies) pre-/post deployment

Research:

- Psychotrauma Center, Berlin
- Planned study: Alliance for Mental Health in the German Armed Forces
 (Mental health and spectrum of disorders/depression/suicide/anxiety; adapting the European Alliance Against Depression to Mil)