

Serving Pacific Islander Veterans

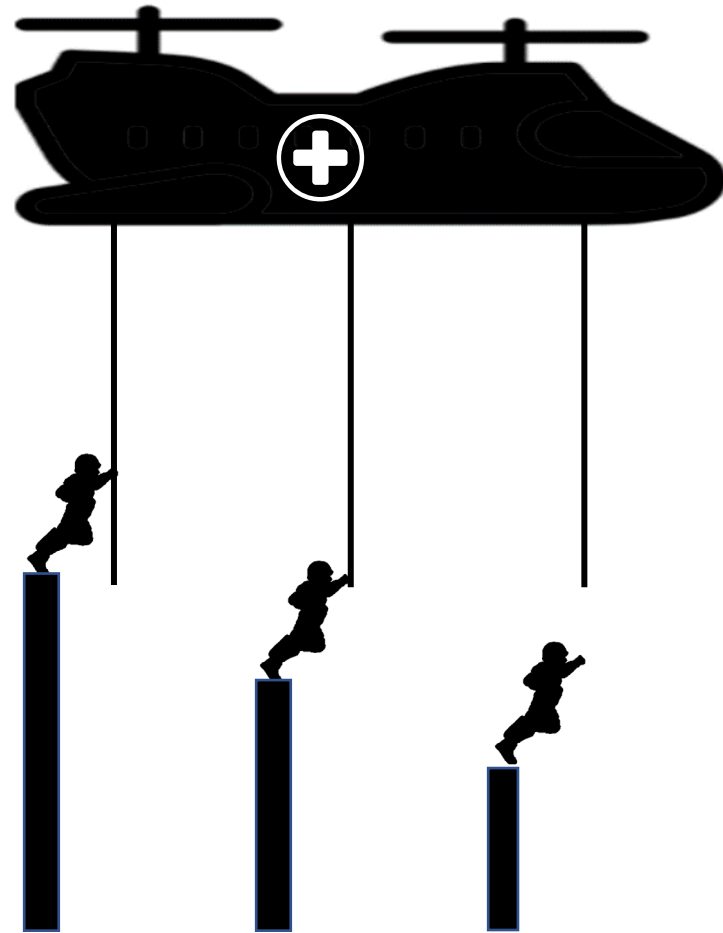
Ernest Moy, MD, MPH

Executive Director, VHA Office of Health Equity

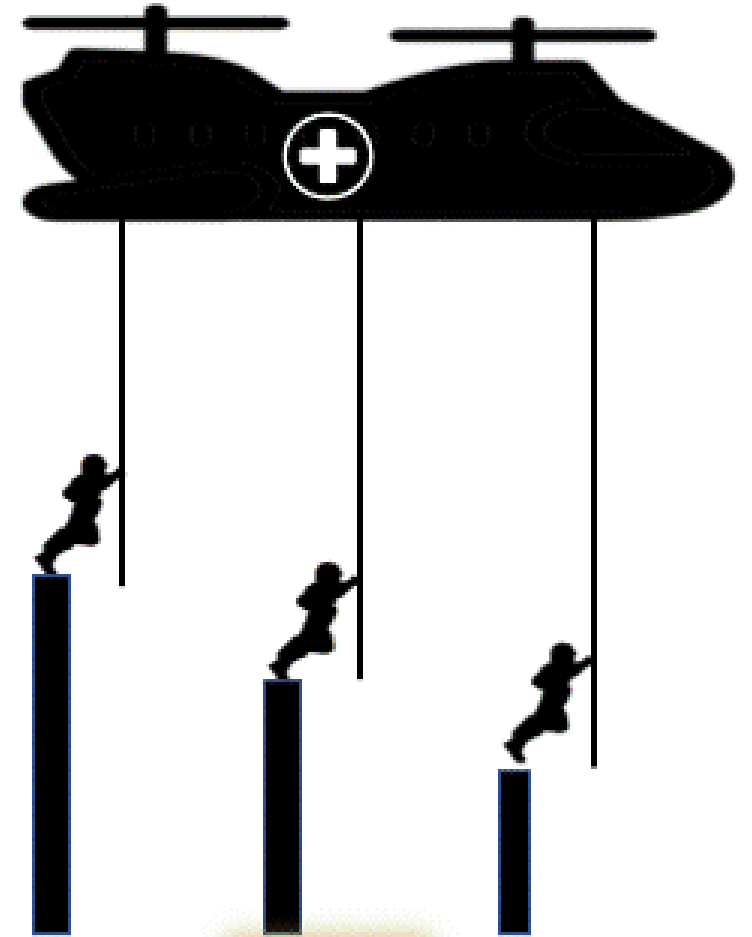
https://www.va.gov/HEALTHEQUITY/docs/NVHER_2021_Asian_NHOPI_Veteran_Chartbook_05242022.pdf

Health Equity = All Veterans get support that helps them achieve their highest level of health

We're not all in the same place. **Equity** is reaching out to those in need, so no one is left behind.



Equality

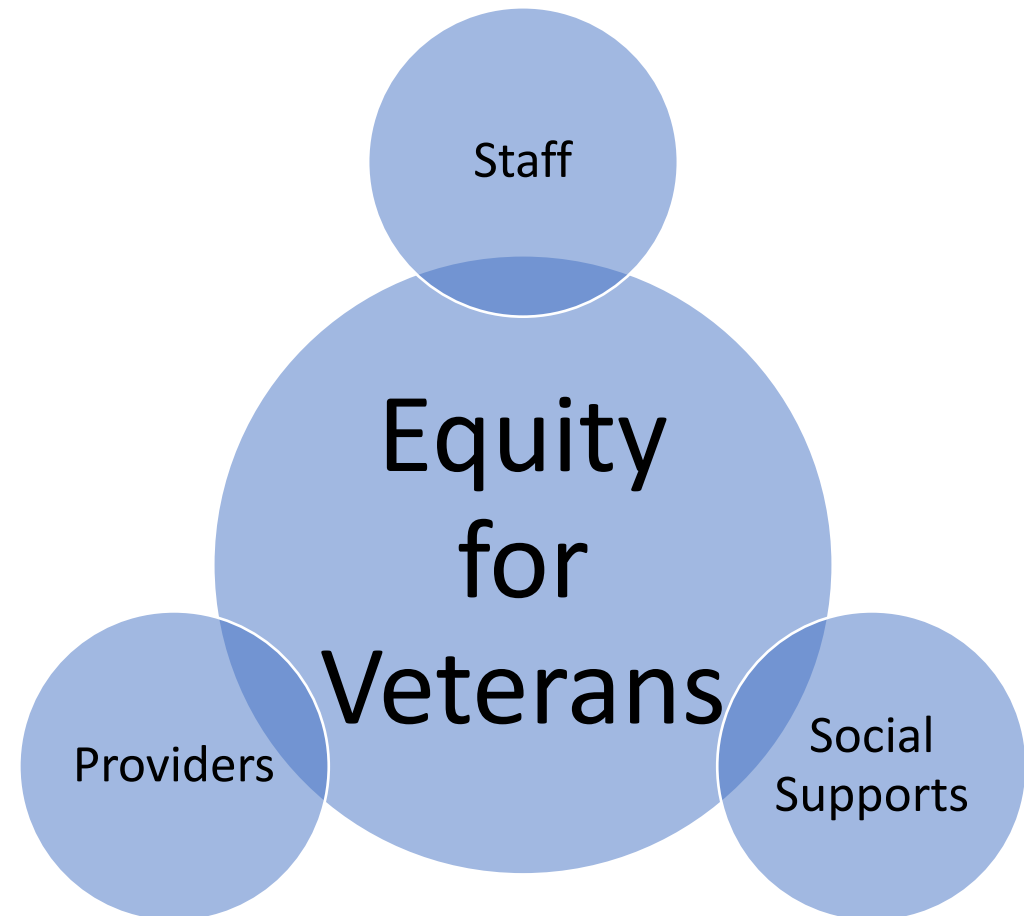


Equity

Leave No Veteran Behind

What is VA doing to promote equity?

1. We work with **Staff** to ensure a diverse and inclusive environment.
2. We work with **Social Supports** to address social risks.
3. We work with **Providers** to reduce health inequities in health care.



Inclusivity Campaign

Five Inclusive Habits (F.O.C.S.E) Pronounced FOCUS

Fair

Exhibit a disposition that is free of favoritism and bias; impartiality

Open

Be free of a closed mind and be receptive to new ideas, viewpoints, and people

Cooperative

Work or act together willingly for common purpose or benefit

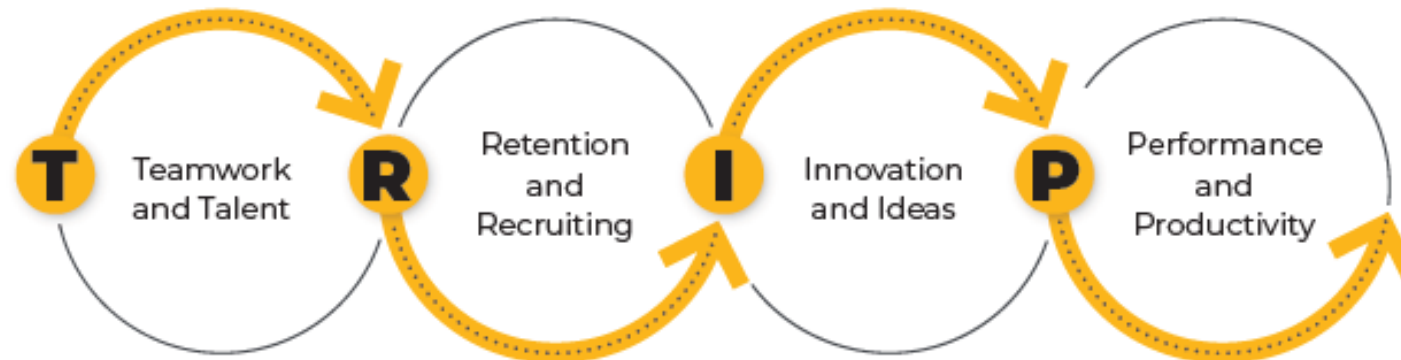
Supportive

Constructively help others

Empowering

Help others contribute to their full potential

When managing in an inclusive way, we harness diverse ideas, identities, and information. Using inclusive behaviors positively impacts the T.R.I.P. components.



Quality improvement (QI) initiative funded by VA Office of Health Equity that aims to systematically identify and address social risks

ACORN Project Co-Leads: Alicia Cohen, Meaghan Kennedy, and Lauren Russell, in partnership with Office of Health Equity and National Social Work Program Office



Identify Needs in 10 Domains Using ACORN Screening Tool



Address Needs through Resource Guides and Referrals

Domains Screened:



Employment



Technology



Social Isolation & Loneliness



Legal



Transportation



Education



Interpersonal Safety



Food Security



Housing



Utilities



ACORN

SCREENING VETERANS FOR SOCIAL NEEDS

ACORN Assessing Circumstances & Offering Resources for Needs (ACORN) Screening

Last Name: _____ Date: _____

These questions and statements are designed to identify any unmet need(s) you might have, so the VA can follow up with the appropriate resources and supports. Please respond to each question or statement to the best of your ability.

1) In the past two months, have you been living in stable housing that you own, rent, or stay in as part of a household?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2) Are you worried or concerned that in the next two months you may NOT have stable housing that you own, rent, or stay in as part of a household?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3) Where have you lived for MOST of the past two months?	<input type="checkbox"/> Apartment/House/Room (no government subsidy) <input type="checkbox"/> Apartment/House/Room (with government subsidy) <input type="checkbox"/> With Friend/Family <input type="checkbox"/> Motel/Hotel	<input type="checkbox"/> Short-term Institution like Hospital, Rehab Center, Drug Treatment Center <input type="checkbox"/> Homeless Shelter <input type="checkbox"/> Anywhere outside (e.g. Street, Vehicle, Abandoned Building) <input type="checkbox"/> Other
4) Are you currently without a place to stay?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5) Please answer how often the following statement was true for you. Within the past 12 months, you worried whether your food would run out before you got money to buy more.	<input type="checkbox"/> Often True <input type="checkbox"/> Sometimes True	<input type="checkbox"/> Never True
6) Please answer how often the following statement was true for you. Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.	<input type="checkbox"/> Often True <input type="checkbox"/> Sometimes True	<input type="checkbox"/> Never True
7) Do you need help getting food for this week?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8) How often do you have trouble paying for your utilities (i.e., electric, gas, oil, water, or phone)?	<input type="checkbox"/> Often <input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
9) Has the electric, gas, oil, or water company threatened to shut off services in your home?	<input type="checkbox"/> Yes <input type="checkbox"/> Already Shut Off	<input type="checkbox"/> No
10) How often has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?	<input type="checkbox"/> Often <input type="checkbox"/> Sometimes	<input type="checkbox"/> Never

(Continued)

Social Support Resources

VA Bedford Community Recovery Connections Team (CRCT)
 General Line: (781) 687-3400 or contact Jessica Mack at (781) 687-2864

Housing Resources

24/7 National Call Center for Homeless Veterans: 1-877-424-3838

Healthcare for Homeless Veterans (HCHV)
 Contact Tim Dr...
 Walk-in Clinic Ho...
 HCHV provides v...
 housing. Services...
 care, mental heal...
 providing individu...

Food and Nutrition Resources

VA Bedford's Monthly Free Produce Market
 (781) 687-3076
 Occurs Monthly; Third Thursday of Every Month Behind Building 61
 VA Bedford's Free Produce Market is a monthly drive-up produce market for Veterans and service members. First-time visitors will complete an easy one-time registration on-site. In the event of severe weather, please call (781) 687-2000, ext. 3076 the morning of the event to confirm the market is still on.

Supportive S...
 1-877-4AIDVET
 SSVF aims to im...
 management, an...

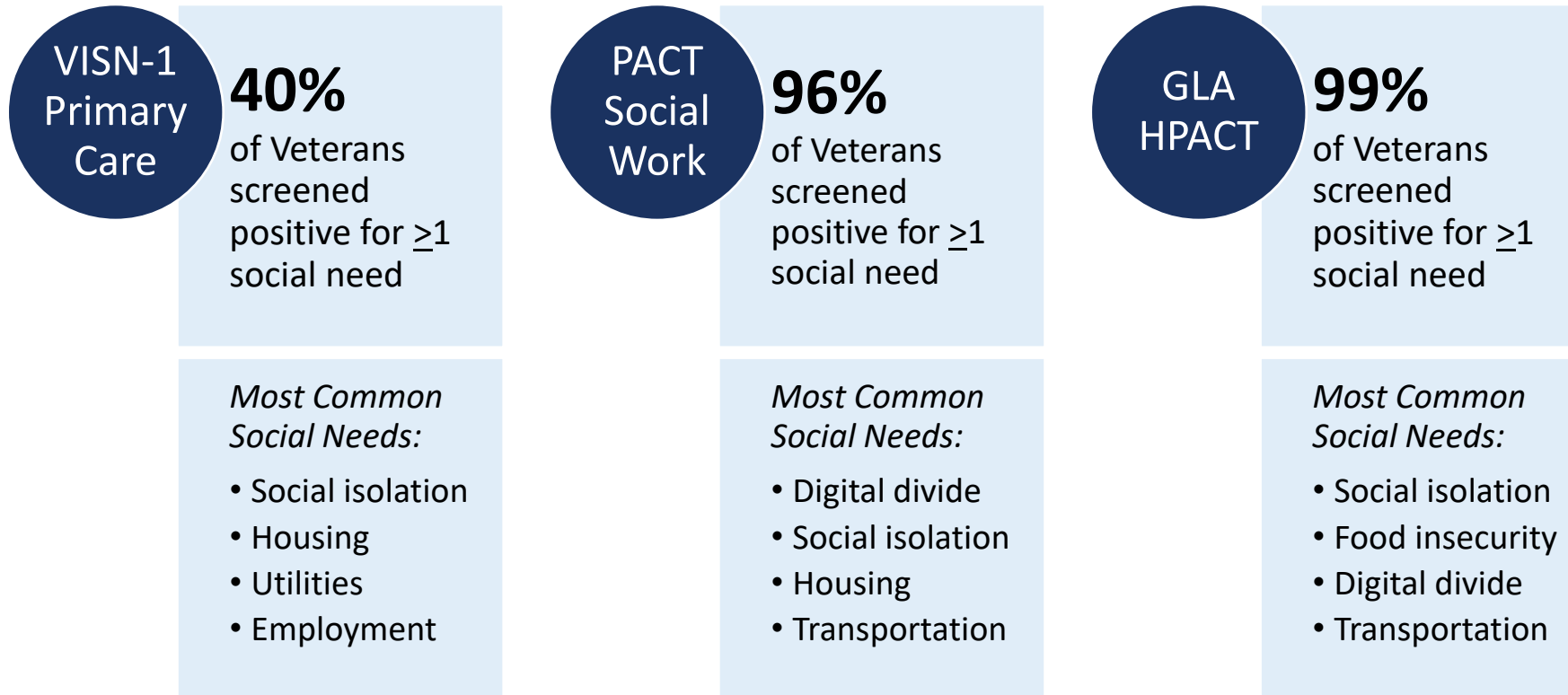
Supplemental Nutrition Assistance Program (SNAP)
 Danika Castle at (781) 275-6825 or Christopher Bang at (781) 275-7727
 Application Hotline: 1-800-249-2007 (Monday - Friday 8:45am - 5:00pm)
<https://dtaconnect.eohhs.mass.gov>

SNAP benefits are administered by the Department of Transitional Assistance (DTA) and provide a monthly benefit to buy nutritious foods. For Bedford residents 60 years or older, please call Danika Castle for eligibility information and assistance with the application. For Bedford residents 59 years and younger, please call Christopher Bang. You may also call the hotline or the local DTA office nearest you:

DTA Office of Lowell (978) 446-2400	DTA of Lawrence (978) 725-7100	DTA of Revere (781) 286-7800
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Veterans who express needs receive geographically-tailored resource guides, support navigating resources, and/or Social Work referrals

ACORN has been implemented successfully in VA clinical settings since 2018.



Digital needs questions were piloted within two rural VA primary care clinics.

575 Veterans were screened between July 2021 and June 2022.

46% of Veterans screened positive for ≥ 1 digital need

Digital needs reported:

- No access to any device (22%)
- Lack of reliable or affordable internet (12%)
- Often/sometimes running out of phone minutes and/or data (9%)
- Interest in setting up a telehealth visit (11%)
 - Of those, more than half (56%) need help learning how to use a device for telehealth





U.S. Department
of Veterans Affairs



National Veteran Health Equity Report 2021 – Asian and Native Hawaiian and Other Pacific Islander Veteran Chartbook

Focus on Veterans Health Administration
Patient Experience and Health Care Quality

US Department of Veterans Affairs
Veterans Health Administration
Health Equity-Quality Enhancement Research Initiative
National Partnered Evaluation Center
VA Greater Los Angeles Healthcare System, Los Angeles, CA

May 2022

Office of Health Equity Veterans Health Administration Department of Veterans Affairs



MAY IS ASIAN AMERICAN AND
PACIFIC ISLANDER HERITAGE MONTH

ASIAN AMERICAN VETERANS DISPARITIES INFORMATION BRIEF

Sumin Jeong, BSN, Fellow, Office of Health Equity, Camilla B. Pimentel, MPH, PhD, Center for Healthcare Organization and Implementation Research (CHOIR) and New England Geriatric Research Education and Clinical Center, Lauren Korshak, DHealth(c), MS, ACSM-CEP, Office of Health Equity, Julia M. Whealin, PhD, Informatics Research Director, VA Pacific Islands Health Care System, Jack Tsai, PhD, VA National Center on Homelessness Among Veterans, Jinhui Li, PhD, VA Bedford Healthcare System, Zenith Rai, BA, Center for Healthcare Organization and Implementation Research (CHOIR)

INTRODUCTION

The Veterans Health Administration (VHA) serves an increasingly racially and ethnically diverse Veteran population. Equitable access to high-quality care for all Veterans is a major tenet of the VA healthcare mission. The Office of Health Equity (OHE) champions the elimination of health disparities and achieving health equity for all Veterans.

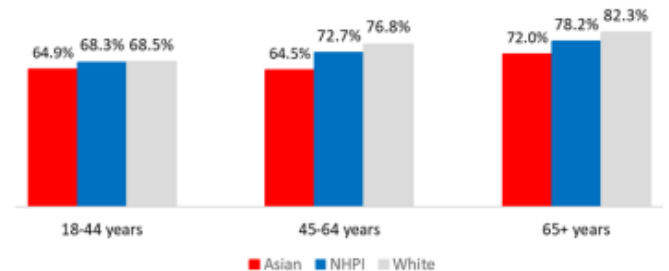
There are an estimated 292,164 Veterans of Asian American, Native Hawaiian, and Pacific Islander (AANHPI) descent. AANHPI Veterans are more likely than Veterans of other racial/ethnic groups to have greater levels of education, income, and use of private health insurance. They report poorer overall mental health, however, and lower use of VA and non-VA mental health services.

Vietnam-era AANHPI Veterans often faced race-related traumas, including racial stigmatization by their comrades-in-arms and being mistaken for “the enemy.” Societal stereotypes of AANHPIs as “model minorities” with few social and psychological issues, however, may lead to their unique needs being unrecognized and understudied.

The VA’s Survey of Health Experience of Patients (SHEP) is used to assess Veterans’ experiences with VA. One measure assessing patient-centricity of Veterans’ care asks, “in the last 6 months, how often did clerks and receptionists at this provider’s office treat you with courtesy and respect?”

In the most recent SHEP survey data, AANHPI Veterans reported feeling that they were treated with courtesy and respect at lower rates than White Veterans. This disparity was especially noticeable for AANHPI Veterans who are aged 45–64 and 65+ compared to White Veterans in the same age groups.

Percent of of Asian American and Native Hawaiian/Pacific Islander Veterans Who Reported Always Being Treated by Staff with Courtesy and Respect



Source: SHEP Survey, FY 2016–2019



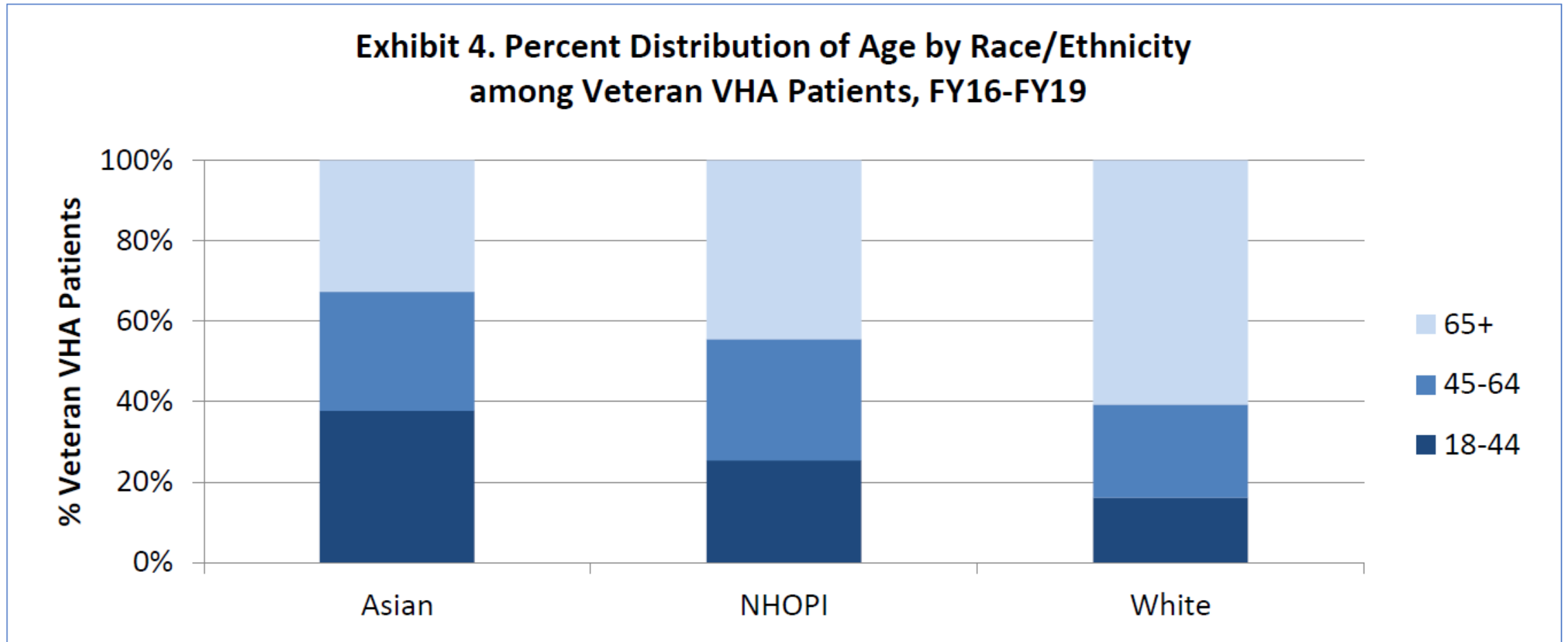
U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Health Equity

Asian Native Hawaiian Pacific Islander Chartbook Metrics

- Demographics
- Patient Experiences
 - Access to Care
 - Person-Centered Care
 - Care Coordination
- Health Care Quality
 - Effective Treatment
 - Clinical Preventive Services
 - Lifestyle Modification

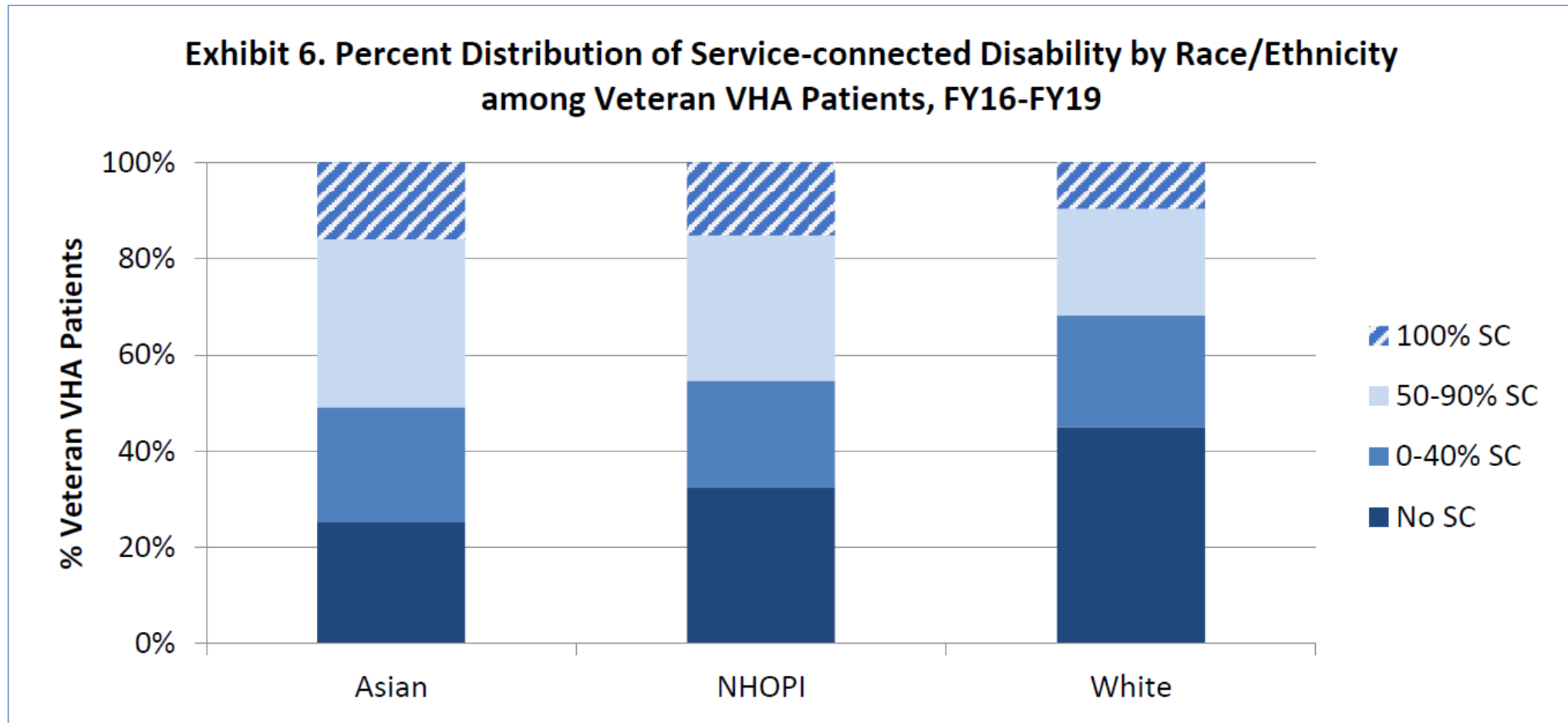
Asian & NHPI VHA users are younger than White VHA users.

Age Group by Race/Ethnicity

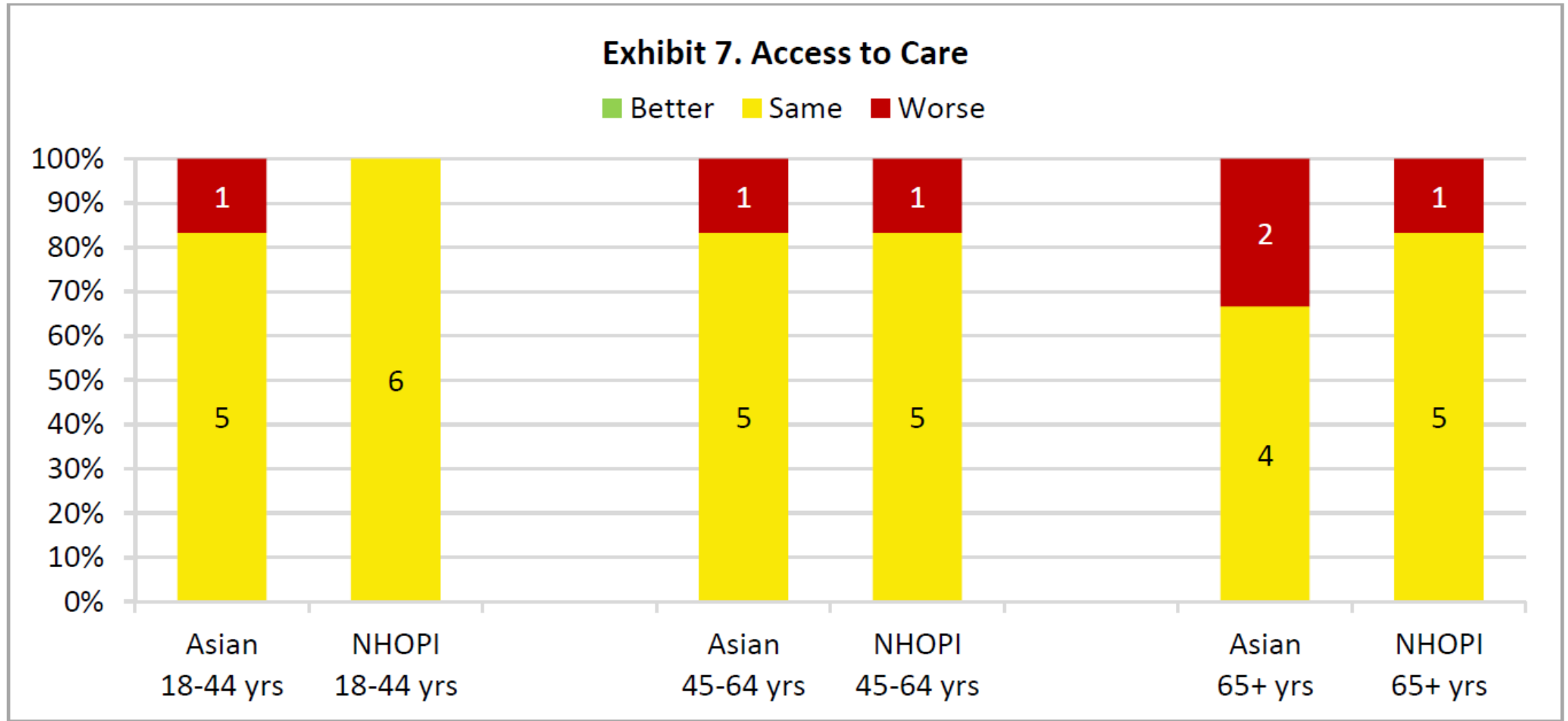


Asian & NHPI VHA users have more service-connected disability than White VHA users.

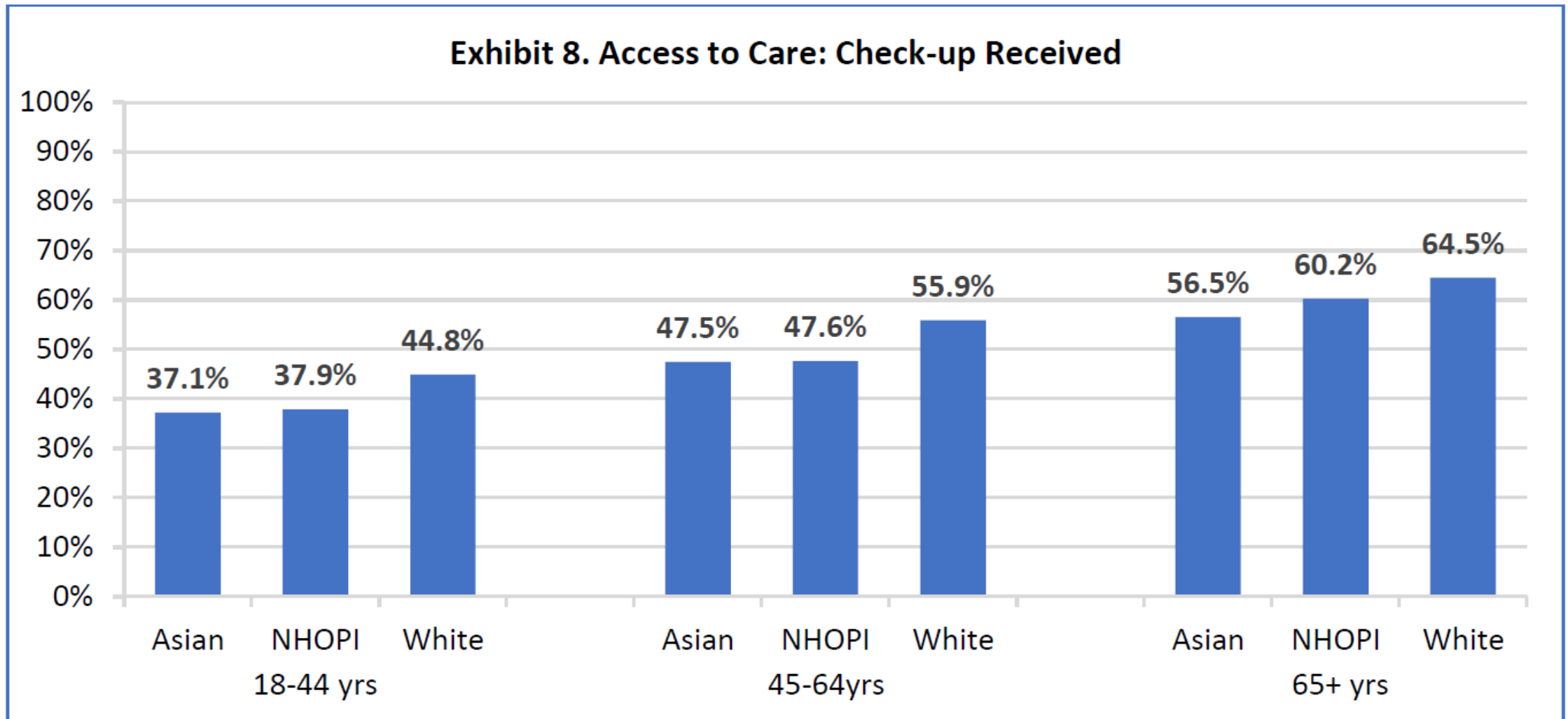
Service-connected Disability Rating by Race/Ethnicity



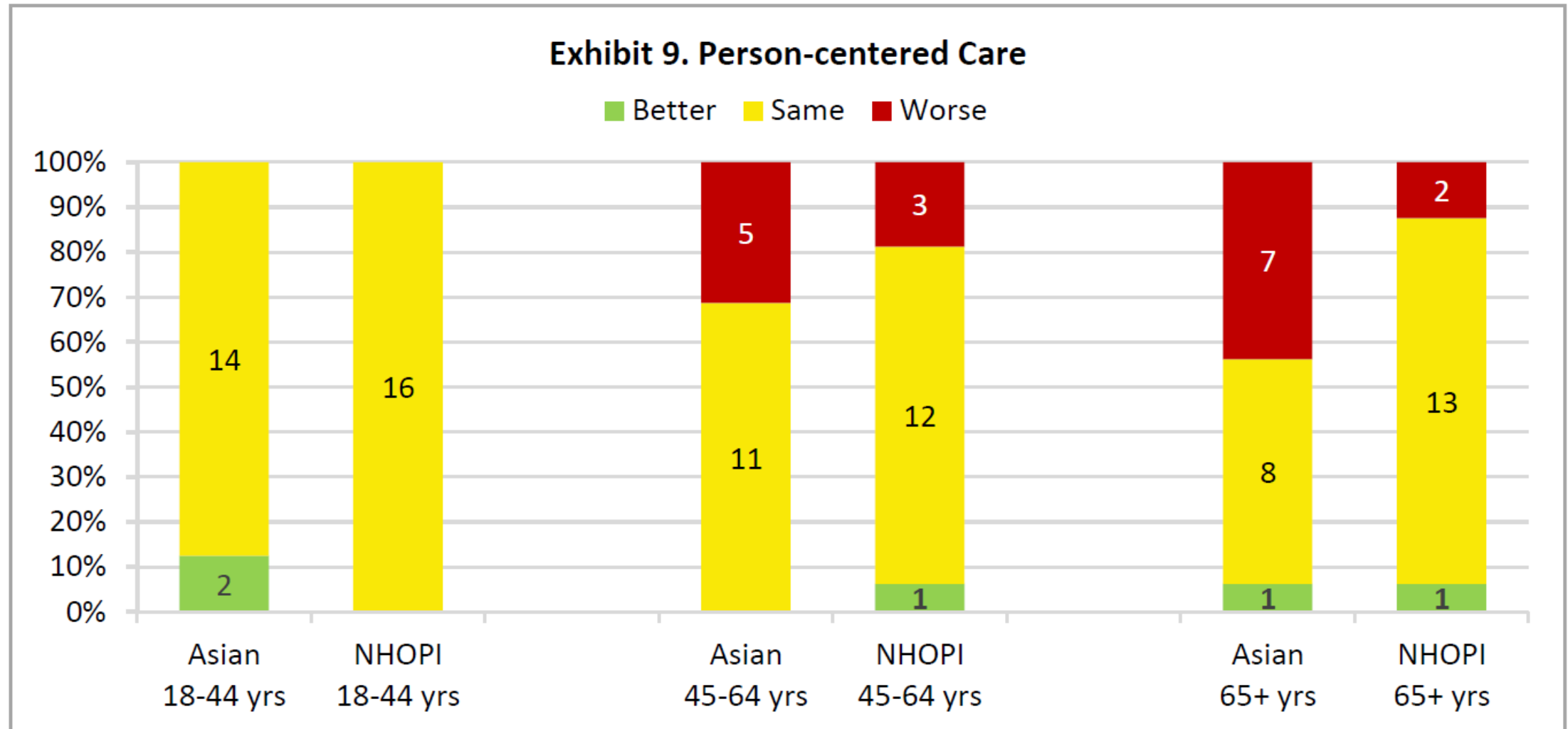
Asian & NHPI VHA users report problems with access to care.



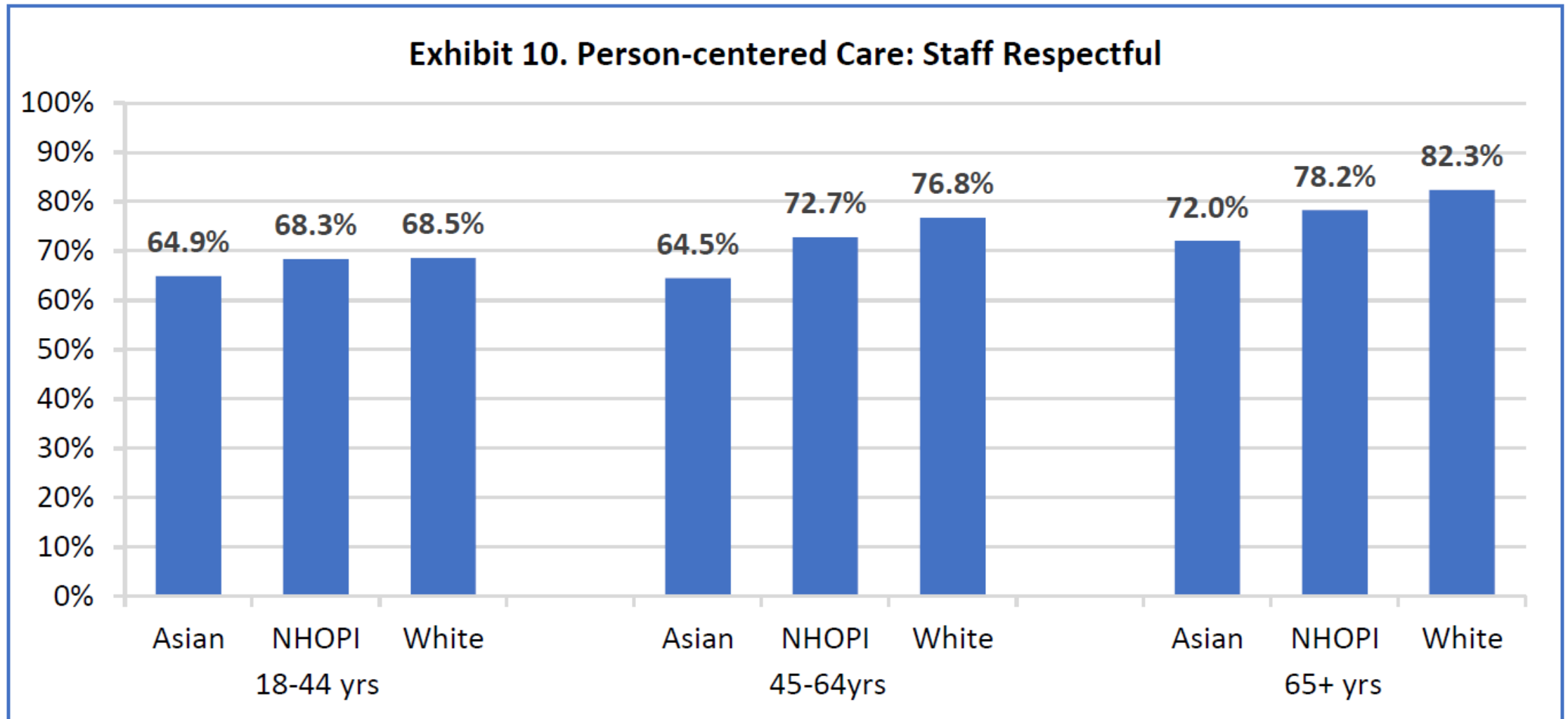
Asian & NHOPI VHA users are less likely to have check-ups at VA.



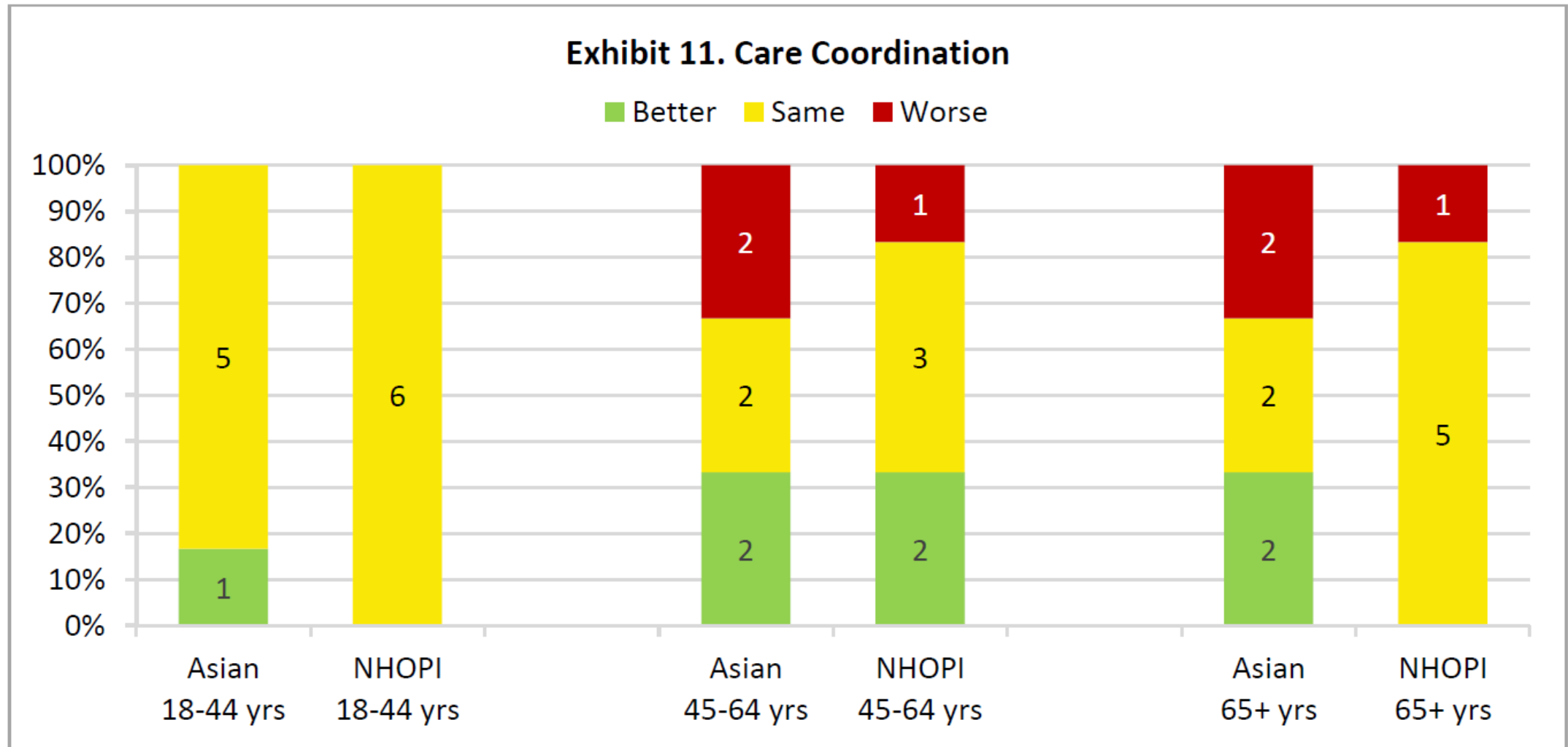
Asian & NHOPI VHA users report problems with person-centered care.



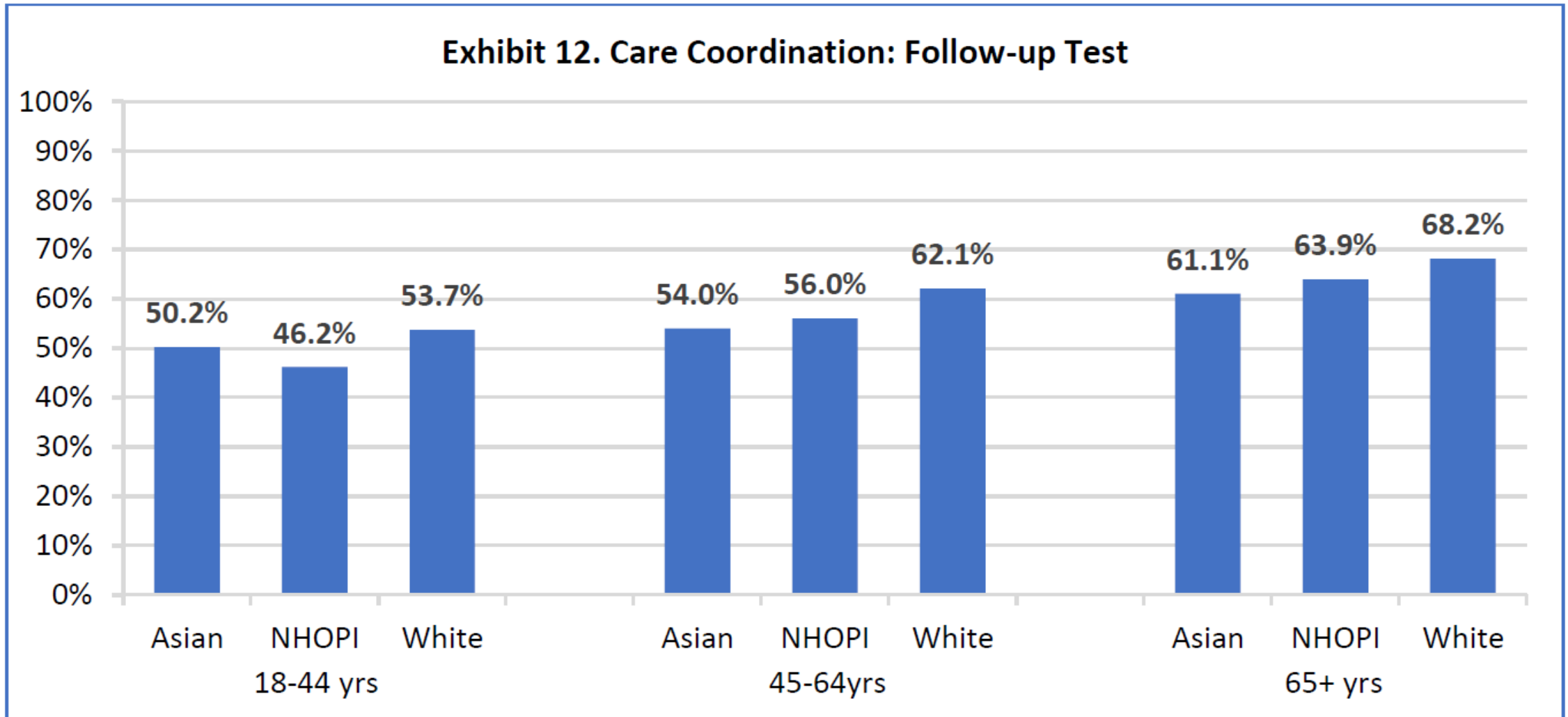
Asian & NHPI VHA users are less likely to report VA staff are always respectful.



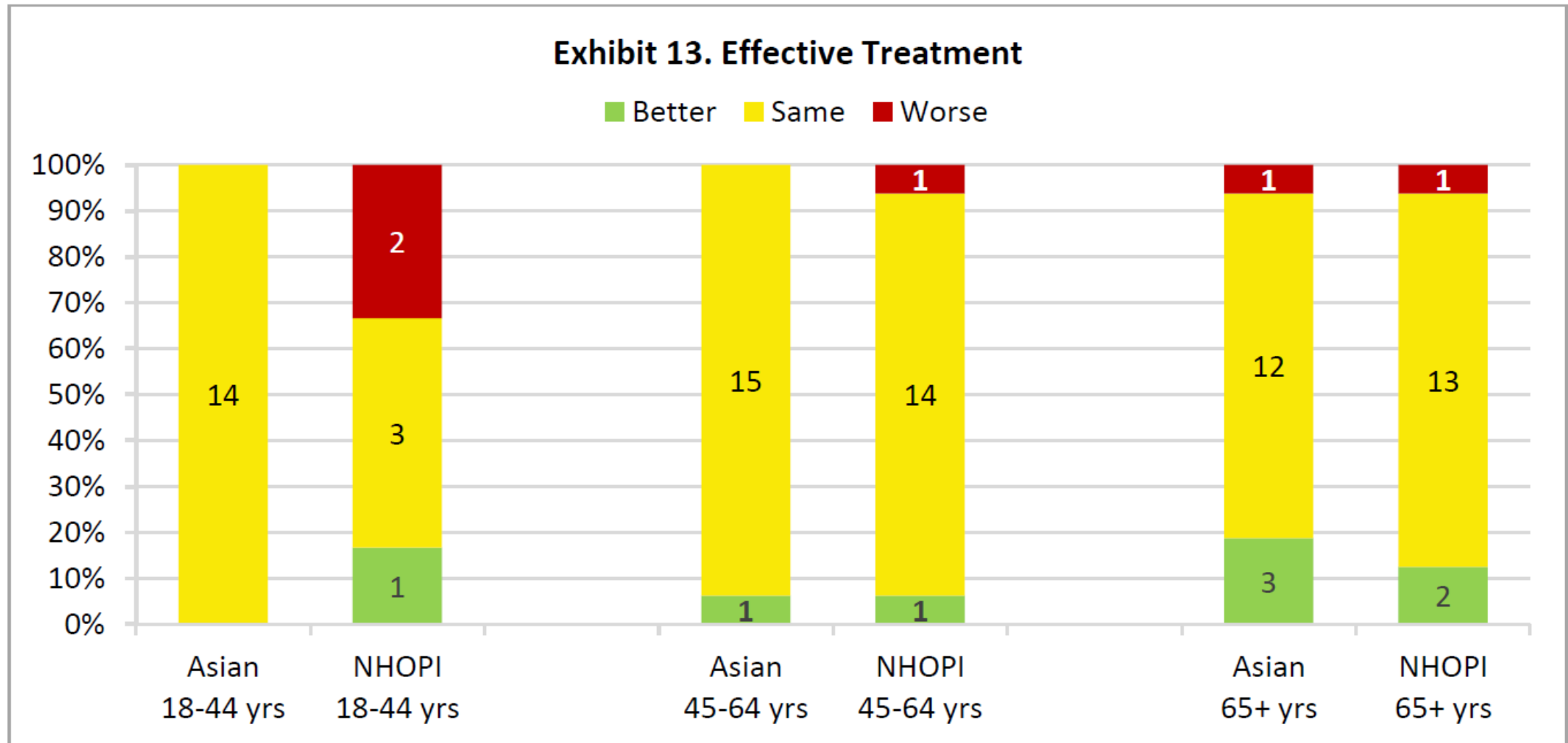
Asian & NHOPI VHA users report problems with care coordination.



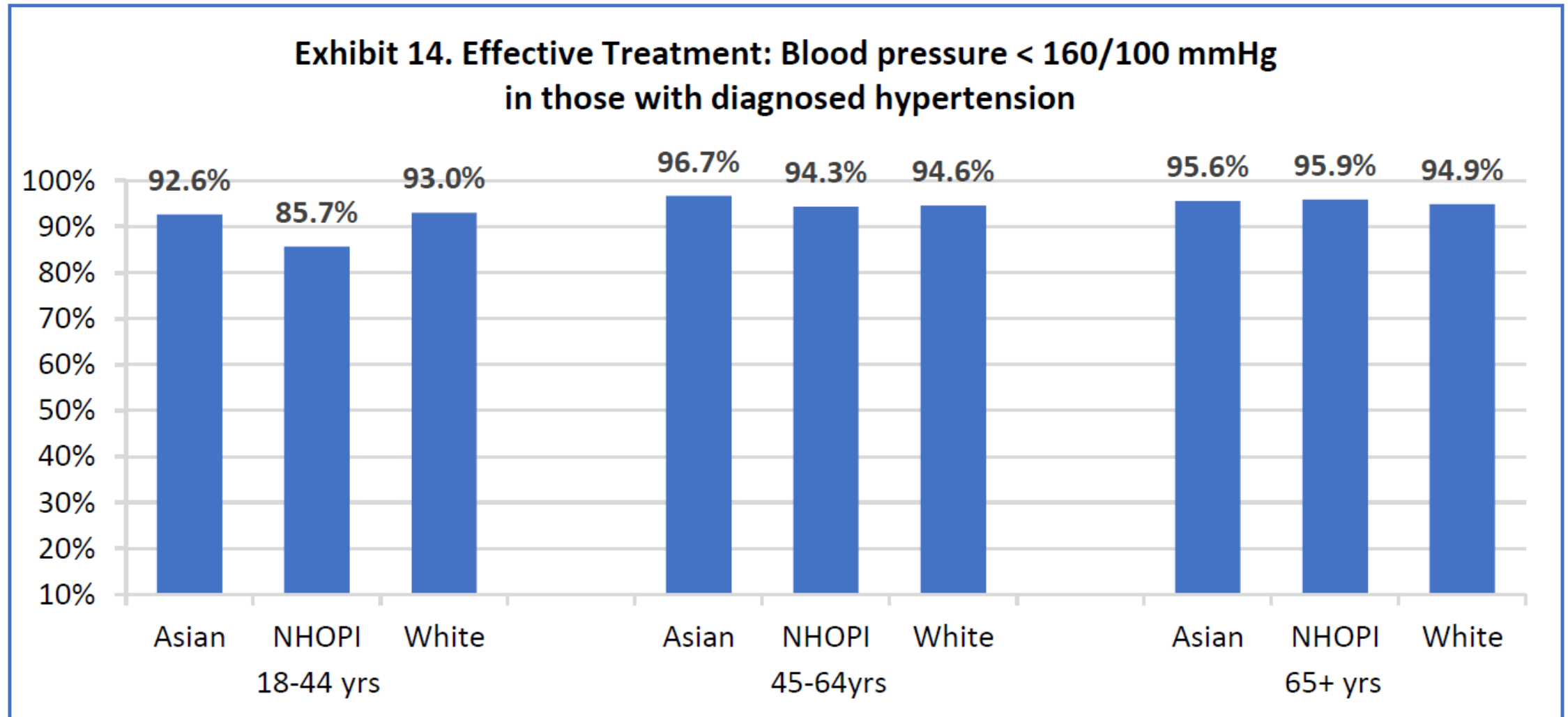
Asian & NHPI VHA users are less likely to receive test results at VA.



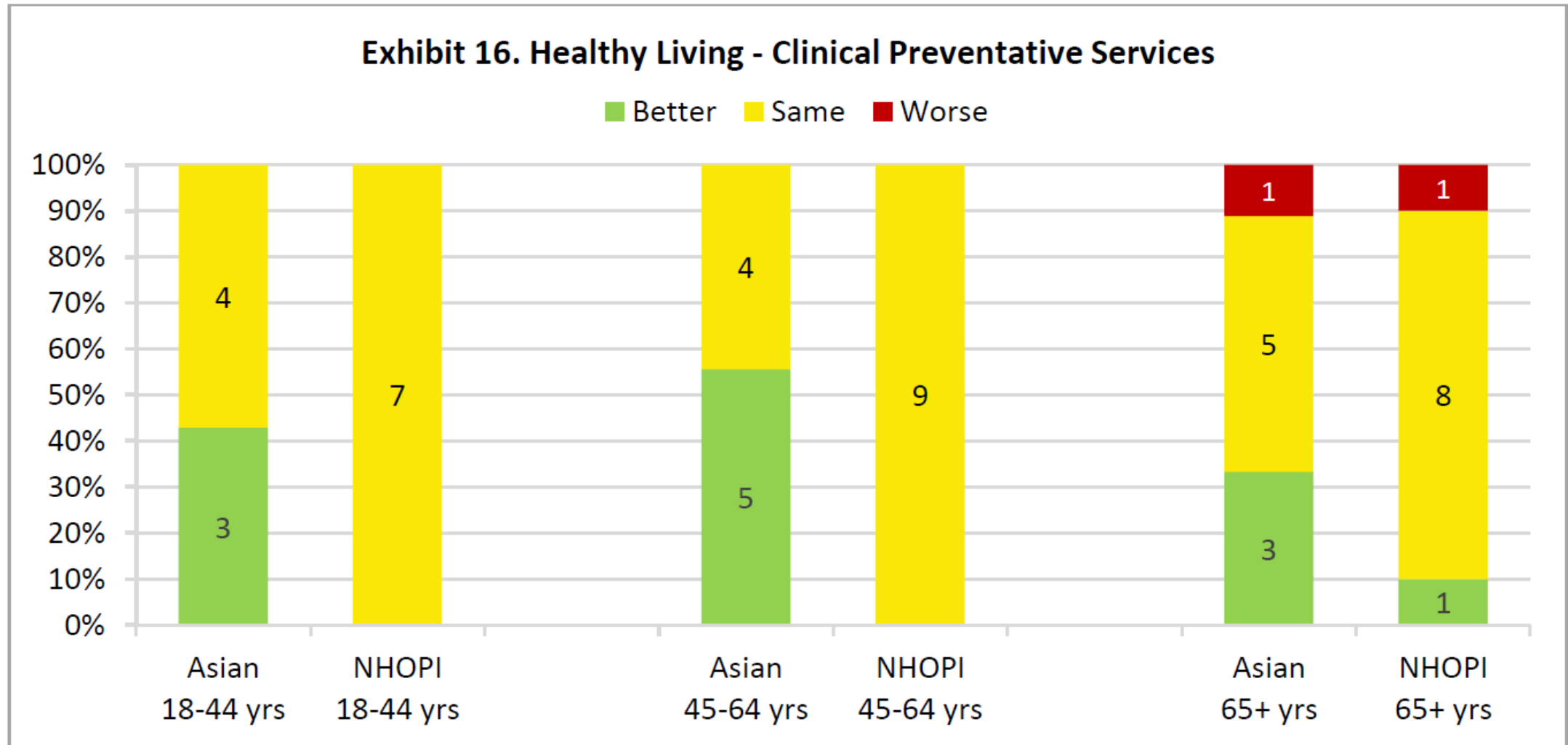
NHPI VHA users have problems with effective treatment of chronic conditions.



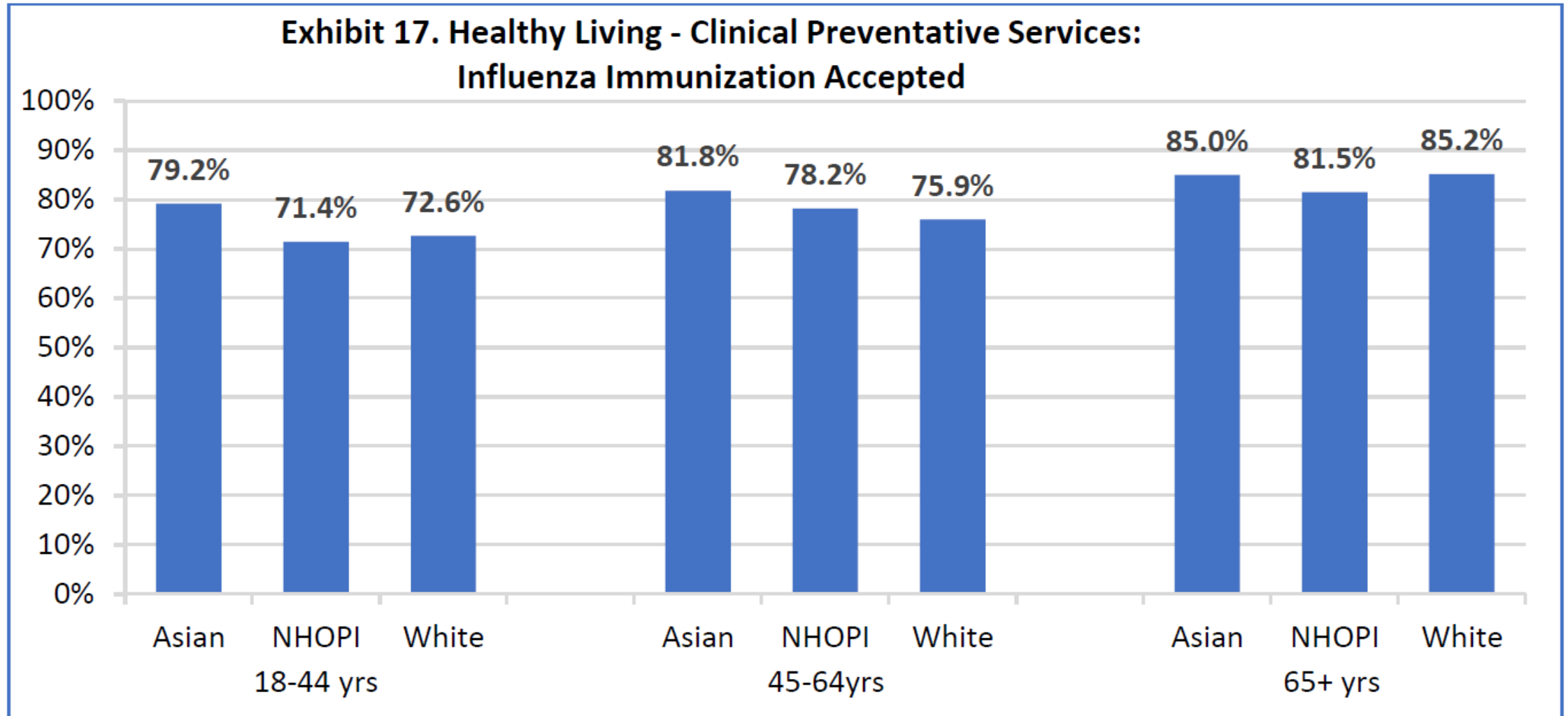
Younger NHPI VHA users have poorer control of hypertension.



Asian & NHOPI VHA users do well on preventive services.

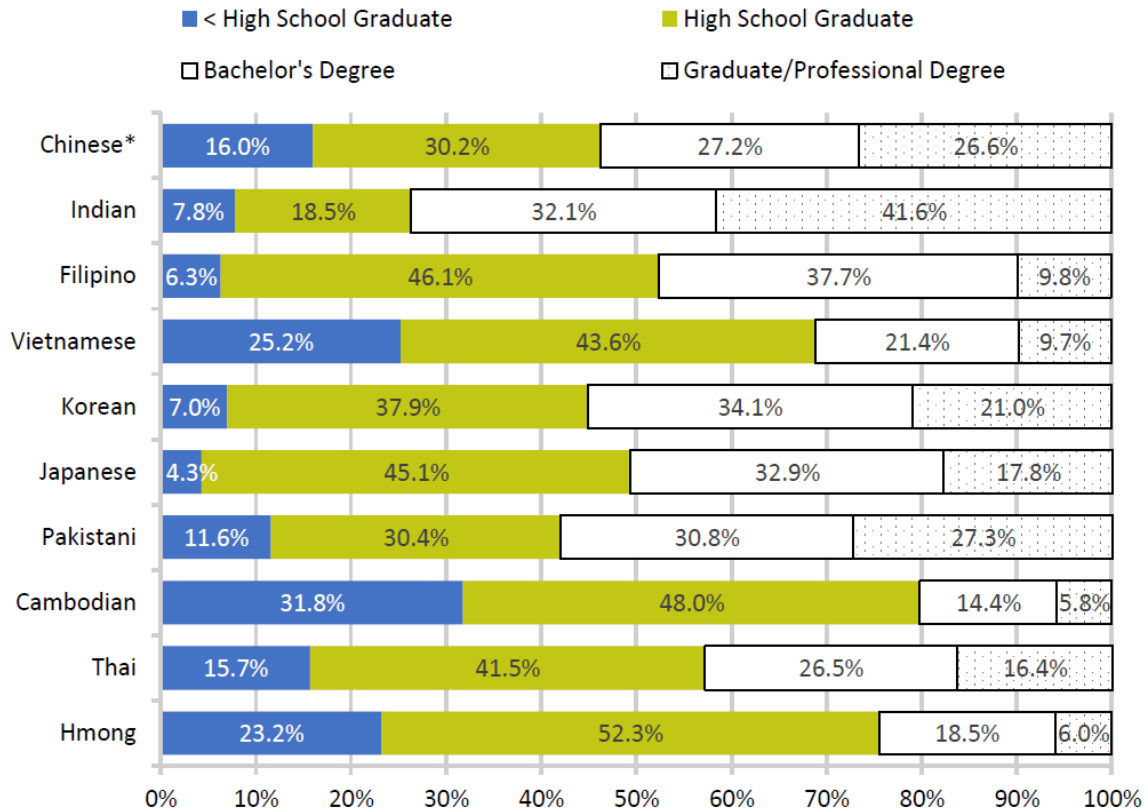


Asian & NHPI VHA users are not less likely to receive influenza vaccination.

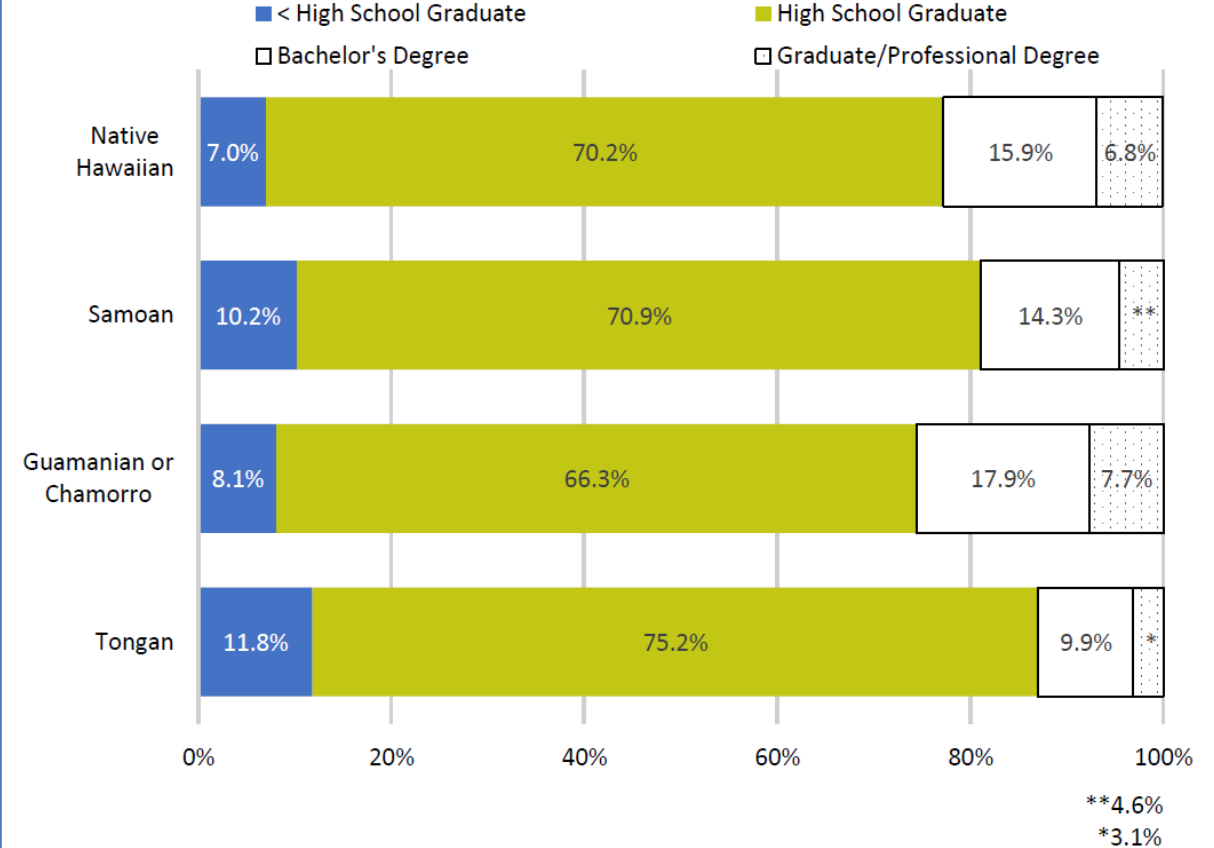


There is huge diversity among Asian & NHOPI populations that is not captured by VA.

**Exhibit 22. Educational Attainment of Asian Subpopulations
Age 25 Years and Over, 2017**



**Exhibit 23. Educational Attainment of NHOPI Subpopulations
Age 25 Years and Over, 2017**





What is the PACT Act?



Vietnam



Gulf War Era



Post 9/11



The **P**romise to **A**ddress **C**omprehensive **T**oxics **A**ct of 2022 ...

is a new law that expands VA health care and benefits for Veterans exposed to burn pits and other toxic substances. This law helps us provide generations of Veterans—and their survivors—with the care and benefits they've earned and deserve.

The PACT Act

- 1) Expands and extends eligibility for VA health care for Veterans with toxic exposures and Veterans of the Vietnam era, Gulf War era, and Post-9/11 era, and
- 2) Expands eligibility for benefits for Veterans exposed to toxic substances.

va.gov/pact





What conditions will be presumed to be service-connected?

As of Aug 10, a long list of new conditions are presumed to be service-connected due to various in-service toxic exposures. You should **APPLY NOW** at [VA.gov/PACT](https://va.gov/pact) so that your claim can be processed, and you can get your benefits.

- Asthma (*diagnosed after service*)
- Brain cancer
- Chronic bronchitis
- Chronic obstructive pulmonary disease (COPD)
- Chronic rhinitis
- Chronic sinusitis
- Constrictive bronchiolitis or obliterative bronchiolitis
- Emphysema
- Gastrointestinal cancer of any type
- Glioblastoma
- Granulomatous disease
- Head cancer of any type
- High blood pressure (*hypertension*)
- Interstitial lung disease (ILD)
- Kidney cancer
- Lymphatic cancer of any type
- Lymphoma of any type
- Melanoma
- Monoclonal gammopathy of undetermined significance (MGUS)
- Neck cancer
- Pancreatic cancer
- Pleuritis
- Pulmonary fibrosis
- Reproductive cancer of any type
- Respiratory (breathing-related) cancer of any type
- Sarcoidosis



va.gov/pact





When / How should I file a claim?

APPLY NOW!

If you think you may be eligible for benefits and/or care under the PACT Act, **apply now**

Go to [VA.gov/PACT](https://va.gov/PACT) for more info!

If you have questions, call [1-800-MyVA411](tel:1-800-MyVA411)

What if I've previously been denied?

Veterans previously denied a toxic-exposure related claim are encouraged to file a supplemental claim. Once a supplemental claim is received, VA will review the claim under the new law.

More info at [VA.gov/PACT](https://va.gov/PACT)

va.gov/pact



Summary

- Health equity means getting all Veterans the supports they need
- VA advances health equity by
 - Creating a diverse and inclusive environment
 - Identifying and reducing health-related social risks
 - Identifying and reducing health care disparities
- PACT Act greatly expands access to care for Veterans
- Pacific Islander Veterans more often experience challenges accessing high quality care so should benefit greatly from PACT
- PACT Act can help us get closer to equity
- Please sign up