Health Hub — Veterans IA Tree Test Research Findings

Background and goals

As the team considers where to include the Health Apartment on VA.gov, this research is an effort to update and improve the benefits-related information architecture of VA.gov.

Goals:

How we might create an experience that allows Veterans to easily find the content and tools they need based on where they are in their VA health care journey:

- learning about the benefit
- applying for the benefit
- getting started with the benefit
- or managing their care and health benefits?

Veteran journey & OCTO-DE

How this research maps back to **Veteran journey:**

- Primary point in the Veteran journey: "Taking care of myself"
- Secondary points: "Starting up," "Putting down roots," "Retiring," and "Aging"

OCTO-DE goals this research supports:

- Veterans and their families can find a single, authoritative source of information
- Veterans can manage their health services online
- Logged-in users have a personalized experience, with relevant and time-saving features

Participant Demographics

Hypothesis 0: 51 completed

Hypothesis 1: 50 completed, 3 abandoned

Baseline: 47 completed

81 participants are enrolled in VA health care.

Findings may not include the range of perspectives from the following underserved Veteran groups:

- Have a cognitive disability
- Live in a rural area
- Have other than honorable discharge
- Are of immigrant origin
- Idefinity as Latinx or Asian
- Use assistive technology

final # of participants		151		# of AT users				0		#	of	no	shows		3		
Category	%	Target	Study	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Age 55-64+	50.00%	76	78	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cognitive Disability	50.00%	76	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mobile user	50.00%	76	Θ	0				0	0	0	0	0	0	0	0	0	
Rural	25.00%	38	Θ	0	0	0	0	0	0	0	0	0	0	0	0	0	0
No degree	25.00%	38	33	0							0	0	0	0	0	0	0
Other than honorable	21.00%	32	Θ	0											0	0	
Immigrant origin	17.00%	26	Θ	0	0				0		0	0	0	0	0	0	0
Women	10.00%	16	74	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Expat (living abroad)	0.40%	1	Θ	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Race		Based or	n VA's pro	oject	ed s	tatis	stics										
Black	15.00%	23	26	0	0			0	0	0	0	0	0	0	0	0	0
Hispanic	12.00%	19	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Biracial	3.90%	6	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Asian	3.00%	5	1	0	0	0							0			0	
Native	0.30%	1	1	0	0	0	0	0	0	0	Θ	0	0	0	0	0	Θ
LGBTQ+		LGBTQ+	Veterans	are	5 tii	nes	as li	kely	to l	nave	PT	SD					
Gay, lesbian, or bisexual	%	1	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Transgender	%	1	Θ	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nonbinary, gender fluid, ger	%	1	Θ	0													

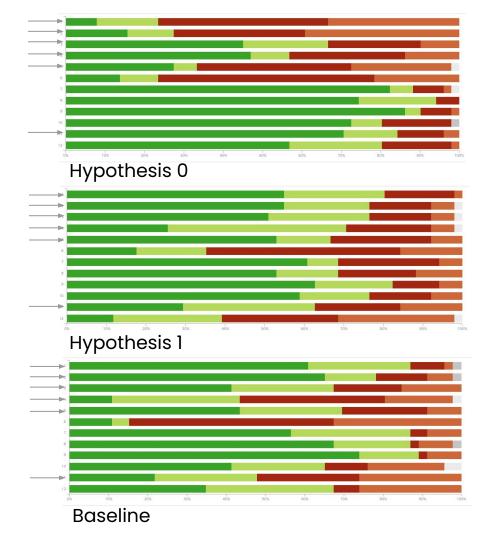
<u>Participant tracker</u>

- 1. Hypothesis 1 performed better on "get" tasks
- 2. Hypothesis 0 performed better on "manage" tasks
- For participants without VA health care, Hypothesis 1 performed better
- 4. For both hypotheses, Task 9 had the highest success rate*
- 5. Task 5 had the lowest success rate for both hypotheses*

^{*}Task 6 was eliminated from analysis

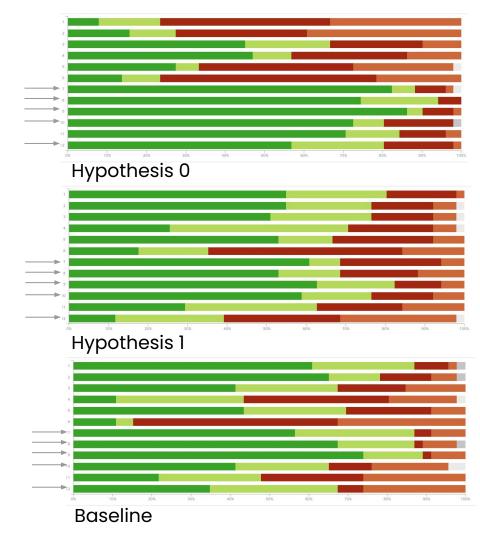
Overall, Hypothesis 1 performed better on "get" tasks

- First click after "VA benefits and health care"
 - o **Task 1 (Eligibility):** "Health care" (71%)
 - "Service member benefits" (20%)
 - o Task 2 (Enrollment): "Health care" (78%)
 - "Service member benefits" (6%)
 - o **Task 3 (Dental):** "Health care" (86%)
 - "Service member benefits" (12%)
 - o Task 4 (Mental health): "Health care" (78%)
 - "Service member benefits" (12%)
 - o **Task 5 (Copay):** "Health care" (88%)
 - "Service member benefits" (4%)
 - o Task 11 (Community care): "Health care" (90%)
 - "Community providers" (4%)



Hypothesis 0 performed better on "manage" tasks

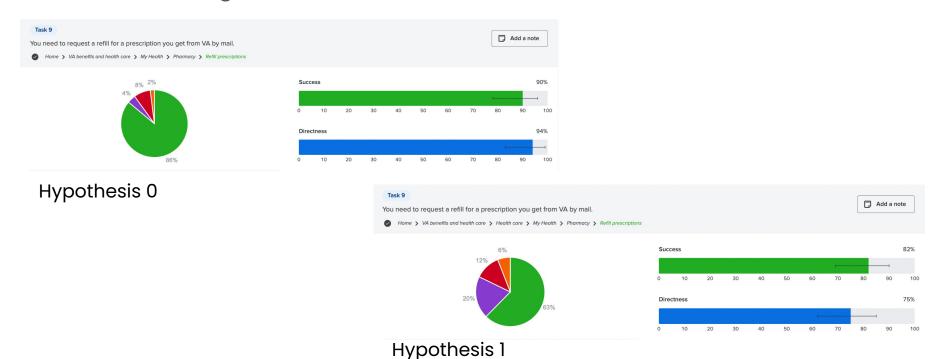
- First click after "VA benefits and health care"
 - o Task 7 (Records): "My Health" (65%)
 - "Records" (33%)
 - **Task 8 (Billing):** "My Health" (84%)
 - "Service member benefits" (4%)
 - o Task 9 (Prescriptions): "My Health" (90%)
 - "Service member benefits" (2%)
 - o Task 10 (Messaging): "My Health" (86%)
 - "VA health" (8%)
 - Task 12 (Travel pay): "My Health" (86%)
 - "Service member benefits" (6%)



For participants without VA health care, Hypothesis 1 performed better.

- With the high success rate of "get" tasks, it makes sense that participants without health care
- In both hypotheses, participants without health care performed had greater success completing the "get" tasks.

Task 9 had the highest success rate



Task 5 had the lowest success rate



More to come...

- June 17: Recruiting more caregivers began
- July 5: Estimated close of caregivers studies
- **July 8:** Design Review—Complete research synthesis (with recommendations) with Veterans and Caregivers