

**Veterans' Rural Health Advisory Committee Recommendations
and Department of Veterans Affairs Responses**

October 5–7, 2020

RECOMMENDATION 1: Rural Transportation. Expand VA's highly rural transportation grant program to include places designated as rural. This expansion should include an additional \$5M in funding for the program.

House Report (H.R.) 116-63 to accompany H.R. 2745, Military Construction, Veterans Affairs, And Related Agencies Appropriations Bill, 2020, acknowledges gaps in rural transportation and recommends using \$5M of the funds provided for the Veterans Health Administration (VHA) Office of Rural Health (ORH) for a pilot program to provide transportation grants for rural Veterans. The Veterans Rural Health Advisory Committee (VRHAC) fully supports this pilot and recommends VA take action to work with Congress to secure legislative authority to create this program.

VA already has an effective and well administered Highly Rural Transportation Grant Program (HRTG) (Public Law 111-163; 38 U.S.C. §1710); therefore, the VRHAC recommends ORH partner with the Veterans Transportation Program to create the expansion of HRTG to include places designated as rural.

VA RESPONSE: VA appreciates the VRHAC raising this concept for legislative action to assist in rural transportation needs; however, VA is constrained from endorsing or proposing legislation prior to full Administration review and approval.

RECOMMENDATION 2: Rural Women Veteran Peer Support. Develop at least one peer or social support group in each Veterans Integrated Services Network (VISN) to engage and support rural women Veterans.

With the growth in the number of rural women Veterans and the challenges they face in accessing VA for care, particularly in rural America, VRHAC endorses the creation of VISN-level social support groups specifically to serve as a conduit for communication with women Veterans.

VRHAC understands VA already has an outreach structure, and encourages VA to consider using existing structures, such as the Community Veterans Engagement Board (CVEB), to create these support groups.

VA RESPONSE: Concur. Peer support groups can be an important holistic intervention for women Veterans and placing an emphasis on this type of resource for rural women Veterans is especially significant. The Women Veterans Network (WoVeN) is a national peer support program that is facilitated by women Veterans for women Veterans. WoVeN was started in 2017 by Tara Galovski, Ph.D., and Amy Street, Ph.D., of Boston University School of Medicine and the Women's Health Science Division of the VA's

National Center for Posttraumatic Stress Disorder. WoVeN currently operates outside of VA to connect women Veterans with a social support network and empower them with information, education and resources that are central to improving their quality of life.

To implement WoVeN in VA, VA Peer Specialists will be trained to conduct WoVeN groups, which will be offered at VA facilities. Rural VA facilities will be prioritized, and WoVeN peer support groups will be available at a minimum of one rural VA site per VISN. VA clinicians will be able to easily refer women Veterans to this VA-based peer support resource.

The VA version of WoVeN will be based on WoVeN's existing successful community model and will follow the structured WoVeN group curriculum. The VA Peer Specialists who facilitate WoVeN peer support groups will offer a telehealth option to maximize access for women Veterans, including those who live in rural areas. The VA WoVeN program also will have ready access to VA's national network of Women's Mental Health Champions at each VA medical center, who can facilitate referrals to the program and serve as a resource if a warm hand-off for any mental health treatment is necessary. In addition, women Veteran participants will have access to the established WoVeN listserv, newsletter and social media platform.

RECOMMENDATION 3: Enrollment of Rural Women Veterans. Establish a comprehensive program, in coordination with the Advisory Committee on Women Veterans and community partners, to enhance and support initiatives to increase enrollment of rural women Veterans.

VRHAC heard from women Veterans at various stages of transition, and it is clear that enrollment in VA for health care services poses greater challenges for women Veterans than for male Veterans. VRHAC endorses the expansion of any existing programs that reach out to rural women Veterans to make the enrollment process easier and to encourage enrollment throughout the transition process and beyond, thus reaching women Veterans in all corners of rural America.

VA RESPONSE: Concur in principle. Women Veterans' access to VA health care continues to be an important issue of interest for VA's Advisory Committee on Women Veterans (ACWV). For rural women Veterans, desire to enroll can be impacted by their proximity to gender-specific services and their perception of VA. Access starts with enrollment and education about what VA has to offer. The ACWV, which was established by Congress to advise on the Department's administration of benefits and services for women Veterans, welcomes opportunities to examine barriers that limit women Veterans from accessing the benefits and services that they earned through their military service and to provide recommendations that improve existing programs and initiatives.

VA's Center for Women Veterans will work with the VHA ORH, Office of Women's Health and other program offices to ensure that the ACWV receives updates on VA's

programs for rural women Veterans and is kept abreast of trends demonstrated in this population. This collaboration will enable the ACWV to examine how VA's programs impact rural women Veterans' access to care; examine how VA outreaches to rural women Veterans to encourage enrollment and what strategic partnerships would be beneficial; identify gaps in services necessary to meet the unique needs of rural women Veterans and practices that discourage enrollment; and consider if recommendations should be made to address VA's programs that are designed to enhance and support increased enrollment of rural women Veterans.

VA recognizes there is a disparity in enrollment by gender and is actively engaged in activities to facilitate women Veteran enrollment across the Nation to include rural areas. To inform women Veterans about benefits and services, VA established a Women Veterans Call Center (WVCC), 1-855-VA-WOMEN, in 2013. The WVCC responds to incoming calls from women Veterans, their families and caregivers, and also makes outgoing calls. Services expanded in 2016 for a chat feature and again in 2019 for a text option. The WVCC outgoing contact is to directly outreach women Veterans who are not enrolled or using VA health care. Since 2013, the WVCC has made over 1.7 million outgoing calls and mailed out over 73,000 information packets.

The Women's Health Transition Training program was developed by the Office of Women's Health in collaboration with Department of Defense and the Transition Assistance Program. This 4-hour, voluntary course is taught by a woman Veteran who uses VA health care and is designed to educate Service women across all military services who are transiting out of the military on the following areas: (1) the range of available women's health care services such as maternity care, contraception, gynecology, cancer screenings and whole health as well as mental health care services offered by VA, (2) the process and eligibility requirements for enrollment into VA health care and (3) guidance for how to stay connected with other women Veterans through women-specific networks, resources and programs post-service. Since the COVID 19 pandemic, the program is being hosted virtually across all branches of the military.

On a national level, the Office of Women's Health participates in social media events like Facebook Live, Camouflage Sisters and Rally Point that reach thousands of women Veterans. In addition, on a monthly basis, the Office of Women's Health develops outreach materials as a part of the Women Veterans Health Outreach Initiative. These resources feature either a health theme or a culture change theme that staff can use to conduct outreach locally to women Veterans and also distribute to external and internal stakeholders. The campaign heavily uses social media to reach women Veterans.

On a local level, facilities host Town Halls and other outreach events with external partners to increase awareness and access to services.

Department of Veterans Affairs
July 2021