

Putting Research to Work for Military Families



Focus:
Multiple
Branches

Veterans Administration Health Care Utilization Among Sexual Minority Veterans

Simpson, T. L., Balsam, K. F., Cochran, B. N., Lehavot, K., & Gold, S. D. (2013). Veterans Administration health care utilization among sexual minority veterans. *Psychological Services, 10*(2), 223-232. doi:10.1037/a0031281

SUMMARY: Gay, lesbian and bisexual (GLB) Veterans were assessed via an online survey to examine the relationships among Veterans Health Administration (VHA) utilization, clinical needs, demographic variables, and trauma. GLB Veterans in this sample use the VHA at similar rates as other Veterans. Utilization of VHA services was related to positive service connection, positive screens for mental health issues, and a history of a GLB-related interpersonal trauma while in the military.

KEY FINDINGS:

- Forty-six percent of the GLB Veterans reported VHA utilization, including 29% in the past year; these rates are similar to overall Veterans' utilization rates of VHA.
- VHA utilization was associated with positive service connection (disability), positive posttraumatic stress disorder (PTSD) and depression screens, and history of at least one GLB-related interpersonal trauma while in the military.
- GLB Veterans who had at least one stressful military experience involving command investigation or punishment of their GLB status (e.g., being interrogated about their sexual orientation, forced to leave the military) were significantly less likely to have utilized the VHA in the past year.
- GLB Veterans' concerns about how they might be treated at the VHA did not add significantly to the models.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Educate staff about the unique experiences of GLB military personnel to enhance the cultural competency of personnel who work with and on behalf of families
- Include an assessment of possible discriminatory experiences (both military and non-military) that GLB Service members may have experienced
- Disseminate information regarding community-based programs that work with LGB Service members

IMPLICATIONS FOR POLICIES:

Policies could:

- Recommend training for program staff regarding the assessment of sexual orientation and any GLB-related health issues could help improve access and culturally-competent care for these Service members
- Continue to support open communication about sexual orientation and the elimination of discriminatory treatment could help GLB Veterans receive respectful, sensitive services
- Continue to support programs and service that offer resources to LGB Service members and their families

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METHODS

- From May 2004-January 2005, participants were recruited via national online sources and print periodicals that serve the GLB community.
- Veterans answered demographics questions, questions about VHA utilization, GLB-adapted health beliefs, enabling resource factors, need factors and GLB military experiences.
- Surveys were completed online.

PARTICIPANTS

- Three hundred fifty six gay, lesbian, and bisexual (GLB) Veterans participated.
- The majority of participants were male (70%), with a mean age of 45.4 years (SD = 13.3 years).
- Eighty-eight percent White; 94% identified as lesbian or gay.

LIMITATIONS

- These data are cross-sectional and causality cannot be assumed.
- There was no comparison of heterosexual Veterans; one cannot draw conclusions about the similarities and differences between these groups.
- The sample was largely White, gay, and male, and may not be representative.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Explore the similarities and differences with heterosexual Service members
- Conduct longitudinal research to allow for more causal explanations to be drawn from the data
- Continue to explore the needs of gay, lesbian, and bisexual Service members

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