Rural Health
State of the Art Meeting
March 28, 2022

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Welcome to the SOTA on Rural Health

• Background
• Goals and Process
• Perspectives on Rural Health in VA
• Charge to work groups
Why Rural Health?

- Rural Veterans are an important population
  - 4.7 million rural and highly rural Veterans
  - 2.7 million enrolled in VA
- 7% of enrolled rural Veterans are women; 13% are minorities
- Older and medically more complex
- Impacts of MISSION Act on care of rural Veterans
- Partnerships between HSRD and ORH
Need To Broaden Scope of Research

- Currently HSRD does not even have a specific portfolio dedicated to rural health
- Much of rural health lumped under research on access and telehealth
- This ignores unique problems of rural veterans, trends in health of rural communities
- “Deaths of despair” – suicide, overdose, alcohol
- Isolation and loneliness
- Disparate effects of COVID on rural communities
Why Rural Health? – Need for more research

• 14 currently funded HSRD projects specifically target rural Veterans (as of 10/5/21)

• 60 HSRD currently funded projects consider rural in study design (as of 10/5/21)
SOTA Process – What We Have Done Already

• Planning Committee: HSRD and Office of Rural Health
  • Reviewed HSRD and ORH portfolios
  • Identified main topic areas
  • Refined key questions
  • Identified subject matter experts
  • Determined scope and aims

• Three topic areas for this conference:
  • COVID-19 and public health emergencies
  • Rural health workforce
  • Care in the community

• Cross-cutting themes:
  • Mental health, cultural considerations, access
  • Diversity, equity, and inclusion
Aims for each workgroup

• Identify key research questions within broad topic area
• Consider the state of the evidence for key research questions
• Determine which questions have sufficient evidence to guide practice and policy
• Reach consensus on recommendations for a research agenda.
• Prioritize 2-3 of the most important questions.
  • Clarify scope of question that could be included in a call for proposals
SOTA Agenda

March 28th

• Plenary presentations
• Charges to Work Groups
• Work Groups begin discussions

March 29th

• Work Groups continue discussion
• Work group comes to consensus on priority research agenda
• Co-facilitators present 2-3 top research questions to full group
General Recommendations for SOTA

• Consider your knowledge of the evidence to identify areas of greatest uncertainty
• Use your individual clinical experience and expertise to provide context.
• Distinguish recommendations based on available evidence from those that may be based on expert consensus in absence of evidence
• Focus research recommendations on most important gaps
  • Likely to change practice
  • Important to VA patients
  • Unique opportunity for VA to study
Hints for Identifying Useful Questions

• Is the obstacle to progress truly a “knowledge” question – i.e. what to do? – or is it an implementation question – i.e., “how to do it?”

• Avoid the tendency to catalogue every question in rural health

• Focus on questions that have best chance of contributing to problems which the VA has capacity to address
  • Do interventions to reduce social isolation reduce mental health problems in rural Veterans?
  • NOT: Are measures of community economic health associated with mental health problems in Veterans?
HSRD Post-SOTA Actions

• Develop “request for applications” that targets highest priority questions
  • Developed from work group consensus items
• Develop process for Rural Health Portfolio management and ORH partnership
  • SPM = Crystal Henderson
• Explore roles and responsibilities of different funding mechanisms: ORH vs. HSRD
• Identify mechanisms for collaborations between HSRD and ORH
• Planning Committee Members
• Work Group Chairs:
  • Kristin Mattocks and Naomi Tomoyasu (Community Care)
  • Matt Vincenti and Charlene Pope (Workforce)
  • Mike Ohl and Travis Lovejoy (COVID-19)
• Dr. Laura Zimmerman—HSRD Lead on the Rural Health SOTA Planning Committee
• PFS: Seong Kim