



Building Trust with Women Veterans

Insights and Findings

Veterans Experience Office

February 22, 2018



Veterans Experience Office Core Team



Veronica X. Vela
Service Design



Aaron Stienstra
Visual Design



Chakakhon Lea
Benefit Experience



Sarah Hughes
Content Strategy



Corinne Vizzacchero
Visual Design





All had a visit to a VA facility in the last 60 days

15% Saw providers in the primary care clinics

85% Saw providers in the women's health clinic

50.6 Average age

38% Served in combat

10.2 Average years served



Diversity

Race/ethnicities represented: African American, Multi-Racial, Caucasian, Asian-American/Pacific Islander



Geography

Many served in North Carolina, Alabama, Virginia, Pennsylvania, New Jersey, Ohio, Texas, Germany, Korea, Iraq and Afghanistan



Occupations

Military Occupational Specialties (MOS) include range from finance, personnel records, logistics, communications, healthcare medic, dental tech, interrogator, drill sergeant, military police, geospatial intel analyst, aviation operations, chemical operations, clerical, machine maintenance



Enlisted & Officers



Represented

Video – Here's What We Heard

https://www.youtube.com/watch?feature=youtu.be&v=LEL_PIHhDi0&app=desktop



Mindset: In good hands from the start



- Many women arrive without knowing what to expect
- The thought of the unknown can be challenging
- Women Veterans need VA staff to empathize and respond to their vulnerability

VA WOMEN VETERANS PATIENT EXPERIENCE JOURNEY MAP



U.S. Department
of Veterans Affairs
Veterans Health
Administration

KEY

JOURNEY PHASE

▼ Entry point to this system ▲ Exit point from this system

Moment that matters Journey moment Optional journey moment

Bright Spot

Pain Point

Moments That Matter to Women Veterans

Trusted Helper



This moment matters to me because

“

I need guidance about how to care for myself.

I want to be proactive about my health.

This interaction sets the tone of my whole experience.

This moment matters to me because

“

I don't want to start over at every visit.

I don't have enough time to go through my history.

My provider, appointment or treatment plan changes without notice causing me distress and wasting my time.

I don't trust you if you are not sensitive to my situation.

Connecting with women Veterans gives me support I need to feel well.

This moment matters to me because

“

I can get timely specialty and women's health care near where I live.

When I am referred out of VA for care, I can trust VA to cover the costs.



Key Themes

Theme 1: Women need empathy, compassion, respect and responsive customer service at every step of the journey.

Theme 2: Women need to have a connection with their provider, healthcare team and other women Veterans.

Theme 3: Women experience unequal care by facility, gender and VA employment status.

Theme 4: Women have specialty care needs that are not easily addressed in the current VA structure.

Theme 5: Women Veterans are eager to be involved in the design of patient experience improvements at VA.

Future Design Opportunities

Top 3

How might we facilitate more positive relationships between providers and women patients?

How might we set expectations with women Veterans so they understand what services VA can offer them?

How might we create a culture where women feel equally appreciated as patients?

DESIGN QUESTION	MINDSET In good hands from the start	THEME 1 Empathy, compassion & responsiveness	THEME 2 Building lifelong relationships	THEME 3 Addressing inequity	THEME 4 Addressing women's specific needs	THEME 5 Designing with women Veterans
How might we set expectations with women Veterans so they understand what services VA can offer them?	•		•		•	•
How might we help women Veterans access the services available to them?	•	•	•		•	•
How might we create a culture of get to YES among VA staff?		•	•			
How might we resource the supply of providers to meet the demands of our women Veterans in the community?		•	•	•	•	
How might we reduce administrative demands and optimize face time with women Veterans so physicians can be attentive to women Veterans' needs?		•	•			•
How might we facilitate more positive relationships between providers and women patients?	•	•	•			•
How might we facilitate a partnership with DoD where women Veterans can receive care at military installations?			•	•	•	•
How might we create a culture where women feel equally appreciated as patients?	•	•	•	•		•
How might leaders be more visible and reflective of the population?	•	•	•	•		





***The way we treat Veterans
today is the reason they will
choose VA tomorrow.***

YOU DON'T HAVE TO DO IT ON YOUR OWN.
SOMEONE IS LOOKING OUT FOR YOU. YOUR
HEALTH IS IMPORTANT. AND YOU'RE JUST NOT
ANOTHER NUMBER.