

Take Charge Of Your Health Today. Be Informed. Be Involved.

Supporting Veterans' Health: Using data to promote health equity

This month's health page "Take Charge of Your Health Today. Be Informed. Be Involved." addresses a vitally important topic – the health of those who have served in the U.S. Armed Forces.

Many of us have family members and loved ones who have served in our military. In fact, Black Americans are well-represented in military service - a higher proportion of individuals identifying as Black work in the U.S. Armed Forces compared to the general civilian population. This involvement of Black/African American individuals (especially Black men) in the military related to the reality that military service is one pathway to economic stability and mobility for people of color in this country.

As a result, there is a disproportionate burden on Black Americans who are serving our nation and being placed in harm's way. Our veterans return to civilian life, often related to an injury, and struggle with high levels of mental health problems and substance use disorders, traumatic stress symptoms, and traumatic brain injury.

Dr. Leslie Hausmann's research, featured this month, focuses on providing appropriate health care for life after military service. She shows that disparities in health and health care exist for veterans, similar to other populations. She shares with us that fundamental to eliminating disparities in veterans' health is recognizing that these disparities exist and working to address these disparities intentionally. This includes disparities based on being a sexual minority (lesbian, gay, or bisexual) and identifying as female (unique challenges experienced by female veterans including exposure to sexual violence).

Particularly exciting about Dr. Hausmann's work is the development of the VA Primary Care Equity Dashboard which any VA can use to look at how they are doing regarding disparities among the veterans they are caring for. Having data that is easily accessible also allows for implementing important quality improvement initiatives that address specific disparities and evaluating those efforts. Dr. Hausmann and her team are doing an incredible job with coaching and facilitating the VAs on how to use these data and work towards making concrete improvements. Knowledge, transparency, and access to data – these are all key to creating community and cultural change.

I am so pleased that the Pittsburgh VA's Center for Health Equity and Promotion is leading the way nationally on helping us to eliminate health and health care disparities for our veterans.

**Esther Bush
President
and CEO,
Urban League
of Greater
Pittsburgh**



ESTHER L. BUSH

Saying farewell to Esther Bush

For more than a decade, Esther Bush has been an essential voice in the "Take Charge of Your Health" partnership. Every month, she has provided to the New Pittsburgh Courier readership her expertise, vision and conviction to improve health disparities and to bring the research community and the general public closer together toward a shared goal of improving health for everyone. As Ms. Bush steps down as president and CEO of the Urban League of Greater Pittsburgh, it is vital to highlight and applaud her hard work and dedication to this series and to the health and well-being of the entire region.

The "Take Charge of Your Health" series began in 2011 to accompa-

ny the publication of Allegheny County Health in Black and White, a report produced by the Urban League of Greater Pittsburgh, Allegheny County Health Department and the University of Pittsburgh's University Center for Social and Urban Research. At Ms. Bush's suggestion, the newspaper series was created as a way to disseminate the report's findings. It was her firm belief that the right information needed to be available for people to make well-informed decisions about their health.

As a research participant herself, Ms. Bush also felt strongly about encouraging people of color to get involved in research studies. She knew that when African Americans do not participate in research

that it results in findings that do not always reflect their health needs or concerns. However, Ms. Bush also knew that the long and understandable history of African Americans' mistrust of research had to be acknowledged, respected and addressed. Sharing her positive experiences with research helped people see a way to be involved in research themselves and ensure that their needs are included.

That it was Esther Bush who forged this partnership and encouraged people to be informed and involved in their health was key to the series' success. Black and Brown communities in Pittsburgh have had an ally in Ms. Bush almost like no other. A Pittsburgh native, Ms. Bush

began her career as an educator and, after earning a graduate degree, she was recruited to serve in the National Urban League in New York. She eventually returned home to lead the Urban League of Greater Pittsburgh for nearly three decades. It would be impossible to list all of her achievements in this role, but they include starting the city's first charter school, increasing housing and food support for marginalized families and advocating for social justice. During the COVID-19 pandemic, Ms. Bush mobilized the Urban League to fundraise for and provide essential services, including rent, utility and mortgage assistance; partner with UPMC on a vaccine clinic in Duquesne; and work with Koppers to dis-

tribute pandemic supplies to residents of Homewood, the Hill District, the North Side and Duquesne.

The "Take Charge of Your Health" series includes a monthly commentary—a note directly from Ms. Bush to Pittsburghers. She has always spoken honestly and with love to the people for whom she has fought and carried in her heart. Though we will miss her words on this page, Ms. Bush's passion and efforts to uplift the community will be ongoing.

Thank you, Ms. Bush, for many years of leadership. We will continue to follow your example of caring for people's health and well-being and ensuring biomedical research and innovation serves everyone.

Veterans' health care vital to life after service

For individuals who have served in the U.S. Armed Forces, accessing appropriate health care is vital to life after service. Disparities exist in veterans' health as they do in other populations. The key to eliminating disparities in veterans' health is knowing what they are and how best to address them.

Veterans are a multifaceted group with health issues that are both common and unique to their service experiences. Veterans have various unique issues, including those stemming from return to civilian life or living with traumatic injury. They experience mental health and substance-use disorders, post-traumatic stress and traumatic brain injury at disproportionate rates compared to their civilian counterparts (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4671760/>).

Health disparities also exist within the veteran population itself. According to a chartbook compiled by the U.S. Department of Veterans Affairs (VA), veterans who are lesbian, gay or bisexual (LGB)*—compared with veterans who do not identify as LGB—report worse health and more chronic conditions; report higher rates of smoking, drinking excessively and having poor sleep quality; and female veterans who are LGB report depressive and anxiety symptoms at double the rate of female veterans who are not LGB.



LESLIE HAUSMANN, PH.D.

As investigator and co-director of the Equity Capacity Building Core of the VA Pittsburgh Healthcare System Center for Health Equity Research and Promotion, Leslie Hausmann, PhD, is working to eliminate health disparities in the veteran population. Her research and activities focus on building tools to engage the health care workforce and identifying and making systemic changes to address disparities happening at the local level.

"When I would present research about veterans' health disparities, leaders of various VAs thought that these disparities weren't happening in their population," she says. "There was a disconnect between data at the national level and action on the ground. I've been working with the na-

tional VA Office of Health Equity Research and a team here in Pittsburgh to design tools specifically to bridge that gap."

One of the tools Dr. Hausmann and colleagues are developing is the VA Primary Care Equity Dashboard. VAs across the country can use this tool to look at data with regard to disparities in their own patient population. The intent is to support quality improvement and to get VA health care providers to think about equity in every step of their quality improvement process. With the dashboard, users can see how their facility is performing overall in several quality measures—like chronic disease management.

"Then there's an equity deep-dive area of the dashboard where there's infor-

mation about how specific subgroups are performing in terms of health equity," says Dr. Hausmann, who is also associate professor of medicine (Division of General Internal Medicine) and of clinical and translational science at the University of Pittsburgh. "Because they comprise the majority of the data, white, male veterans' health measures are often right in line with the national average. This doesn't provide a complete picture. If you look at the breakdown of data, smaller populations like veterans who are women or racial/ethnic minorities may be performing at lower rates than the national average. We're trying to shift the culture to move past the idea that if the overall data on veterans' health measures are fine, that everyone must

be fine. We want people to think intentionally about how groups that we know are at risk for health disparities are performing."

In using the dashboard's data, if a quality improvement team notices a disparity in its VA, Dr. Hausmann and her team then do coaching and facilitation with them to figure out how to eliminate the disparity. The dashboard also includes toolkits to help VA health care providers tailor different treatments to different populations and make systemic changes by looking at exactly how marginalized populations are being underserved.

Dr. Hausmann says that, overall, the VA is doing well in providing high-quality health care to veterans. Disparities are not even as stark within the veteran population as they are in the general population. But, she points out that the goal is to eliminate any disparities that exist, which is her ongoing research focus and that of the Pittsburgh VA's Center for Health Equity and Promotion.

To learn more about participating in research about veterans' health, please visit <https://veteranshealthfoundation.org/get-involved/>.

*Data are taken from the 2013-18 National Center for Health Statistics National Health Interview Survey, which only has data available for the LGB subset of the LGBTQ+ population.