

Project Title: ***Rural Native American Women Veterans' use of VHA under the MISSION Act***

Background

American Indian and Alaska Native (AI/AN) women serve in the U.S. military at very high rates, yet little is known about how their health care needs and health care use differ from those of other women Veterans. Additionally, AI/AN Veterans are over-represented in rural areas relative to Veterans of other races. This further highlights the need to understand and improve women's health care delivery in rural areas. The rapidly increasing numbers of women Veteran VHA users, changes to VHA's health care delivery system, and a lack of information about differences among women Veteran minority populations requires an examination of rural AI/AN women Veterans' health, health care access and use and how these may differ from other women Veterans.

Current Activities

We are inviting women Veterans who have used VA health care to speak with us by phone about their health care needs, preferences, and experiences. These interviews will take about 60 minutes. Invitations are mailed from our office at the Iowa City VA Health Care System to women nationwide. Women who receive a mailed invitation may also receive an email, and a phone call from our team.

We are reaching out to women of all racial identities, with a focus on how American Indian and Alaska Native (AI/AN) women Veterans' needs, preferences, and experiences are similar or different from other women Veterans based on race/ethnicity and rurality.

Our goal is to speak with 450 women Veterans who are recent users of VHA health care with half identifying as AI/AN and half who live in rural areas. Invitations began being sent in June of 2022 and will continue until the recruitment goal of 450 is met.

Frequently Asked Questions

What will this information be used for?

When we speak with women Veterans, we explain why we are asking them to share their experiences with us. For this project, we are interested in how women Veterans' individual life and military experiences have affected their health and whether they have been able to get the care they need. When we talk with women we want to understand where they get their health care, to learn more about their health care experiences, and if they have ever used video or phone for their medical appointments.

Our VA team is reaching out to women Veterans to learn from them areas where VA healthcare services could be improved and whether these vary for different groups of women Veterans. We are not currently planning any programs or services.

After speaking with and learning from women Veterans we will be better able to make recommendations to improve how VA care is provided to women Veterans. Results from this project will be shared with the VA Office of Rural Health and the newly formed VA Office of Tribal Health.

How did we get your name?

Your name was randomly selected from VA administrative data of women Veterans who had used VA health care.

When we distribute results from this project, we only report summary information on the group as a whole, never individual information or names.

Is anyone on your team Indigenous?

No, we do not have an indigenous member on our project team. As part of this work, we have communicated with VA Office of Tribal Government Relations personnel (one who is an enrolled member of the Cherokee Nation in Oklahoma and another who is Hopi-Navajo). We have also worked with indigenous women researchers and indigenous women Veterans on the questions we ask during the telephone interview.

Why do you require a social security number (SSN) and banking information for participant reimbursement?

We understand why requesting this information might be seen as suspect. Our VA requires us to obtain this information in order to pay people for their time. Offering compensation to Veterans for their time and expertise reflects our belief that their experiences and time are valued. We are reaching out to Veterans who we know have used VA care recently so it is our hope that they would be familiar with VA requirements to use direct deposit for reimbursement such as for beneficiary travel. However, we do not have access to the banking information you may have provided as part of receiving health care (e.g., beneficiary travel); therefore, we ask for this information in order to provide you with participant reimbursement.

VA direct deposit is the only option we have for reimbursement. A VA direct deposit is the safest way to receive reimbursement. We require your social security number to help prevent fraud and ensure accountability. If you do not wish to provide your SSN and banking information or receive reimbursement, you may volunteer your time for the interview without compensation.

Will participating or not participating in this project affect my VA benefits or care?

No, your participation is completely voluntary, and the results are confidential. Your decision to participate or not will not affect your VA benefits or care. Your healthcare providers will not know that you participated in this project.

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