Communication Between VA Providers and Sexual and Gender Minority Veterans: A Pilot Study


58 lesbian, gay, bisexual or transgender Veterans participated in a focus group or individual interview and completed self-report measures about their experiences, beliefs and preferences in communicating with VA healthcare providers. 28% of participants reported experiencing the VA as welcoming to sexual minority Veterans. Almost 2/3 of the Veterans indicated that none of their providers had assessed sexual orientation.

**Key Findings:**
- 24% of Veterans indicated they have not disclosed their sexual orientation to any VA provider.
- 62% of Veterans reported that none of their VA providers had asked about sexual orientation.
- Veterans described numerous fears surrounding disclosure of their sexual orientation to VA providers (e.g., fear of judgment or disparate treatment, fear loss of benefits, fear denial of healthcare, worry about implications of documentation in healthcare record).
- Only 28% of Veterans experience VA as welcoming to sexual minority individuals.

**Implications for Programs:**
- Programs could post sexual-minority affirming items in their offices (e.g., rainbow), thereby sending the message that their staff are welcoming to all people.
- Programs could review their curricula regarding language (e.g., referring to partners rather than husbands or wives).

**Implications for Policies:**
- Policies could recommend funding of staff training about respectful communication with sexual and gender minority Veterans and health disparities faced by these individuals.
- Leaders could review their policies to ensure that “sexual orientation and gender identity” are included in their anti-discrimination statements.

**Avenues for Future Research:**
- This study could be replicated with sexual and gender minority Veterans who are not using the VA healthcare system.
- Future research could examine the experiences of sexual and gender minority Veterans from various regions of the country.
**Methodology:**
- Sexual and gender minority Veterans were recruited through hospital providers, community organizations, and word of mouth.
- Veterans participated in a 2-hour focus group or individual interview; sessions were held at a VA hospital (either Oklahoma City, OK, or Houston, TX).
- Questions explored positive and negative experiences in VA, beliefs about deterrents to VA healthcare, and ideas about how VA can be more welcoming to sexual and gender minority Veterans.
- Content analysis and constant comparison techniques were used to analyze the qualitative data; inter-rater reliability was 90% or higher.

**Participants:**
- 58 Veterans, including 55% female, 33% male. 12% were transgender.
- 29% were in their 40s, 26% were in their 50s, 19% in their 30s.
- 84% were White, 19% American Indian, and 12% Black.
- 46% identified as single, 33% partnered, 19% married.
- 81% identified as gay or lesbian, 12% as bisexual. 39% had children living in the home.

**Limitations:**
- Participants in this study were from a limited geographic region (2 southern VA hospitals); the extent to which sexual and gender minority Veterans' experiences differ across the country is not known.
- The numbers of some groups of participants (e.g., transgender individuals, bisexual individuals) were rather small, precluding the researchers from specifically analyzing their unique experiences.

### Assessing Research that Works

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Appropriate</th>
<th>Limited</th>
<th>Questionable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The design of the study (e.g., research plan, sample, recruitment) used to address the research question was...</td>
<td>☐</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>Research Methods</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The research methods (e.g., measurement, analysis) used to answer the research question were...</td>
<td>☐</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>Limitations</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The limitations of this study are...</td>
<td>☐</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>Implications</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The implications of this research to programs, policies and the field, stated by the authors, are...</td>
<td>☐</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Not applicable because authors do not discuss implications</td>
<td>☐</td>
<td></td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Overall Quality Rating**: 3/4 stars