

# Adjudication of Sexual Dysfunction Claims Consequential to an Entitled Psychiatric Condition

Published April 2022  
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## INTRODUCTION

**THE OFFICE OF THE VETERANS OMBUD (OVO)** investigated whether there is a sex-based bias in Veterans Affairs Canada (VAC) decision-making processes for sexual dysfunctions related to psychiatric conditions.

Veterans may experience sexual dysfunction related to their service, specifically as a result of psychiatric conditions like PTSD and the medication used to treat them. VAC disability benefits compensate and provide treatment benefits and services to members and Veterans who have a permanent service-related injury or disease.

## WHAT WE FOUND

**OUR REVIEW** found systemic unfairness for female Veterans in certain VAC decision-making processes. We also found serious limitations in the availability of accurate VAC client data.

## KEY FINDINGS AND RECOMMENDATIONS

VAC streamlines applications for erectile dysfunction caused by medications to treat psychiatric conditions. Sexual dysfunction applications for female Veterans have no equivalent process.

### RECOMMENDATION

1

*Eliminate the sex-based bias in the VAC adjudication of sexual dysfunction claims consequential to a psychiatric condition.*

The VAC medical questionnaire for sexual dysfunction contains a checklist that includes male sexual dysfunctions, but there is no checklist of female sexual dysfunctions.

### RECOMMENDATION

2

*Update the PEN 68e Medical Questionnaire to equitably capture sexual dysfunctions affecting all clients.*

There are two impairment ratings in the *Table of Disabilities* for male sexual dysfunctions and only one for female sexual dysfunctions.

### RECOMMENDATION

3

*Update the Table of Disabilities to include impairment ratings for all sexual dysfunctions listed in contemporary diagnostic manuals to standardize the adjudication process for all clients.*

Female Veterans are more likely to experience desire and arousal disorders that VAC adjudicates as decreased libido, which is not clearly defined in the *Entitlement Eligibility Guidelines*.

### RECOMMENDATION

4

*Provide clearer guidance for adjudicating female sexual dysfunction claims consequential to a psychiatric condition by defining decreased libido in the psychiatric Entitlement Eligibility Guidelines.*

VAC does not adequately collect data related to sexual dysfunction claims.

### RECOMMENDATION

5

*Refine the granularity of the data collection system in order to fully capture the nature of sexual dysfunction claims.*

## CONCLUSIONS

**OUR RECOMMENDATIONS** focus on the processes used by VAC to adjudicate claims for sexual dysfunctions related to psychiatric conditions. Amending those processes could assist decision-makers to ensure clients with sexual dysfunctions other than erectile dysfunction are not waiting longer or experiencing unfair outcomes.

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\*La version française est disponible sur demande