Building the National Consortium of the VA Women’s Health Research Network: Opportunities Moving Forward

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Spotlight on Women’s Health • VA HSR&D Cyberseminar
September 3, 2020
Session Overview

• Why a VA Women’s Health Research Network (WHRN)?
  – Why it was developed and how it is organized

• Focus on WHRN Consortium
  – Building research capacity (consortium)
    • Training/education, mentorship, technical support
  – Accelerating collaborative research development
    • Work groups, subject matter experts
  – Enhancing dissemination venues
WHY A VA WOMEN’S HEALTH RESEARCH NETWORK?
Why a focus on women Veterans?

• Women’s participation in the military ↑
  – >15% active duty and >20% new recruits

• Equalization of hardships and risks
  – >70% with 1+ combat exposures (before role changes)

• Different sociodemographics
  – >60% under age 45, high minority representation

• Different needs and different patterns of use
  – More often service-connected, higher VA utilization
  – Comparable physical, greater mental health burdens
  – High rates of sexual harassment, abuse, and assault
Why a focus on women Veterans?

• Fastest growing segment of new VA users
  – But are a numerical minority (<10%) of all VA users

• Numerical minority creates challenges for VA
  – Historical predominance of men in VA settings
    • VA providers need training in common women’s health conditions, ↑ recognition of women’s roles in military
    • VA facilities need guidance and support in designing and delivering comprehensive women’s health services

• Research on women Veterans was lacking
  – ↑ demand for research to inform evidence-based practice and policy
Why a VA Women’s Health Research Network?

• Most VA researchers were excluding women:
  – Low #s of women Veterans at any one VA facility
  – Researchers not focused on gender differences
  – Not recruiting enough to look at effects by gender
  – Did not understand their healthcare needs
  – Did not understand how they use VA care
  – Not familiar with VA women’s health policy

• VA researchers interested in women’s health:
  – Had difficulty getting funding (reviewers unfamiliar)
  – Could not get their women Veterans’ research published

Why a VA Women’s Health Research Network?

• Most research is on men (in and outside VA) but resulting evidence may not always apply to women
  – ↑ equitable benefit of VA research through greater inclusion of women Veterans
  – ↑ funding of research focused on women Veterans

• Needed infrastructure to support multisite research
  – You can get enough men with heart disease in a single VA
  – You need dozens of VAs to get the same # of women

• Women Veterans research was extremely limited
  – Virtually all women Veterans research was descriptive
1st VA Women’s Health Research Agenda

VA Women’s Health Research Agenda

Infrastructure Group

Build capacity
(networking, collaboration, mentoring, RFPs)

Address methodological limitations & barriers
(scientific review, technical consults, interventions → multi-site research/PBRN)

↑ visibility/awareness
(publication, dissemination, communication, impact)

↑ # PIs
↑ # grants
↑ # papers

R&D = Research & Development; RFP = Request for Proposal; PI = principal investigator
VA HSR&D Funded Infrastructure to Build Women’s Health Research Capacity

Women’s Health Research Consortium
- Training, mentorship
- Methods support
- Research development
- Dissemination support

Women’s Health Practice Based Research Network
- ↑ recruitment of women
- ↑ multisite research
- Engage local clinicians, leaders
- ↑ implementation/impact

Becky Yano, PhD, MSPH
Susan Frayne, MD, MPH
WHRN Renewed to Continue Core Functions and ↑ Research Impacts

Women’s Health Research Consortium + Women’s Health Practice Based Research Network

Multilevel Stakeholder Engagement

Accelerate implementation of research into practice and policy
Women’s Improvement Network (women Veterans engagement)

Alison Hamilton, PhD, MPH
Today’s Focus on WHRN Consortium

• Build a national Consortium of researchers and other stakeholders capable of pursuing women’s health research in VA
  – Train/educate, mentor, and support

• ↑ collaborative development and conduct of women Veterans’ research
  – Accelerate VA research agenda achievement

• ↑ dissemination of women Veterans’ research
Build National Consortium

Identified three target groups:

1. Those who *self-identified* as women’s health researchers (launched interest group, listserv)
2. Researchers with *expertise* in priority topical areas (e.g., pain) or w/particular methods (e.g., trials)
   - ↑ awareness of value of including women Veterans
   - Make it easier to include women Veterans in their trials
3. Clinicians who see women Veterans as patients (knowledgeable of needs, sources of innovation)

Conducted needs assessment – top training needs:

Implementation research, statistical methods for evaluating gender diffs, intervention design, sampling strategies...
VA Women’s Health Research Consortium

• Convened conferences of researchers, clinicians, policymakers and women Veterans (2010, 2014...)
  – ↑ awareness, visibility, engagement, collaboration
  – Involved other Departments, agencies, institutes
  – Now designing virtual conferences in key topical areas

• Launched national VA HSR&D cyberseminar series
  – Over 100 seminars under Spotlight on Women’s Health (www.hsrd.research.va.gov/cyberseminars/default.cfm)
  – New research, topical summaries, policy discussants
VA Women’s Health Research Consortium

• Provide technical support to improve design and fundability of new research proposals
  – Qualitative methods, intervention design, implementation
  – Chiefly through national network of research experts now

• Annual strategic planning to review progress, identify gaps, involve new partners, adapt agenda to changing needs and priorities (e.g., suicide prevention)

• Established mentoring network to support early career researchers and trainees
  – Created seminar series on how to apply for career awards
    (www.hsrdr.research.va.gov/cyberseminars/catalog-archive.cfm?seriesSortParam=y&SeriesIDz=87)
Support Early Career Researchers

• VA Women’s Health postdoctoral fellows
• VA HSR&D Career Development Awardees

Smoking cessation, intimate partner violence, substance use disorders, military sexual trauma, cardiovascular risk reduction, weight management, justice-involved Veterans, transgender health, preconception care, maternity care quality, diabetes management, homeless Veteran families, menopause, and more
Established VA Women’s HSR Agenda

VA Women’s Health Research Agenda (2011)

- Access/rural health
- Primary care/prevention
- Mental health
- Post-deployment health
- Reproductive health
- Complex chronic conditions/long term care and aging
VA Women’s Health Research Consortium

• ↑ research collaborations in research agenda areas

**Strategic Priority Areas**

- Post-Deployment Health, Complex Chronic Conditions, Community Care, Gender Disparities, Access/Rural Health
- Trauma*, Substance Use Disorders, Reproductive Health, Cardiovascular Risk Reduction, LGBT, Suicide Prevention
- Engage national Women Veterans groups for input and ideas

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*Trauma Work Group combines PTSD, MST and IPV.
WHRN Research Development

• **Example: Post-Deployment Health**
  – Collaborative calls with Department of Defense, Defense Health Agency, Uniformed Services Univ
  – Millenium Cohort Study (MILCO) (based at San Diego Naval Health Research Center)
  – Research SME (Sadler) serves on VA/DoD groups
  – Supported Military Women’s Research Consortium
    • Military Women’s systematic review (done)
    • Military Women’s Research Agenda (panel done)
    • Military Women’s Research journal supplement (done)
Example: Primary Care/Prevention

- Prioritized CVD risk reduction as 1st work group
  - Identified gender differences in hypertension outcomes
    - ↑ inclusion of women in VA intervention trial
    - Also led to VA HSR&D Career Development Award
  - Operations partner funded evaluation work to develop gender-tailored CVD risk reduction toolkit
    - Obtained QUERI funding to evaluate toolkit implementation
- WHRN pursued HSR&D funding of an evidence-based QI approach to gender-tailoring PACT
  - Identified gender differences in access, continuity...

QUERI = Quality Enhancement Research Initiative; PACT = Patient Aligned Care Teams
VA Priority Topic: Suicide Prevention

Wide ranging expertise

- National Center for PTSD
- Rocky Mountain MIRECC for Veteran Suicide Prevention
- Center to Improve Veteran Involvement in Care (CIVIC)
- VISN 2 Center of Excellence for Suicide Prevention

↑ research collaboration
↑ grants and publications
↑ knowledge of strategies for suicide prevention
↑ implementation of evidence-based approaches
VA Priority Topic: *Suicide Prevention*

Wide ranging expertise

Women Veterans Suicide Prevention Work Group

Suicide prevention in women Veterans: Risk and resiliency factors

Lauren M. Dennisen, PhD
Center to Improve Veteran Involvement in Care, VA Portland Health Care System

Jaimee Grady, DSc, MPH
National Center for PTSD, VA Boston Health Care System

Jennifer Strauss, PhD
Women's Mental Health, Office of Mental Health and Suicide Prevention

VA HSR&D Cyberseminar
September 25, 2017
VA Priority Topic: *Suicide Prevention*

Wide ranging expertise

- Pre-submission scientific scans
- ↑ # proposals
- ↑ funded grants
- Linkage to HSR&D SPRINT (Suicide Research Consortium)
Number of VA Women’s Health Researchers (1990s)
Growth in # of VA Women’s Health Researchers (2010)
Substantial Growth in # of VA Women’s Health Researchers (2015)
VA Women Veterans’ Health Services Research Portfolio Size & Diversity Growing...

- PTSD, military sexual trauma
- Substance use disorder
- Intimate partner violence
- Treatment of HCV infection
- Muskuloskeletal pain
- Gender disparities in satisfaction
- Trauma-sensitive yoga
- Mindfulness based stress ↓
- Quality of non-VA/Choice care
- Justice-involved Veterans
- Homeless Veteran families
- Insomnia treatment

- Cardiovascular risk reduction
- Diabetes prevention
- Collaborative care for depression and anxiety
- Trauma-sensitive primary care
- Contraceptive use
- Pre-conception care
- Maternity care coordination
- Pregnancy outcomes
- Work and family functioning
- Homelessness risks
- Transgender health
Dissemination Activities

• **VA Women’s Health Services Research Conferences** (presentations, workshops)
  – Well-attended, competitive scientific review, significant partner engagement, highly visible

• **Special issues of scientific journals**
  – Special issue on older women Veterans’ health (2016)
  – Special issue on sex-specific VA research results (2019)
  – Special issue on suicide among women Veterans, active duty servicewomen and civilian women (2020)
Updated review found nearly 500 articles and ↑ topic diversity

Updated review found “more research published in the past 5 years than the previous 25 years combined…”

1st systematic review of the literature

Disseminate Evidence

• VA Evidence-based Synthesis Program (ESP)
  – Help operations partners nominate topics

...which then get published
Disseminate Evidence

• VA evidence map → systematic reviews
  – Last VA evidence map resulted in too many papers for a traditional systematic review
  – VA ESP provided WHRN work groups with original articles in respective topical areas
  – WHRN updated with additional year of papers
  – Three work groups pursued systematic reviews:
    • Reproductive health (published 2018)
    • Clinical complexity/multimorbidity (published 2019)
    • Substance use disorders (under review)
Disseminate Evidence

• ↑ emphasis on disseminating evidence to non-research audiences
  – Briefings (e.g., Advisory Committee on Women Veterans, National Assoc of State Women Veteran Coordinators, House Veterans Affairs Committee, VA program offices)
  – Research “snapshots” – lay summaries of areas of research rather than single published article
    • Developed chiefly by WHRN work groups
    • Used for VA Research Day on the Hill
    • Given to Congressional Task Force on Women Veterans
26% of enrolled women Veterans live in rural & highly rural areas.

Research: Dramatic growth in publications about Rural Veterans’ Needs and Access to Care.

- Rural women Veterans are more likely to use VA health care compared to urban peers.
- Affordability and transportation are major factors in rural women Veterans’ health care decisions.

VA research funded to address gender-based harassment in VA

- **ONGOING:** Addressing Gender-Based Harassment in VA (Ruth Klap, PhD, Los Angeles, CA) (Oct 2018-Sep 2020). This pilot included interviews of 40+ nationally recognized harassment experts to better understand the state of the evidence on the path to public deliberation groups among Veterans and VA employees to generate novel strategies that consider their values and needs. *For more information, contact Ruth.Klap@va.gov.*

- **ONGOING:** Identifying Staff Strategies, Barriers and Facilitators for Intervening in Veterans’ Harassment (Mark Relyea, PhD, West Haven, CT). This work is focused on identifying strategies, including bystander interventions, staff may use to intervene. *For more information, contact Mark.Relyea@va.gov.*

- **NEW:** Bystander Activation Intervention to Address Gender-Based Harassment (Amy Drapalski, PhD). This study will pilot test a bystander intervention adapted from Veteran input and photonarratives that illustrate women Veterans’ experiences of harassment in VA settings. *For more information, contact Amy.Drapalski@va.gov.*
WHRN Research Snapshots

Women Veterans’ Suicide Prevention Research

Background
Given the disproportionate volume of Veteran suicides in the U.S., Suicide Prevention is a top VA priority. To bring research to bear on these issues, the VA Office of Research & Development developed a strategic plan for accelerating suicide research across all types of VA-funded research. As part of this initiative, VA Health Services Research & Development (HSR&D) has funded a national consortium of VA researchers partnered with policy and operations leaders to facilitate design, conduct, dissemination and implementation of suicide research findings into evidence-based practice and policy.

Women Veterans’ Suicide Rates Nearly Double that of Civilian Women
Concerns about female Veterans’ special needs around suicide prevention led to legislation that was put forward in 2016 (HR 2913), as early research found that women Veterans’ suicide rates were nearly double that of civilian women and increased by approximately 34% from 2005-16. However, research on their differential risks and needs has been lacking.

National Women Veterans Suicide Prevention Research Work Group Launches
The VA Women’s Health Research Network (WHRN) launched a national Work Group (Mar 2017) to bring national attention and resources to bear on accelerating research evidence on women Veterans’ unique risks and resiliencies and gender differences that may inform tailoring of suicide prevention interventions. WHRN goals are to meet the needs of this research community, by helping them design and obtain funding for new research, increase dissemination of their research findings, and accelerate the trajectory of research to interventions and implementation of effective strategies to reduce women Veterans’ suicidal behaviors and outcomes.

WHRN convenes regular calls to review progress, identify needs, and advance strategic plans in support of these objectives. Membership encompasses VA and university-based researchers, and involves many established clinical and research centers. The VA Office of Mental Health & Suicide Prevention (OMHSP) and VA Women’s Health Services (WHS) are primary operational partners, while the Work Group is also linked to the newly funded multi-center collaborative—the Suicide Prevention Research Impact Network (SPRINT), to integrate/coordinate efforts.

Women Veterans Suicide Prevention Research Conference in Washington DC (Oct 2018)
WHRN convened the first Women Veterans Suicide Prevention Research Conference, bringing together Work Group members and representatives of OMHSP, WHS, the Department of Defense, among other attendees. The meeting generated a new research agenda building on current knowledge, research in progress, discussion of data sources and data needs, and collaborative design of research focused on civilian reintegration, community connections, upstream prevention, psychosocial stressors, trauma, risk assessment, health care access, and mental health interventions. New proposals were designed on the basis of conference collaborations and ideas.

New Research Journal Supplement Underway on Women Veterans’ Suicide (Feb 2020)
WHRN organized development of a VA-funded supplement to a medical journal (Medical Care) on suicide among women Veterans, active duty servicewomen, and civilian women. Manuscripts were due February 29, 2020 and are in various stages of review. The full journal supplement should be available online by December 2020.

New Women Veterans Suicide Research Funding Since Work Group Launch
- **COMPLETED**: Identifying Novel Opportunities for Suicide Prevention among Women Veterans Using Reproductive Health Care Services (Claire Hoffmire, PhD, Aurora, CO) (Oct 2018-Sep 2019). This study estimated rates of suicide, non-fatal self-directed violence, and suicidal ideation among women Veterans using VA reproductive health services, and assessed their beliefs, attitudes, and preferences for suicide risk assessment and prevention. For more information: Claire.Hoffmire@va.gov.
- **ONGOING**: Advancing Suicide Prevention for Female Veterans (Lauren Denneson, PhD, Portland OR) (May 2018-2023). This study aims to better understand gender differences in risks for suicidal self-directed violence, and patterns of use, coping strategies, and symptom changes. For more information: Lauren.Denneson@va.gov.
- **ONGOING**: Understanding Suicide Risk among LGBT Veterans in VA Care (Joseph Goulet, PhD, West Haven, CT) (Jun 2019-May 2023). This study will develop informatics tools to identify LGBT Veterans and suicide attempts and events and characterize suicide risk factors in a national sample of Veterans, and examine the differential effect of risk factors on suicide by LGBT status. For more information: Joseph.Goulet@va.gov.
- **NEW**: Strengthening Suicide Prevention Efforts for Women Veterans through the Veterans Crisis Line (Melissa Dichter, PhD, Philadelphia, PA) (Jul 2020-Jun 2023). This study will compare characteristics of women and men Veterans who use the Veterans Crisis Line, and examine relationships between Veteran characteristics, Crisis Line use, engagement in VA care, and suicide-related outcomes. For more information: Melissa.Dichter@va.gov.
- **NEW**: Preventing Suicide among Female and Male Veterans Not Receiving VA Care (Lindsey Monteith, PhD & Claire Hoffmire, PhD, Aurora, CO) (Jun 2020-May 2024). This study will compare VHA and non-VHA female and male Veterans on (1) circumstances and precipitants to suicide; (2) mental health care experiences, barriers, and help-seeking; and (3) experiences, preferences, and barriers to help-seeking when suicidal. Women Veterans will be oversampled to study gender differences and inform gender-sensitive suicide prevention efforts. For more information: Lindsey.Monteith@va.gov, Claire.Hoffmire@va.gov.
- **NEW**: Perspectives of Female Veterans, VHA Providers, and Family Members on Preventing Firearm-Inflicted Suicides among Female Veterans (Lindsey Monteith, PhD, Aurora, CO) (start date TBA). This pilot study will describe female Veterans’ perspectives, experiences, and preferences for firearm lethal means safety, explore female Veterans’ partners’ perspectives and willingness to engage in firearm-related lethal means safety, and elucidate VHA mental health and primary care providers’ experiences and perspectives on conducting firearm lethal means safety with female Veterans. For more information: Lindsey.Monteith@va.gov.

VA Studies Oversample Women Veterans to Better Understand Suicide Risk Factors
- **The Comparative Health Assessment Interview Study** focuses on OEF/OIF/OND Veterans’ mental health, symptoms, suicidal thoughts, attempt history, and behavioral risk factors for suicide risk, oversampling women Veterans to study gender differences. For more information, contact Aaron.Schneiderman@va.gov.
- **ONGOING**: Assessing Social & Community Environment with National Data (ASCEND) for Veteran Suicide Prevention. Funded by OMHSP, ASCEND is fielding a national Veteran survey to document prevalence and trends in suicidal ideation and attempts and will estimate social and community risk and protective factors among all Veterans (not just VA users), oversampling women Veterans. For more information, contact Claire.Hoffmire@va.gov.

For More Information about WHRN or the Work Group
Contact Elizabeth M. Yano, PhD, MSPH (elizabeth.yano@va.gov) or Ruth Klap, PhD (ruth.klap@va.gov).
Cardiovascular Care in Women Veterans
A Call to Action

Call to Action: Cardiovascular care in women veterans

#1 There will be over 2 million women veterans by the year 2025

#2 Women veterans have a high prevalence of traditional CVD risk factors
- 40% have hypertension
- 44% are obese
- 27% have hyperlipidemia

#3 Women veterans have a high prevalence of non-traditional CVD risk factors
- 10% are homeless
- 40% have suffered military sexual trauma
- 32% have depression or PTSD

#4 More research is needed regarding CVD in women veterans

Strategic Plans for the Future

• **Consortium does not operate in isolation**
  - Future cyberseminars will highlight the PBRN and multilevel stakeholder engagement work

• **Reviewing progress on research agenda**
  - Virtual conferences will integrate published evidence, research portfolios, identify gaps

• **↑ effective communication of evidence**
  - Update evidence reviews and summaries
  - Snapshots, social media, and other approaches
Strategic Plans for the Future

• Update needs assessment and adapt
  – Continue to accelerate research impacts on women Veterans’ quality and patient experience

• Launching new research work groups
  – Harassment and trauma-informed care

• Journal supplements underway
  – Women’s suicide supplement out Dec 2020
  – New *Call for Papers* Dec 2020 (due Mar 2021)
Strategic Plans for the Future

• Targeted support to new HSR&D COREs
  – Based on WHRN Consortium model
  – Suicide, pain/opioids, access, and virtual care

• Array of stakeholder interviews underway on path to new strategic plan
  – VA program offices, VA centers, VA researchers
  – Women Veterans committees and groups
  – Non-VA experts (e.g., NIH, DoD, USUHS, other)
Concluding Remarks

• VA has made major inroads in advancing women Veterans’ research
  – ↑ inclusion of women Veterans in VA research, enabling appraisal of gender differences and gender tailoring
  – ↑ emphasis on high-priority topics (e.g., access, suicide, IPV, community care, maternity care, and more)
  – ↑ reporting of research on women’s health and gender differences

• Collaborative research ↑ research impacts and accelerates evidence-based practice and policy
  – We nonetheless still have much to learn and apply...
How to get involved and/or get help

• Research development work groups ongoing
  – Will connect you to work group leaders

• If new topical area, will help identify others working in same or related area
  – Virtual introductions/warm handoffs and/or develop ad hoc small group to foster research

• If need mentorship, will help identify local or distance mentors in topical or methods area

• If need technical support, will help identify resources and/or experts

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