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U.S. Department
of Veterans Affairs

Focus on Health Equity and Action:

Military Service History and VA Benefit Utilization for Minority Veterans

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Office of Health Equity

Thursday April 27, 2017 @ 3PM ET



WHAT YOU CAN EXPECT

- ❑ Background
 - VA Health Equity Action Plan - HEAP
 - National Minority Health Month & Minority Veterans
 - Role of social & economic determinants of health
- ❑ Minority Veterans Report: Military Service History and VA Benefit Utilization Statistics
 - Introduction
 - Overview and Highlights
- ❑ Discussion with Q &A



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FOCUS ON HEALTH EQUITY AND ACTION CYBER SEMINAR SERIES

❑ **04/27/2017 3-4P ET: Military Service History and VA Benefit Utilization for Minority Veterans** **Today's Session – Archive coming soon**

❑ **Future Sessions – Mark your calendars to join us from 3-4PM ET on the following Thursdays:**

****06/29/2017 **07/27/2017**

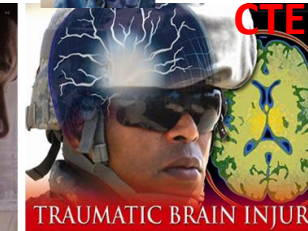
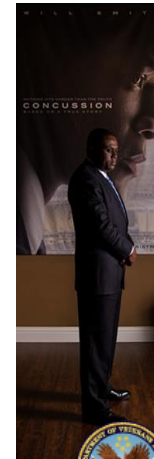
****08/31/2017 **09/28/2017 * OHE-QUERI PEC 6/20/2017**

❑ **Past Sessions – Archived**

- [Incorporating Social Determinants of Health into VHA Patient Care and EHR](#) - **3/30/2017**
- [Using Veterans' Stories to Promote Health Equity and Reduce Disparities](#) - **02/23/2017**
- [State of VHA Care for Vulnerable Veterans](#) - **01/26/2017**
- [Release of the Inaugural VHA National Veteran Health Equity Report](#) – **10/27/2016**
- [National Expert Panel Discussion on TBI & Chronic Traumatic Encephalopathy Morbidity & Mortality among Vulnerable Veterans](#) - **06/30/2016**
- [Race/Ethnicity Data Collection in the Veterans Health Administration](#) - **04/28/2016**
- [Using Data to Characterize Vulnerable Veteran Populations](#) - **03/24/2016**
- [Treatment of HCV-ALD Among VHA Vulnerable Populations](#) - **02/25/2016**
- [Findings from the VISN 4 Hypertension Racial Disparities Quality Improvement Project](#) - **01/21/2016**
- [Office of Health Equity Hepatitis C Virus-Advanced Liver Disease Disparities Dashboard](#) - **11/19/2015**



Veterans' Stories



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VULNERABLE POPULATIONS

- ☐ Racial or Ethnic Group*
- ☐ Sex*
- ☐ Age*
- ☐ Geographic Location*
- ☐ Religion
- ☐ Socio-Economic Status
- ☐ Sexual Orientation
- ☐ Military Era/Period of Service
- ☐ Disability – Cognitive, Sensory, Physical
- ☐ Mental Health*
- ☐ Other characteristics historically linked to discrimination or exclusion



*Covered in the National Veteran Health Equity Report - NVHER



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VA HEALTH EQUITY ACTION PLAN - HEAP

OHE along with key partners developed the HEAP which Aligns with Sec VA Priorities, My VA, the VHA Strategic Plan (see Objective 1E Quality & Equity), and other agency and national strategic goals. The HEAP focal areas are

- ❑ **Awareness:** Crucial strategic partnerships within and outside VA
- ❑ **Leadership:** Health equity impact assessed for all policies, executive decision memos, handbooks, procedures, directives, action plans and National Leadership Council decisions
- ❑ **Health System Life Experience:** Incorporate social determinants of health in personalized health plan
- ❑ **Cultural and Linguistic Competency:** Education & training on health equity, cultural competency to include unconscious bias, micro inequities, diversity & inclusion
- ❑ **Data, Research and Evaluation:** Develop common definitions and measures of disparities and inequities; Develop strategies for capturing data on race, ethnicity, language, and socioeconomic status and other variables needed to stratify the results for all quality measures and to address disparities; Incorporate health equity into Strategic Analytics for Improvement and Learning (SAIL)



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ROLE OF SOCIAL & ECONOMIC DETERMINANTS OF HEALTH



- ❑ Social and economic inequalities are associated with poorer health and negative health care outcomes.
- ❑ Although the relationship has been well established, the relationship not fully understood.
- ❑ Race/ethnicity may be independently associated with inequalities even after controlling for economic status and health care access.



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VA OVERVIEW – THREE ADMINISTRATIONS

❑ Veterans Benefits Administration

- *Provide benefits and services to Veterans, their families and survivors in a responsive, timely, and compassionate manner in recognition of their service to the Nation*
 - Benefits and services that provide financial and other forms of assistance
 - For Service members, Veterans, their dependents and survivors
 - VBA operates 56 regional offices



❑ Veterans Health Administration

- *Honor America's Veterans by providing exceptional health care that improves their health and well-being*
 - Largest integrated health care system
 - >144 hospitals, 1,232 Outpatient sites
 - 300 Vet Centers, Community Living Centers, etc.



❑ National Cemetery Administration

- *Honors Veterans and their families with final resting places in national shrines, and with lasting tributes that commemorate their service and sacrifice to our Nation*
 - VA operates 135 National Cemeteries in the U.S. and Puerto Rico
 - Consistently top of the charts in customer Service
 - *What do you know about the NCA Veteran Legacy Program?*



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Poll Question 1



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POLL QUESTION 1 - HEAP

- How does your work/role align with the HEAP? Select all of the areas that apply:

- ☐ Awareness
- ☐ Leadership
- ☐ Health System Life Experience
- ☐ Cultural and Linguistic Competency
- ☐ Data, Research and Evaluation



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MINORITY VETERANS DEMOGRAPHICS



- ☐ Minority Veterans comprise 23% (approx. 5 million) of the total veteran population.
- ☐ Minority women Veterans comprise 33% of the total women veteran population.
- ☐ Veteran population is projected to decline by 2043, while minority veteran population is projected to increase.



MINORITY VETERAN REPORTS - BACKGROUND



- ☐ VA published a Minority Veteran profile.
- ☐ Report lacked focus on historical contributions made by minority Veterans.
- ☐ Report did not fully address benefit utilization by minority Veterans.
- ☐ Advisory Committee on Minority Veterans made a recommendation for VA to produce a comprehensive report.



VALUE OF A COMPREHENSIVE REPORT



- ☐ Presents a historical perspective on minority Veterans who served.
- ☐ Tracking of benefit utilization can assist VA with improving access to services.
- ☐ Aligns with MyVA initiative in improving the veteran experience.
- ☐ Increases awareness level of internal and external stakeholders of unique issues.



SERVING MINORITY VETERANS



- ☐ Recognize service and show respect.
- ☐ Understand cultural differences exist which create unique and different needs.
- ☐ Make use of OHE and VA cultural sensitivity training tools.
- ☐ Collaborate across all administrations to identify strategies to improve services.
- ☐ Establishing trust is more challenging.

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Poll Question 2



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POLL QUESTION 2



- According to the National Veteran Health Equity Report – FY2013 released in 2016, the top diagnosis with higher prevalence among most racial/ethnic Minority Veterans is
-

- ☐ Hypertension.
- ☐ Diabetes Mellitus
- ☐ Heart Attack.
- ☐ Lipid Disorder
- ☐ Joint & Spine Disorders



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VHA NATIONAL VETERAN HEALTH EQUITY REPORT - SNAPSHOT OF TOP DIAGNOSES



❑ Racial/Ethnic (NVHER Exhibit 3-15):

- AI/AN - Hypertension| Lipid Disorders| **Diabetes Mellitus***
- Asian - Hypertension| Lipid Disorders| Diabetes Mellitus
- Black - **Hypertension***| Lipid Disorders| **Diabetes Mellitus***
- NH/OPI – **Hypertension***| Lipid Disorders| **Diabetes Mellitus***
- Hispanic - Hypertension| Lipid Disorders| **Diabetes Mellitus***

* ***Higher*** % than in reference group



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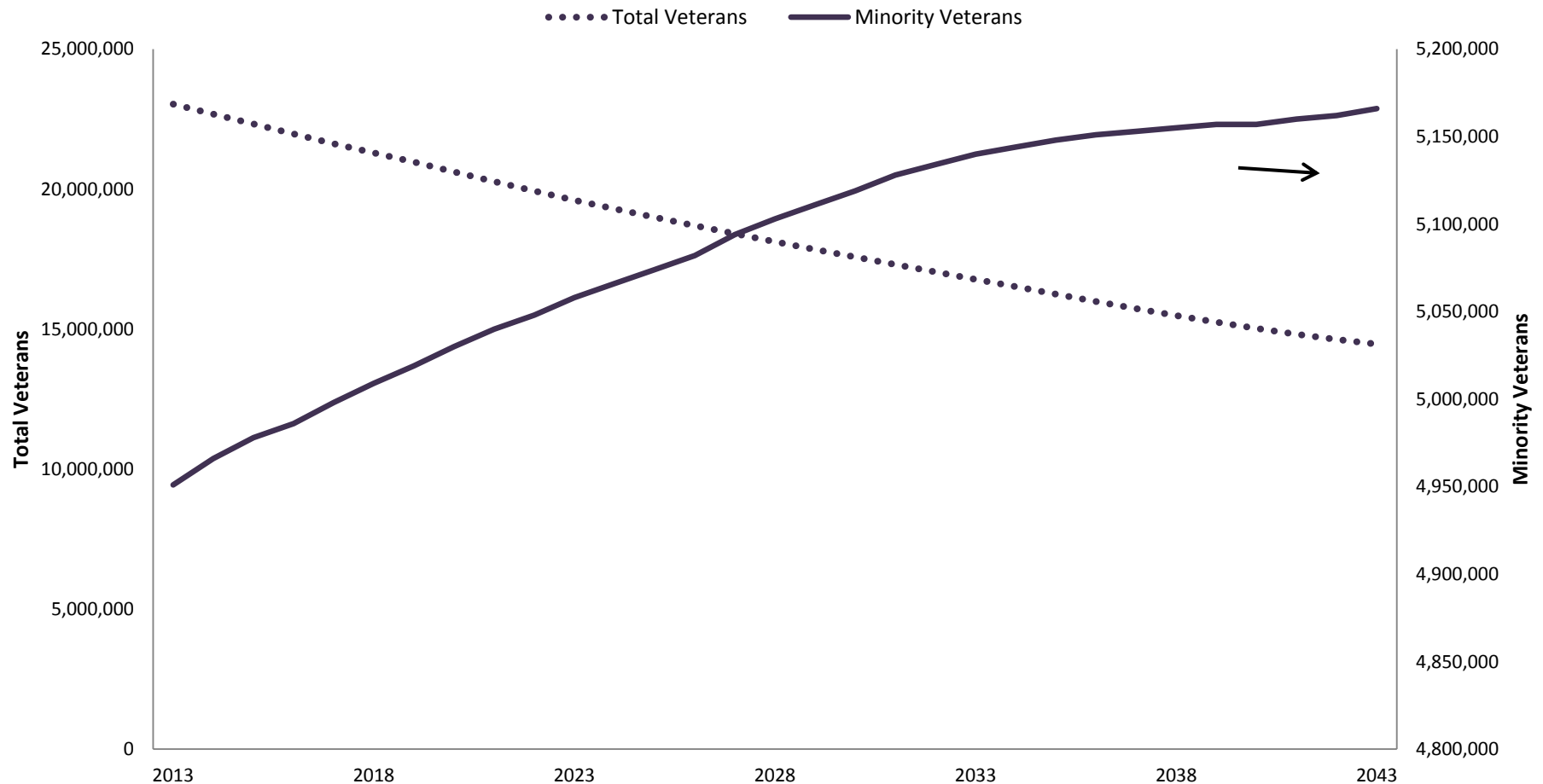


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VETERAN POPULATION GROWTH

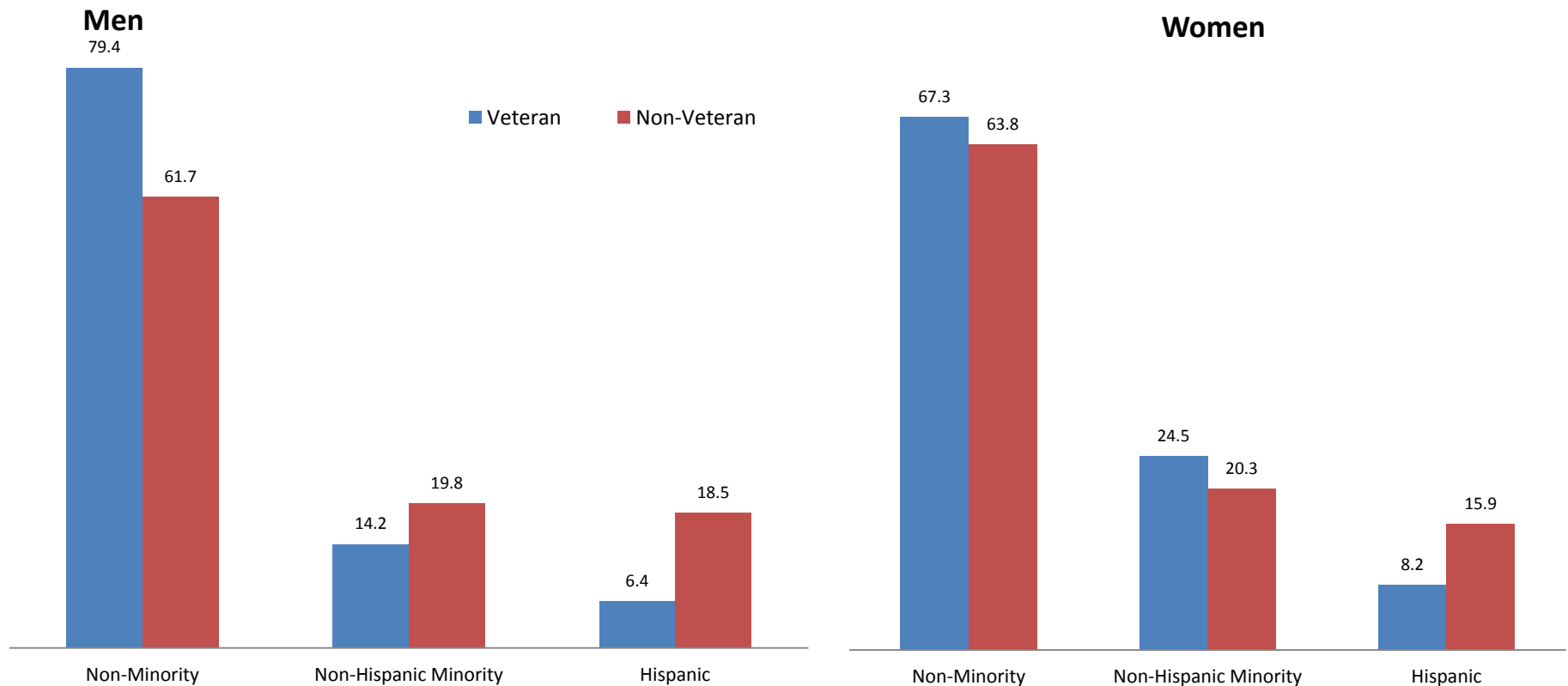
Veteran Population Growth of minority Veterans, 2014





SEX BY MINORITY & VETERAN STATUS 2014

Sex by Minority and Veteran Status, 2014



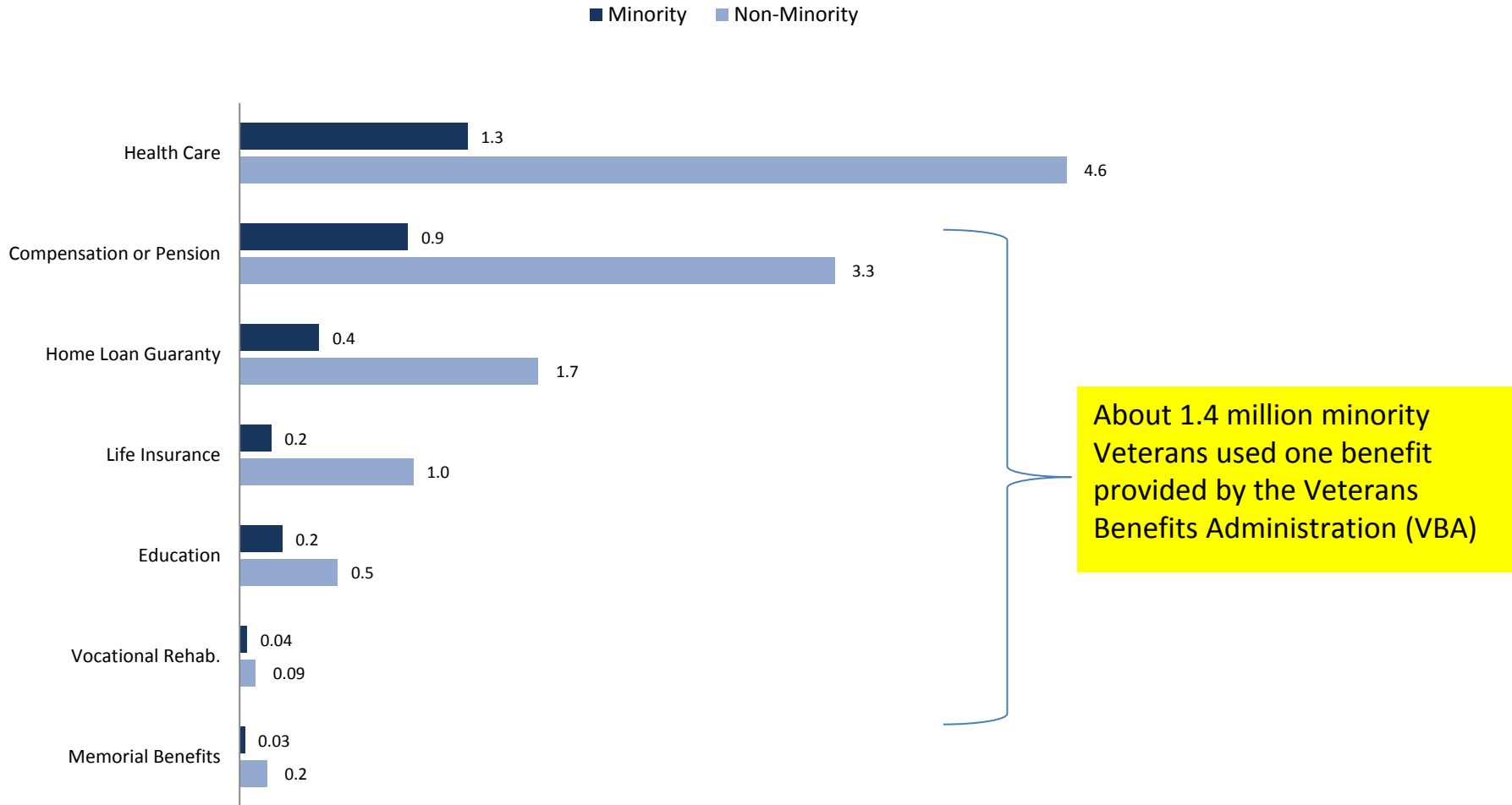


SOCIOECONOMIC CHARACTERISTICS

- ❑ Overall, a higher percentage of all minority Veterans (22.6 percent) than non-Veterans (19.9 percent) had completed a Bachelor's or advanced degree.
- ❑ In 2014, working-age minority Veterans (i.e., those 17 to 64 years old) had a higher labor force participation rate (73.9 percent) than minority non-Veterans (71.6 percent).
- ❑ Minority Veterans have a 44 percent higher risk of unemployment than non-minority Veterans.
- ❑ Overall, minority Veterans were less likely than minority non-Veterans to be living in poverty in 2014.
- ❑ About 6.2 percent of minority Veterans were uninsured in 2014, compared with 22.5 percent of non-Veteran minorities.



BENEFITS UTILIZATION BY PROGRAM AND MINORITY STATUS: 2014

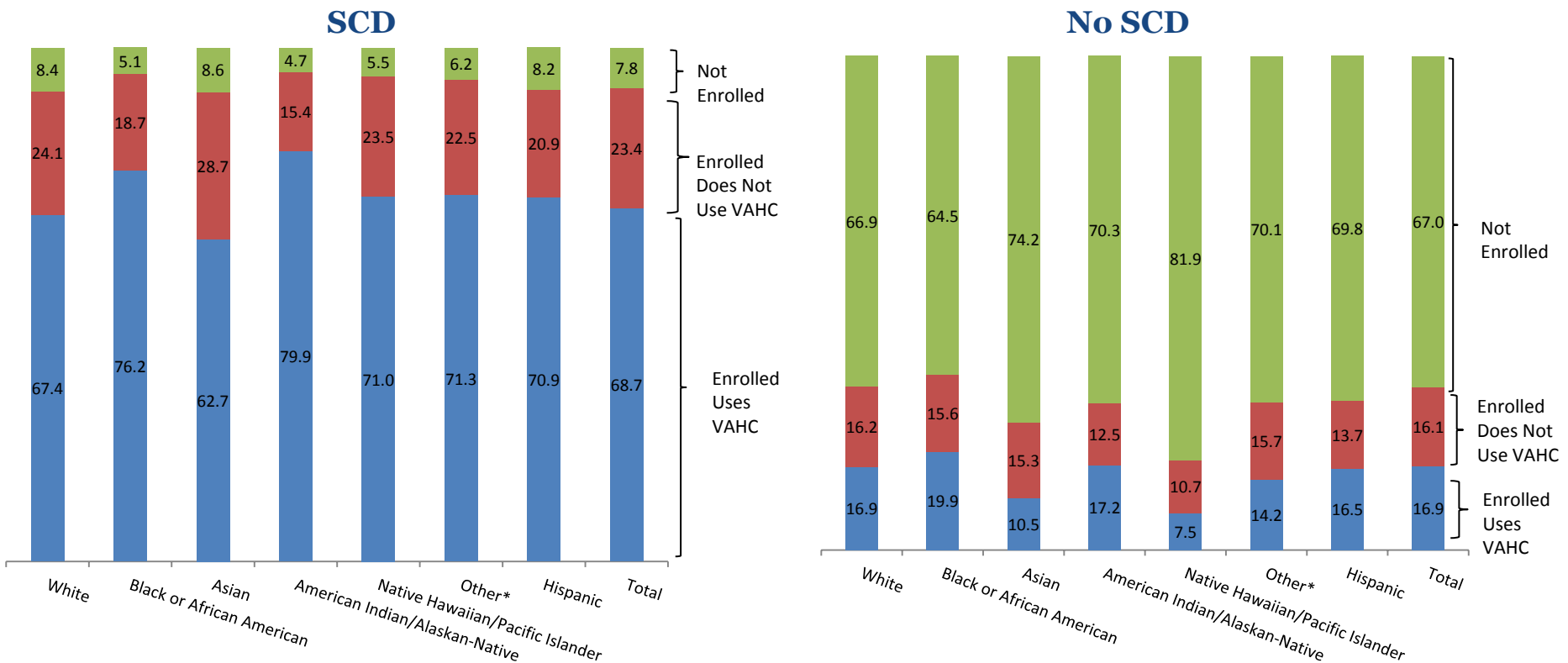


* The numbers from the chart do not sum to the total number of VA users. Veterans who used multiple programs are counted in each individual program, but only once in the overall total.



USE OF VA HEALTH CARE

Use of VA Health Care by Race/Ethnicity by Service Connected Disability Status, 2014





TOP TEN SERVICE-CONNECTED DISABILITIES

Ten Most Prevalent Service-Connected Disabilities for Minority Veterans, 2014

Condition	Frequency	Percentage
Tinnitus	207,257	6.7
Post-Traumatic Stress Disorder	178,924	5.8
Lumbosacral or cervical strain	130,146	4.2
Defective hearing	121,713	3.9
Limitation of flexion of leg	116,793	3.8
Diabetes Mellitus	94,415	3.1
Degenerative arthritis of the spine	77,544	2.5
Limited motion of the ankle	70,443	2.3
Paralysis of sciatic nerve	68,110	2.2
Scars, other	64,975	2.1
Total – Most Prevalent Disabilities	1,130,320	36.5
Total – All Other Disabilities	1,962,631	63.5
Total – Number of Disabilities	3,092,951	100
Total – Unique Beneficiaries	849,835	

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Poll Question 3



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POLL QUESTION 3

According to the new Minority Veterans Report released in 2017, Minority Veterans have a 44 percent higher risk of unemployment and they were less likely to be living in poverty in 2014 than minority non-Veterans.

☐ True

☐ False



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GET INVOLVED!

- ☐ The pursuit of Health Equity should be everyone's business.
- ☐ It is a journey that takes time and *sustained* effort.
- ☐ What can you do today in your area of influence to improve health equity?
- ☐ At a minimum - in all your actions - do not increase the disparity.
- ☐ Thank you!



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PRESENTER INFORMATION

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THANK YOU!



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<http://www.va.gov/HEALTH EQUITY/Updates.asp>



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VHA Office of Health Equity sent this bulletin at 12/02/2016 04:45 PM EST

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Announcements

December 2, 2016

Snapshot of Fiscal Year 2016 Accomplishments in Veteran Health Equity

The Office of Health Equity is delighted to share some of our accomplishments over the past fiscal year in championing health equity for Veterans. Here are a few highlights:

- Solicited and Supported facilities to participate in the USH VA Priorities Best Practices Consortium by submitting health equity efforts.
- Responded to the Commission on Care recommendations in support of health equity.
- Launched new communication tools, including external website and listserv to raise awareness of health equity.



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