Moderator: Welcome to the VA HSR&D Investigator Insights Podcast Series. In this episode, Query Dissemination Coordinator Diane Hanks [PH] talks with Guneet Jasuja, investigator and epidemiologist for the Center for Healthcare Organization and Implementation Research. They’re discussing Dr. Jasuja’s work on social stressors and health among older transgender and gender diverse Veterans.

Diane Hanks: Guneet, could you just tell us a little bit about where you work and what you do?

Dr. Guneet Jasuja: I’m the core investigator at the Center for Healthcare Organization and Implementation Research in Bedford, Massachusetts, and my research interests are in suboptimal medication prescribing, quality of care in transgender health.

Diane Hanks: Could you please explain the need for research on health disparities in transgender and gender diverse Veterans, especially among older Veterans in this patient population?

Dr. Guneet Jasuja: Yes, that is a great question. Health disparities in terms of health conditions and social stressors have been widely documented among transgender individuals. Transgender and gender diverse individuals in general there is very few data from convene and sample, which highlights these disparities among older transgender and gender diverse individuals compared to older cisgender individuals.

Older transgender and gender diverse individuals have been reported to have higher rates of alcohol use, drug use, tobacco use, and poor physical and mental health compared to their older cisgender peers. But the prevalence of health conditions and social stressors among older transgender and gender diverse Veterans is not known at all, so there is a gap in understanding the healthcare profile of older transgender and gender diverse Veterans. And subsequently, how to address their care and needs appropriately.

Diane Hanks: Thank you. Could you briefly describe your study to compare health conditions and social stressors among older transgender Veterans?

Dr. Guneet Jasuja: In keeping with the gap in the literature, which I just pointed out, the objective of our study was to examine health condition and social stressors among older transgender and gender diverse Veterans compared to older cisgender Veterans in the Veterans Health Administration. We use health disparities research framework for our study, and that has been proposed by Amy Kilbourne and colleagues to guide health disparities research.

This framework outlines a sequential research trajectory where phase one, and that is detection of health disparities informs phase two, which is understanding the multilevel determinants of what is causing these disparities at different levels, and which finally informs phase three of eliminating or reducing these disparities by developing and implementing interventions. Our study focus in the first phase of this framework of detecting health disparities among older transgender and gender diverse Veterans compared to older cisgender Veterans in the Veterans Health Administration was just to get a little bit more into the methods.

We used the Veterans Health Administration Corporate Data Warehouse as our data source. Our study population included approximately 5000 Veterans who were 65 or above the age of 65 years and who received healthcare from the VA from 2006 to 2018. Of these approximately 5000 Veterans, 1244 had a documentation of a gender identity disorder diagnosis code, which is the primary method for identifying trans individuals in structured data.

So, these 1244 formed are transgender and gender diverse Veteran cohort. We then matched these 1244 transgender and gender diverse Veterans to a sample of cisgender Veterans, which resulted in a sample of 3722 cisgender Veterans. I just wanted to kind of outline the data.

Diane Hanks: That’s helpful. Briefly tell us about your findings, particularly in regard to social stressors in older Veterans. For example, are older transgender Veterans more likely to be isolated or to lack social support?

Dr. Guneet Jasuja: I just want to kind of briefly first summarize the main takeaways and findings from the study. In our study, we found that older GID Veterans experienced four out of the seven social stressors we examined in our study. They were more likely to experience violence, social/family problems, lack of access to care and transportation, and psych specific needs. We also found that, despite these significant disparities on the social stressors I just mentioned, all the GID Veterans had similar likelihood on several health conditions, such as diabetes, posttraumatic stress disorder, and myocardial infarction, as compared to the older cisgender Veterans.

In the literature, health disparities have been noted in this population for these health conditions, which I just listed. Older transgender and gender diverse Veterans also have lower likelihood of several conditions, including substance use, where a higher likelihood or higher rates have been reported among this population in the literature. Our third significant finding from this study was that older transgender and gender diverse Veterans had higher likelihood of Alzheimer’s, different types of cancers, depression, and multisexual trauma as compared to their older cisgender peers.

Diane Hanks: Can you discuss any future research and/or next steps in this research you're conducting now?

Dr. Guneet Jasuja: Sure. I think, in terms of the health disparities research framework and based on the disparities we found among this population in our study, our next step would be a greater understanding of the multilevels looking at patient/ provider and psych level determinants. What is really causing these disparities? And that would really inform that final step we talked about with the health disparities framework of developing and implementing culturally tailored interventions to improve health, specifically around cancer screening and Alzheimer’s and depression and multisexual trauma as well as mitigating social stressors among our older transgender and gender diverse Veteran cohort.

Diane Hanks: So, a lot of work yet to do.

Dr. Guneet Jasuja: Yes, and this is just the first step.

Diane Hanks: Just the first step.

Dr. Guneet Jasuja: Yes.

Diane Hanks: Is there anything you’d like to say about the benefits or challenges of working within VA HSR&D?

Dr. Guneet Jasuja: I think the benefit of working with the VA HSR&D is that it gives the researchers, the VA Researchers this ability and opportunity to translate their research findings into broader implementation into the VA healthcare system, and that could have significant impacts on VA policy of clinical practice and even directly affect like Veteran health outcomes.

I just want to mention that I’m a Career Development Awardee, and the career development that etches out on the Career Development Award gives an excellent opportunity to train on implementation science, which is an essential skill to translate these research findings into adoption and implementation. But that said, adoption and implementation of research findings is very, very challenging.

I mean moving research findings beyond a significant obligation is challenging. Working with clinical and operational departments in the VA is challenging, and then the changing landscape of VA priorities is another complexity which makes this whole thing challenging.

Diane Hanks: Right, but I think VA and query, specifically quality enhancement research initiative, which began in 1998, was one of the first to even look at, well, how do we make this happen faster? How do we bring this research that you’ve just published to policy and to practice faster? So, I think query has made a lot of advancements since 1998 within the VA system, but it is still incredibly complicated.

Dr. Guneet Jasuja: I think so. I mean you get all this training. You are working within the system, but I think moving the needle on implementation science is really hard.

Moderator: The views and opinions expressed in the preceding podcast are concerned with the scope of recently concluded or ongoing VA HSR&D funded research and do not necessarily reflect current or to-be implemented VA policy. To learn more about this research, visit the VA HSR&D website at [www.hsrd.research.va.gov](http://www.hsrd.research.va.gov).