

QUERI Enhancing Mental and Physical Health of Women through Engagement and Retention (EMPOWER) 2.0

VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Quality Enhancement Research Initiative

The goal of the EMPOWER 2.0 QUERI is to expand access to virtual, evidence-based, preventive and mental health services for women Veterans with high-priority health conditions in rural and urban-isolation areas. Improvements will increase women Veterans' access to and engagement in convenient, safe, evidence-based, and patient-centered care that achieves the VA "lane of effort" of Veterans' "lifelong health, well-being, and resilience."

Expanding Women Veteran Access to Care

Women Veterans are the fastest-growing segment of users in the Veterans Health Administration (VA). The VA has invested heavily in delivering care for women Veterans that is effective, comprehensive, and gender-tailored; however, gender disparities persist in cardiovascular (CV) and diabetes risk factor control. Also, the rate of perinatal depression among women Veterans is higher than that among civilian women, which is of particular concern given the association between perinatal depression and suicidality. Distance, rurality, and additional challenges – such as negative perceptions of VA care, comorbid mental health issues, sexual and/or gender minority identities, and harassment on VA grounds – can further impede women's regular use of VA care. In sum, *improvements are still needed to increase women Veterans' access to and engagement in evidence-based, patient-centered care that achieves the VA "lane of effort" of Veterans' "lifelong health, well-being, and resilience."*

Since its inception in 2015, the **Enhancing Mental and Physical health of Women through Engagement and Retention (EMPOWER) QUERI 1.0** team has focused on implementing gender-tailored, preference-based care models for women Veteran patients. In EMPOWER 1.0 studies, women expressed preferences for gender-specific (women only) care and for virtual care, when presented with in-person and virtual options. Therefore, EMPOWER 2.0 builds on work to date by expanding access to virtual, evidence-based, preventive and mental health services for women Veterans with high-priority health conditions in rural and urban-isolation areas.

We will implement three evidence-based practices (EBPs):

- 1) **Virtual Diabetes Prevention Program (DPP)**, an evidence-based lifestyle intervention, emphasizing moderate weight loss, diet, and physical activity, that has been shown to prevent and/or delay progression to type 2 diabetes;
- 2) **Telephone Lifestyle Coaching Program (TLC)**, developed by one of our partners (National Center for Disease Prevention and Health Promotion), which provides evidence-based virtual (telephone-based), individual-level, personalized health coaching focused on wellness and cardiovascular disease prevention; and
- 3) **Reach Out, stay Strong, Essentials (ROSE)**, an evidence-based intervention for prevention of perinatal depression that can be delivered via telehealth.

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Comparing Strategies for Improving Care in VA

EMPOWER 2.0 will draw upon two implementation strategies, Replicating Effective Practices (REP) and Evidence-Based Quality Improvement (EBQI), to support implementation and sustainment of evidence-based practices focused on preventive and mental health care for women Veterans. We will conduct a mixed methods implementation evaluation using a cluster randomized type 3 hybrid implementation-effectiveness trial design in order to compare the effectiveness of REP and EBQI on several outcomes of interest:

- (a) improved access to and rates of engagement in virtual preventive lifestyle and mental health services and improved VA performance metrics for virtual and telehealth care delivery and related clinical outcomes for women Veterans;
- (b) progression along the *Stages of Implementation Completion*;
- (c) adaptation, sensemaking, and experiences of EBP implementation among multilevel stakeholders; and
- (d) cost and return on investment.

We will also generate implementation playbooks for program partners to support scale-up and spread of these and future evidence-based women's health programs and policies.

EMPOWER 2.0 Key Partners and Impact Goal

We are working in collaboration with key operations partners from VA Women's Health Services, National Center for Health Promotion and Disease Prevention, Office of Mental Health and Suicide Prevention, Office of Primary Care, Office of Patient-Centered Care and Cultural Transformation, Office of Rural Health, and Office of Connected Care. Our implementation demonstration will occur with consistent input from the VA Women's Improvement Network (comprised of women Veterans from around the country) and leadership support within VISNs 7, 17, 19, and 22.

We are grateful to these critical partners for their guidance and support as we work toward our ultimate goal: *improved access to virtual, evidence-based, preventive and mental health services for women Veterans with high-priority health conditions.*

For more information, check out:

<https://www.queri.research.va.gov>

If you would like to learn more or partner with us, please contact Dr. Alison Hamilton at alison.hamilton@va.gov.

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