Health and Independent Living (HAIL) for Rural Veterans with Disabilities

- A Study Project Sponsored by the VA ORH
- Co-lead by Charlie Jia and Jai Hale-Gallardo
IN MEMORIAM

Center of Innovation on Disability & Rehabilitation Research

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Study Team Members

**VA Researchers:**
- Diane Cowper Ripley
- Maggie Freytes
- Charles E. Levy

**Consultants:**
- Craig Ravesloot, Research and Training Center on Disability in Rural Communities
- Tony Delisle, Executive Director, Center of Independent Living of North Central Florida
- Billy Altoms, Executive Director, Association of Programs for Rural Independent Living
Health and Independent Living (HAIL) for Rural Veterans: Overall Goal

To improve the health, independent living skills, and community engagement of rural-residing Veterans with disabilities by collaborating with existing community resources throughout U.S.
Efforts to improve population health must **address the most important contributors to poor health outcomes**, including **environmental and socioeconomic conditions** and involving **engagement of individuals in their community**, not just within the scope of the healthcare delivery system.
Establish and enhance community relationships with entities that can coordinate peer-to-peer support, affect social determinants of health, and help organize family and other community support programs to fully integrate the Veteran’s health, economic, employment, educational, housing and community-based social-support network.
CIL Services to Rural Veterans

- Veterans using CIL services for decades.
- Over 250 rural CILs serve rural Veterans but also “urban” CILs with catchment area including rural counties.
- However, such information is not well-documented.
Examples of Collaborations in Independent Living for Veterans

- **Southwest Center for Independent Living (Springfield, Missouri)** outreach to VA hospital; peer support group for Veterans with PTSD.

- **The Blue Water Center for Independent Living (Port Huron, MI)**, Veteran housing assistance through “Project Home,” with support from VA Supportive Services for Veteran Families.

- **White Apple Institute (Phoenix, AZ)**, Veteran-operated non-profit in the independent living philosophy supporting Veteran higher education and readjustment.
Knowledge Gap

Some CILs do serve rural Veterans, and some CILs partner with VA; however, little is known about:

- **Models of VA-CIL best practice partnerships**
  - What do these partnerships look like? how do they work?
  - Are there better models of partnerships to be adopted?

- **Actual services provided by CILs to Veterans**
  - Are services being tailored to specific needs of Veterans?
  - What specific services have provided by CILs to Veterans?

- **Rural Veteran consumers of CILs**
  - Who are they? What are their needs?
  - How do CILs meet their needs?
Health and Independent Living (HAIL) for Rural Veterans

3 Objectives
Objective 1: Profile of Rural Centers for Independent Living

- To describe program characteristics of rural Centers
- To understand how Centers serve Veterans

**Methods:**

- Select 10 rural Centers (2 per MyVA regions).
- Semi-structured interviews with directors of the Centers.
- A national survey of rural Centers to describe program characteristics and strengths.
- Map locations of all CILs and travel distances from these CILs to the closest VA facilities.
The 5 MyVA Regions

Restructuring the VA
Currently, there are nine organizations within the Department of Veterans Affairs, all with different maps. Under a program called MyVA, VA aims to break the country into five regions by June 30.
Objective 1: Research Questions

- What are the characteristics of each Center? (programs available; staffing; etc.)
- How many Veterans using Centers?
- What services are most frequently used by rural Veterans?
- To what extent do the Centers collaborate with VA?
- What are the barriers and facilitators for CIL-VA collaboration?
- Have Veterans been referred by VA to CILs?
Objective 2: Profile of Veteran Consumers

- To understand Veteran consumers and their needs.

Methods:
- Select 40 Veteran consumers who reside in rural areas
- Semi-structured telephone interviews.
Objective 2: Research Questions

- Who are Veteran consumers?
- What are their needs?
- How do Veterans residing in rural areas connect with CILs?
- How do Centers help to meet their needs?
Objective 3: Field-test Health Promotion Program

- Train 25 rural Veterans as program facilitators for “Living Well in the Community” to deliver program at 5 participating rural CILs.
- Conduct 2 programs per year at 5 rural CILs.
- Pre- and post-study design with outcome measures:
  - health-related quality of life
  - healthcare utilization,
  - satisfaction with the program sessions.
“Living Well in the Community”
by the Research & Training Center on Disability in Rural Communities,
University of Montana

➢ A 10-week peer-facilitated health promotion and self-management program

➢ Reference: http://livingandworkingwell.ruralinstitute.umt.edu/living-well-program/
Expected Outcomes

- Develop resource guide of CILs serving Veterans in rural areas for Veterans and family members, VA clinicians and policy makers.
- Profile independent living needs of rurally-located Veterans in their communities.
Expected Outcomes

- Create and field-test a VA-CIL partnership model for enhancing the health and well-being of rural Veterans with disabilities.
- Expand a tailored Veteran-specific health promotion program to other Centers.
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Thank you