

1. INTRODUCTION

The 2001 National Survey of Veterans (NSV) is the fifth in a series of comprehensive nationwide surveys designed to help the Department of Veterans Affairs (VA) plan its future programs and services for veterans. The information gathered through these surveys will help VA identify the needs of veterans and then allocate resources in ways that ensure the needs of veterans can be met.

The NSV is conducted under the general authorization of U.S. Code Title 38, Section 527. This section authorizes the VA Secretary to gather data for the purposes of planning and evaluating VA programs. Westat, under contract to VA, conducted the 2001 NSV.

Data collected through the NSV enables VA to do several things:

- Follow changing trends in the veteran population;
- Compare characteristics of veterans who use VA services with those of veterans who do not;
- Study VA's role in the delivery of all benefits that veterans receive; and
- Update information about veterans to help the Department develop its policies.

The next section of this chapter provides a brief description of the 2001 NSV instrument, sampling, data collection, and weighting. Following this is a first glimpse at a critical set of findings provided by the 2001 NSV: what veterans reported about their access to information about VA benefits. The chapter concludes with an outline for the remainder of the report.

The examination of access to VA information is placed at the beginning of this report because of the central importance to the VA mission of communication with veterans. In the strategic planning process, VA has recognized the cross-cutting role of communications in delivering world-class service to veterans and their families. The analyses reported here will provide insight into how veterans might find out about their VA benefits and how satisfied they are with their access to information and will provide a context for understanding and interpreting the reports of survey responses in many of the chapters that follow.

1.1 The 2001 National Survey of Veterans

The 2001 National Survey of Veterans was conducted via telephone survey. The sampling approach utilized a dual frame methodology. The majority of cases were contacted using random digit dialing (RDD) methodology. This was augmented by a list sample selected from files of veterans who enrolled in VA health care or who received compensation or pensions from VA. Participation was voluntary and the information collected from each veteran is confidential.

Westat used computer-assisted telephone interviewing (CATI) methodology to administer the NSV 2001. Data collection began February 12, 2001, and ended November 12, 2001. A total of 20,048 interviews (12,956 from the RDD sample and 7,092 from the list sample) were completed. The interviewers achieved a screener response rate of 67.6 percent. The RDD sample achieved a 76.4 percent response rate for the extended interview. The list sample had a 62.8 percent overall response rate for the extended interview. The lower response rate for the list sample is attributable to difficulties in locating veterans whose administrative data were no longer accurate. Results were within one percent of Vetpop 2000¹ estimates, before benchmarking to the Census 2000 Supplementary Survey (C2SS)². Data collection also reached the completion targets overall and for the RDD and list samples.

NSV 2001 Target Population

The NSV 2001 target population includes veterans living in private households in the US and Puerto Rico. Thus, institutionalized veterans, homeless veterans, and veterans living outside the US and Puerto Rico are not covered in the survey. The reference period for the NSV

¹ The VetPop 2000 is a veteran population projection model developed by the Office of the Actuary, Department of Veterans Affairs. It is the official VA estimate and projection of the number and characteristics of veterans as of September 30, 2000. Details of all aspects of the development and content of the model are available from the Office of the Actuary, Department of Veterans Affairs, 810 Vermont Avenue NW, Washington DC 20420.

² The Census 2000 Supplementary Survey (C2SS) was a Decennial Census program designed to demonstrate the feasibility of collecting long form type information at the same time as, but separate from, the Decennial Census. Data collection ran January 2000 through December 2000. The C2SS provided an early look at the detailed characteristics of the U.S. population in 2000 to include demographic, social, economic, and housing data from a national sample of 700,000 households in 1,203 counties. Group quarters were not included in the sample.

2001 is the year 2000³. The under-coverage in the survey due to non-telephone households and the households with unlisted numbers belonging to “zero-listed telephone banks” was corrected with a raking procedure that used veteran population estimates from the C2SS. The control total of veteran population for the raking procedure was 25,196,036 veterans, which included the Puerto Rico veteran population. Although the C2SS did not include Puerto Rico, the raking procedure used the control totals that included Puerto Rico veteran population. The marginal totals for the Puerto Rico veteran population were estimated from 1990 Census counts using a model.

The current VA population model, VetPop2001, is based on several data sources, including administrative data from VA, DOD, and the Social Security Administration, and uses 1990 Census data as part of its baseline, since it was developed before the release of data from the 2000 Census. The universe is all veterans, including those in group-quarters, those residing in U.S. Island Territories and foreign countries, and veterans of the uniformed Public Health Service and National Oceanic and Atmospheric Administration. The VetPop2001 estimate of the number of veterans for the U.S. and Puerto Rico as of September 30, 2000, with adjustments based on the Census 2000 data on veterans by state, is 25.5 million.

Survey data were weighted to represent the entire veteran population residing in private households in the U.S. and Puerto Rico. Weighting incorporated the probability of selection, survey non-response, and households with more than one telephone number. Chapter 2 and Appendices B and C of this report contain a more detailed discussion of sampling and weighting procedures. Readers interested in additional information about sampling and weighting procedures may refer to the *2001 National Survey of Veterans Design and Methodology Final Report*.

VA Administrative and Survey Data Comparisons

NSV estimates differ from VA administrative data because of 1) differences in time frame, 2) survey errors, and 3) administrative data system errors. The time frame differences are due to NSV interviews being spread out over several months, February 12, 2001 through November 12, 2001, and each interview having its own time frame—12 months prior to the date

³ The data collection field period for the survey was February through November 2001. Nearly all of the survey items that address use or nonuse of VA Health Care Services use a reference period of “during the past 12 months.” Individual and household income questions are for the year 2000.

of the interview. Administrative data, on the other hand, are available for given fiscal years or at one point in time including at the end of the fiscal year. Survey error can be from veterans failing to recall all relevant events in the 12-month period or reporting events that occurred more than 12 months before the date of the interview. Administrative data system error can occur because of duplication or omission of records.

Two examples of differences between estimates and administrative records are:

- The VA outpatient care estimate from NSV 2001 is 4.0 million outpatients. VA administrative numbers were below the survey estimate—3.6 for FY 2000 and 3.7 million from for FY 2001. And
- The VA hospital care estimate from NSV 2001 is 555,000 patients. VA administrative counts were below the survey estimate—353,000 for FY2000 and 361,000 for FY2001.

The NSV 2001 also provided a second higher estimate of VA provided health care—5.2 million total VA health care unique counts. This second survey-based estimate was developed by including a special additional set of health care questions not asked on past national veterans surveys along with the VA inpatient and outpatient estimates. These questions asked the surveyed veterans about emergency room care, prescription medications, environmental hazards, psychological counseling, in-home health care and prosthetics care. Veterans, who had answered no to other questions on inpatient stay or outpatient visits, sometimes responded yes to these questions and indicated the care was received at VA or paid for by VA. Clearly some veterans did not think of these kinds of medical care without prompting. Also, VA inpatient and outpatient administrative records do not include counts of all veterans receiving these kinds of care.

Particularly noteworthy from the survey estimates are the: 1) estimated 273,000 VA (or VA paid) emergency room visits not included in the VA inpatient/outpatient counts, and 2) estimated 500,000 prescription medications without VA patient visits (The VA administrative pharmacy file does not show high enough fiscal year usage to explain these extra prescriptions estimated by the survey).

It is possible that the priority 7 veterans enrolling in VA health care (the number increased by 44 percent from FY2000 to FY2001) are either reporting intended use of the VA health care system or some usage is not being recorded by the VA administrative system. Also, differing time frames of VA administrative data and survey estimates could again explain some of the discrepancy.

VA administrative data show that 2.3 million veterans living in the United States or Puerto Rico received compensation payments in September 2000 and September 2001. The NSV 2001 estimates 2.6 million veterans received compensation payments over the survey interview period. It is possible that some of the veterans interviewed do not distinguish between military disability payments and VA compensation payments. Some veterans (an estimated 60,000) also

reported receiving pension and compensation payments when, in fact, veterans who have service-connected disabilities and non service-connected disabilities that qualify for pension must choose only one type of payment.

The NSV 2001 estimates 248,000 veterans were currently (2001) receiving non-service-connected disability pensions. The September 2001 VA administrative file shows a count of 346,000 veterans receiving a pension. VA administrative data for the end of FY 2000 show 362,149 veterans receiving pension payments.

One reason that the survey estimate may be lower is because interviewers only asked veterans who regarded themselves as having a disabling condition if they were currently (2001) receiving non-service-connected disability pensions. Based on other survey questions interviewers asked of all veterans on sources of 2000 family income, not all veterans receiving a VA pension consider themselves to have a disabling condition. In fact, if you base your estimate on sources of family income in the year 2000 reported in the survey, 413,000 veterans were receiving a VA non-service-connected disability pension. This second estimate is higher than the VA administrative records.

Estimates from the NSV 2001 should not be presented as official VA counts. But they are useful in distinguishing users and nonusers of VA programs and can be used to highlight possible problems with VA administrative record databases. It is tempting to view administrative records as true numbers, but it is important to remember that large and complicated administrative file systems can be subject to errors of duplication and omission.

Survey Data and Reporting Formats

Survey data displayed in each table of this report were evaluated for small sample sizes and precision. Data in any cell where the sample size for the denominator was less than 30 were replaced with the symbol “NR” for “Not Reported,” and this footnote appears at the bottom of these tables: “NR: Sample size for the denominator less than 30.” In any cell where the sample size for the denominator was between 30 and 59 inclusive or the relative standard error was greater than 30 percent, an asterisk was appended to the percent estimate and this footnote appears at the bottom of the table: “* Low precision and/or sample size for the denominator between 30 and 59.”

Estimates for the number of veterans for each item or category are rounded to the nearest hundred. Percent estimates have been reported with one decimal and rounded to add to 100 percent using a controlled rounding algorithm. The controlled rounding procedure rounds the first digit after the decimal upward for the percentages with the largest second digits after the decimal in such a way that the percentages add up to 100 percent.

1.2 Veteran Access to Information About VA Benefits

Access to benefit information (and knowledge that the information exists) is crucial for veterans to be able to use those benefits. As shown through repeated mentions in VA's 2001-2006 Strategic Plan, communication is a key element in VA's core values:

We are committed to open, accurate, and timely communication with veterans, employees, and external stakeholders.

We are committed to improved access for veterans and their families through facility location and design, and innovative uses of information technology.

VA's enabling goal is to "create an environment that fosters the delivery of One VA world-class service to veterans and their families *through effective communication* and management of people, technology, business processes, and financial resources." (Emphasis added.) One of the core sections of the 2001 NSV dealt with access to information about veteran benefits.

Respondents were first asked where they would go to access information about VA benefits. Respondents offered sources in their own words, and were encouraged to report up to six sources. Interviewers did not suggest any sources, but used the list of sources shown in Table 1-1 to record responses.

Two thirds (66.7 percent) of veterans reported that they would go to VA itself if they needed information about their VA benefits. About 12 percent of veterans said that they would use the VA toll free number and a similar proportion said they would use the VA web site. Less than 1 percent of veterans

Table 1-1. Percent distribution of veterans by sources of information about VA benefits

	Total
The Department of Veterans Affairs (VA)	66.6
VA: Toll-free telephone number	12.4
VA web site	12.2
Other Internet or web site	5.0
Veterans Service Organization (VFW, American Legion)	13.8
VA Benefits Booklet (Federal Benefits for Veterans and Dependents)	0.9
Social Security office	0.7
Another government agency	10.0
Senior citizens group (AARP)	0.2
Health advocacy group (MS Society; American Association for the Blind; Easter Seals; March of Dimes)	0.4
Doctor or doctor's office	0.7
Employer or former employer	0.2
Another veteran	1.7
Family or friends	2.1
Newspaper or magazine	0.7
TV or radio	0.1*
Some other person or place	5.3
Nowhere	3.9
Number of veterans†	25,196,000

*Low precision and/or sample size for the denominator between 30 and 59.

† Estimate of number of veterans is rounded to the nearest hundred; percent estimates will not sum to 100 because veterans could indicate more than one source of information about benefits.

reported that they would use the VA benefits booklet⁴. These responses suggest that veterans prefer to get their information directly from VA rather than from other agencies and that contact be personal or web-based rather than written. It may also be the case that veterans had the VA benefits booklet in mind when providing the general response 'VA', or that many veterans do not know about the booklet.

After a question about knowledge of VA benefits, the questionnaire asked veterans' satisfaction with benefits information. Table 1-2 presents veterans' responses to this item.

⁴ The VA benefits booklet is a common reference for the pamphlet entitled, *Federal Benefits for Veterans and Dependents*, published by the Department of Veterans Affairs, Office of Public Affairs.

Table 1-2. Percent distribution of veterans by satisfaction with ability to get information about VA benefits

	Total
Very satisfied	15.4
Somewhat satisfied	30.4
Neither satisfied nor dissatisfied	24.9
Somewhat dissatisfied	13.6
Very dissatisfied	9.2
Don't need to know anything	2.0
Unknown	4.5
Total	100.0
Number of veterans†	25,196,000

† Estimate of number of veterans is rounded to the nearest hundred.

About 46 percent of veterans said that they were satisfied with their ability to get the information they need about veterans' benefits. A sizeable percentage, however, said they were dissatisfied or very dissatisfied with their access to information (22.8 percent combined). This suggests that for many veterans, access to information about veterans' benefits may be a barrier to awareness and understanding of the benefits and services available to them.

The next question asked whether veterans needed any information about their veterans' benefits in the past year. As shown in Table 1-3, slightly more than 20 percent of veterans reported that they needed information about their veterans' benefits in the past year.

Table 1-3. Percent distribution of veterans by need for information about VA benefits in the past year

	Total
Yes	21.5
No	77.9
Unknown	0.6
Total	100.0
Number of veterans†	25,196,000

† Estimate of number of veterans is rounded to the nearest hundred.

Table 1-4 examines the interaction between these last two items. The results show a difference in satisfaction according to need for information. Veterans who said they needed information were more likely than those overall to report that they were either somewhat or very dissatisfied with their ability to get information (37.9 percent versus 22.8 percent). This difference comes primarily from the neutral (“neither satisfied nor dissatisfied”) category. This is logical, as those needing information are more likely to have strong feelings one way or the other than are those who say they have not needed information on their benefits.

Table 1-4. Percent distribution of veterans by satisfaction with ability to get veterans benefit information, among all veterans and among veterans needing information

	All veterans	Veterans needing information
Very satisfied	15.4	14.4
Somewhat satisfied	30.4	30.3
Neither satisfied nor dissatisfied	24.9	14.9
Somewhat dissatisfied	13.6	20.0
Very dissatisfied	9.2	17.9
Don't need to know anything	2.0	0.6
Unknown	4.5	1.9
Total	100.0	100.0
Number of veterans†	25,196,000	5,411,700

† Estimates of number of veterans are rounded to the nearest hundred.

The final question on information needs asks whether the respondent has access to the Internet. As shown in Table 1-5, more than 60 percent of veterans reported having access to the Internet.

Table 1-5. Percent distribution of veterans by access to the Internet

	Total
Yes	61.9
No	38.0
Unknown	0.1
Total	100.0
Number of veterans†	25,196,000

† Estimate of number of veterans is rounded to the nearest hundred.

In summary, VA was seen as the primary source for information about veterans' benefits. Almost one-half of veterans said they were satisfied with their ability to get this information, with a quarter reporting being neither satisfied nor dissatisfied. When focused on veterans who reported actually needing information in the past year, dissatisfaction with their ability to get information went up markedly. Finally, most, but not an overwhelming percentage, of veterans report having Internet access. These results suggest that VA should continue its efforts to facilitate communication with veterans via the Internet. The VA web site, while important, is still evolving as a resource for veterans.

1.3 Organization of the Report

The remainder of this report provides analysis on a number of topics and content areas of interest to VA, in addition to several appendices. The content of each of these sections is as follow:

- Chapter 2 describes the study protocol, including basic information on study design and data collection.
- Chapter 3 provides a descriptive profile of the 2001 veteran population.
- Chapter 4 describes veterans' military service experience.
- Chapter 5 discusses the health status of veterans including medical conditions and limiting disabilities.
- Chapter 6 presents data on the types of medical care veterans received over the last year, where that care was obtained, and how the cost of the care was paid.
- Chapter 7 describes veterans' knowledge and use of Veterans Benefits Administration Programs including compensation and pension programs, educational programs, vocational rehabilitation and employment programs, the Home Loan Guaranty Program, and the VA life insurance programs.
- Chapter 8 provides information on veterans' knowledge and use of the Veteran Burial Benefits.
- The appendices to the report contain the survey instrument and detailed information on the sampling and weighting methodology.