

Survey of reasons Veterans don't use Complementary and Integrative Health Services

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1) Registry of Current Research on Veterans and Complementary and Integrative Health Therapies and Chiropractic Care

Intended to facilitate research collaboration and enable clinicians, researchers, and policy makers to be informed of
the research being conducted on CIH therapies and chiropractic care among Veterans. Includes studies that were
active as of January 2016 and later, and provides information on the PI's name, institution, study title and years of
funding.

2) <u>Library</u> of Research Articles on Veterans and Complementary and Integrative Health Therapies and Chiropractic Care

- Contains hundreds of articles organized by therapy, which include acupuncture, Battlefield Acupuncture, biofeedback, chiropractic care, guided imagery, clinical hypnosis/hypnotherapy, massage therapy, meditation, mindfulness, Tai Chi/Qigong, and yoga
- Can also be organized by outcomes that include pain, anxiety, depression, PTSD, substance/opioid abuse, stress and well-being, insomnia and sleep, suicide-related issues, Veteran caregiver well-being and VA employee well-being, and general CIH use or implementation.

3) HSR&D CIH Research listserv

Used to disseminate key information about the VA's provision, effectiveness, and implementation of CIH therapies
and other CIH-related news. To join the listserv, email request to michael.mcgowan3@va.gov

4) HSR&D CIH Research Cyberseminar Series

OCIH Research Cyberseminars are held monthly and invite both VA and non-VA researchers to present to up to about 500 clinicians, researchers, and leaders across the VA enterprise and external stakeholders. Presentations are related to CIH use, effectiveness, implementation, and/or broader VA policies and practices involving CIH.

Disclosures

- No conflicts of interest
- The views expressed are those of the presenter and do not necessarily reflect the position or policy of the Dept. of Veterans Affairs or US government
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Outline

- 1. Background
- 2. Survey development
- 3. Survey administration
- 4. Results
- 5. Conclusions

Background

Promising evidence relating CIH to reduced opioid use in chronic pain among Veterans

- Reduced use of opioids among Veterans with chronic pain who used Whole Health services including CIH compared to those who did not¹
- Reduced incidence of opioid initiation among Veterans with MSD exposed to CIH² compared to those not exposed
- Faster rate of opioid taper among Veterans with LTOT exposed to any CIH³

¹Bokhour BG, Hyde JK, Zeliadt S, Mohr DC. Whole Health System of Care Evaluation - A Progress Report on Outcomes of the WHS Pilot at 18 Flagship Sites 2020. Veterans Health Administration, Center for Evaluating Patient-Centered Care in VA (EPCC-VA).

²Goulet et al. Association of Complementary and Integrative Health Interventions with Opioid Use among Veterans with Musculosk eletal Disorders and PTSD. https://www.hsrd.research.va.gov/for/researchers/cyber/seminars/archives/6304-notes.pdf

³Black et al. Association Between Exposure to Complementary and Integrative Therapies and Opioid Analgesic Daily Dose Among Patients on Long-term Opioid Therapy. The Clinical Journal of Pain 38(6):p 405-409, June 2022.

Background

Among our cohort of ~300,000 Veterans on long-term opioid therapy for chronic pain, CIH modality use differed by:

- Sex
- Race
- Ethnicity
- o Rural residence
- Year of cohort entry (2017-2021)
- Baseline pain scores
- Daily opioid dose

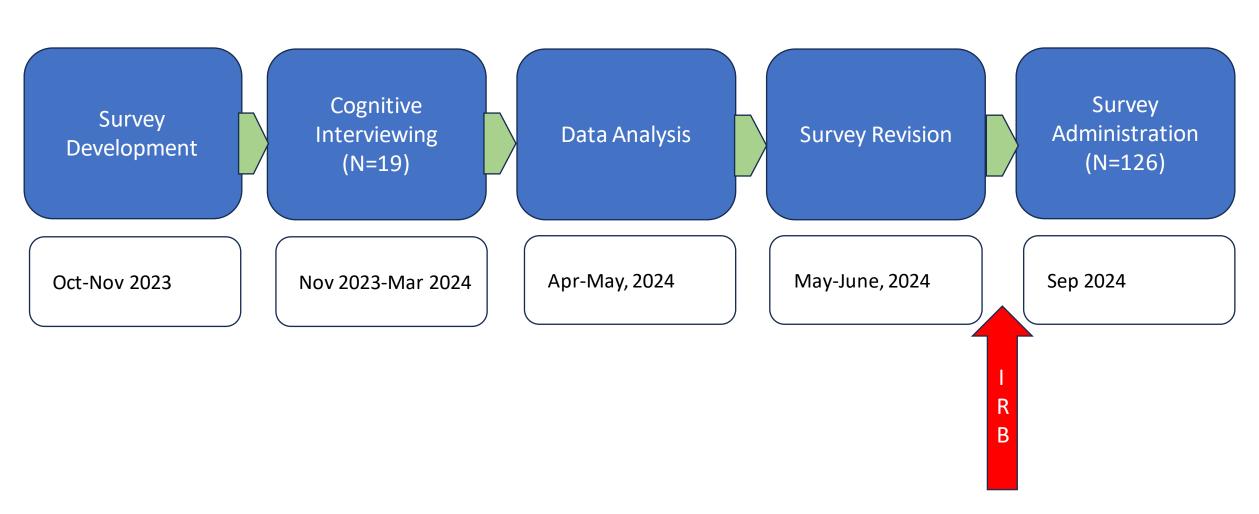
Research Questions

Among Veterans on long-term opioid therapy, what are barriers to use of CIH?

Do barriers differ by CIH modality?

Do barriers differ by Veteran characteristics?

CIH Use Survey Flow



Screening questions

For each of the services listed below, please select the response that best fits your experience:

Modalities

- Acupuncture
- Biofeedback
- Chiropractic care
- Guided Imagery
- Clinical Hypnosis
- Therapeutic Massage
- Meditation
- Tai Chi/Qi Gong
- Yoga

Response Options

- Never heard of it
- Heard of it but never tried it
- Tried it but didn't continue
- Used it regularly or somewhat regularly

Location of CIH use

For each of the following CIH that you have used at least once, please indicate where you used each service (check all that apply):

- Used at VA or Vet Center
- Used in community with a non-VA provider
- Used at home

Reasons never tried CIH modality

Domain	ltem	Domain	Item				
Information	I don't know enough about it		Family/friends would not support it				
	I didn't know/think I was eligible for it	Support from others	My provider didn't seem to really support it/valuit/know about it				
	Didn't know how to get started		Not comfortable with format (group, individual)				
	Too costly	Format-specific	Not comfortable with format (telehealth, in- person)				
	Couldn't get a doctor's referral	ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο ο	Not comfortable with format (co-ed vs. same sex)				
Access	My VA doesn't offer it		Uncomfortable with/dislike/afraid of technique				
	Not available at convenient location/don't have transportation		I'm not interested in this				
	Not available at convenient time	Downonal	I can't fit it in my schedule				
	No option for childcare	Personal	I don't want to take services from Veterans who are worse off than me				
	Physical/health limitations		Other reason (open ended)				
	Didn't believe it would improve my health or condition		Never considered using it for myself				
Effectiveness	Concerned it would make my condition worse	Belonging/Inclusion	Not available in a space where I feel safe and accepted				
	Worried about how long it would take to feel better		Would feel like an "outsider"/I didn't belong				
			I don't know anybody who has used it				

Reasons tried but didn't continue CIH modality

Domain	ltem	Domain	ltem					
Access	Too costly	Support from others	Family/friends did not support it					
	Not available at convenient location/didn't have transportation	Capport mom outlors	My provider didn't seem to really support it/value it/know about it					
	Not available at convenient time		Wasn't comfortable with format (group, individua					
	No option for childcare	Format-specific	Wasn't comfortable with format (telehealth, in- person)					
	Physical/health limitations	1 offilat specific	Wasn't comfortable with format (co-ed vs. same sex)					
	Didn't improve my health or condition		I was uncomfortable/disliked/afraid of technique					
Effectiveness	Made my condition worse	Personal	I wasn't interested in it/not what I expected					
	Worried about how long it would take to feel better	. Greena.	I couldn't fit it in my schedule					
Belonging/Inclusion	I didn't feel safe/accepted		Other reason (open ended)					
	Felt like an "outsider"/I didn't belong							

CIH Use Survey Administration

Sample

- Stratified random sample N=3000 from retrospective cohort of 280,000+ Veterans on LTOT
- No evidence of CIH use in EHR 2016-2022
- Stratified on sex and race

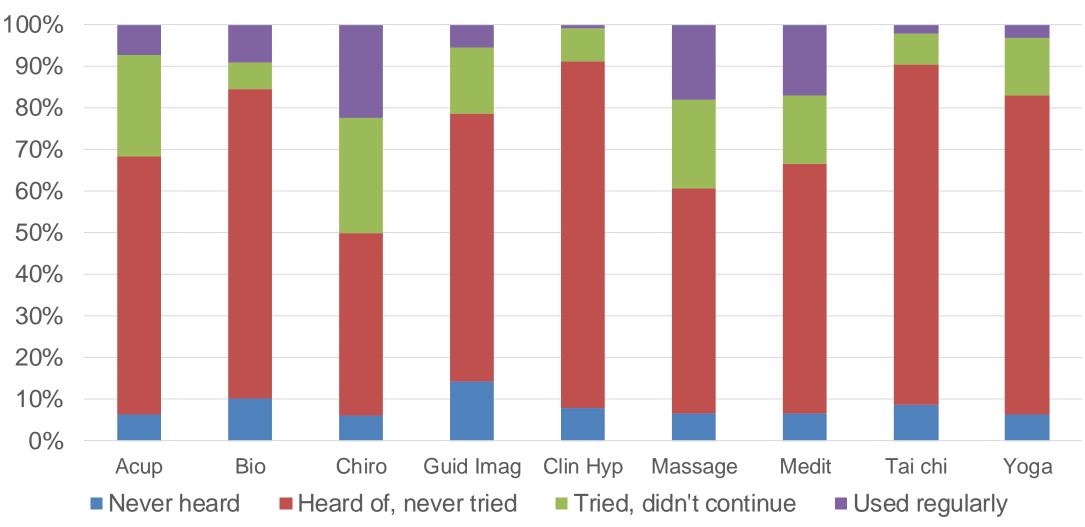
Method

- Sent letter with unique REDCap survey link
- Option to complete by phone with Coordinator
- \$50 for participation
- Limited to N=125 respondents
- September 10-17, 2024

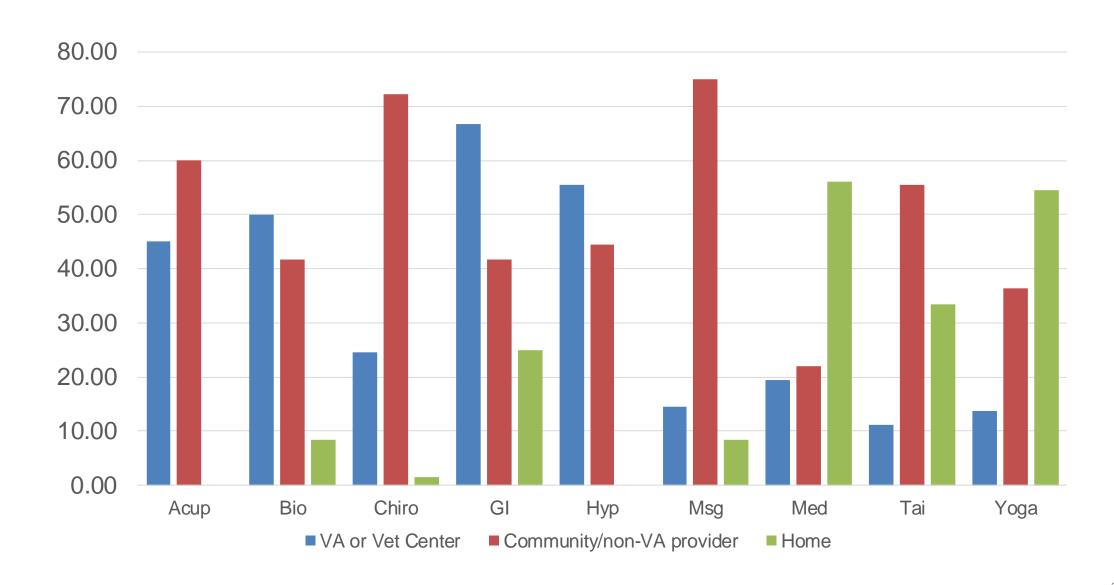
Respondents (N=126)

Characteristic	Percent or Mean (SD)
Sex	
Women	58
Men	41
Binary/Other	1
Age	63.57 (10.87)
Race	, , ,
American Indian/Alaska Native	1
Asian	3
Native Hawaiian or Other Pacific Islander	0
Black or African American	30
White	60
More Than One Race	1
Prefer not to answer	6
Ethnicity	
Hispanic	6
Other	94

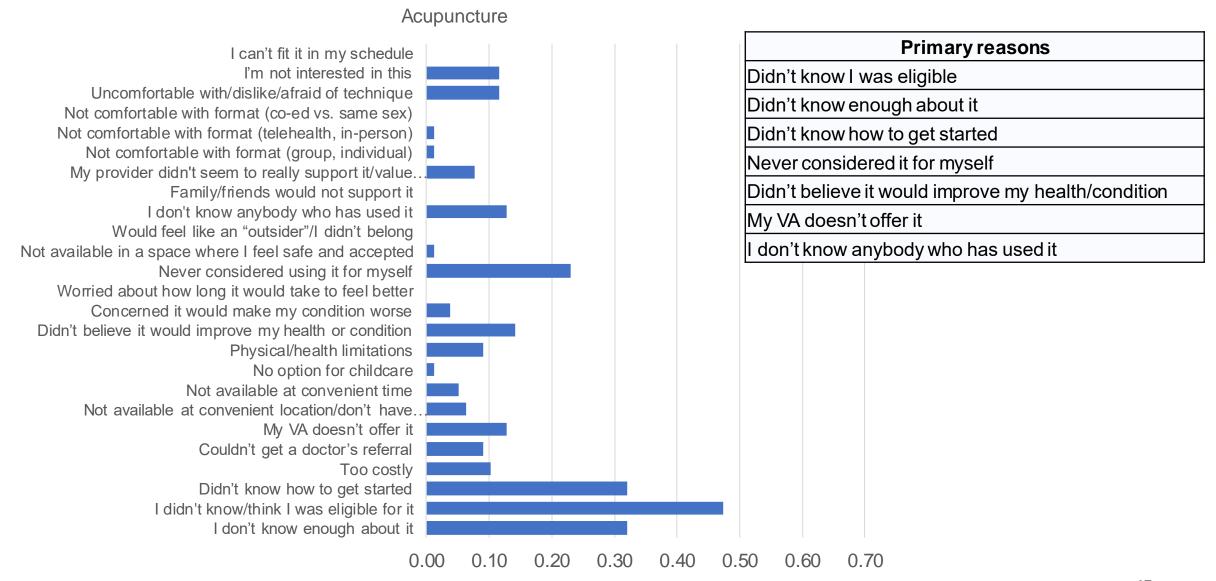
A minority of the sample had tried any modality except chiropractic care



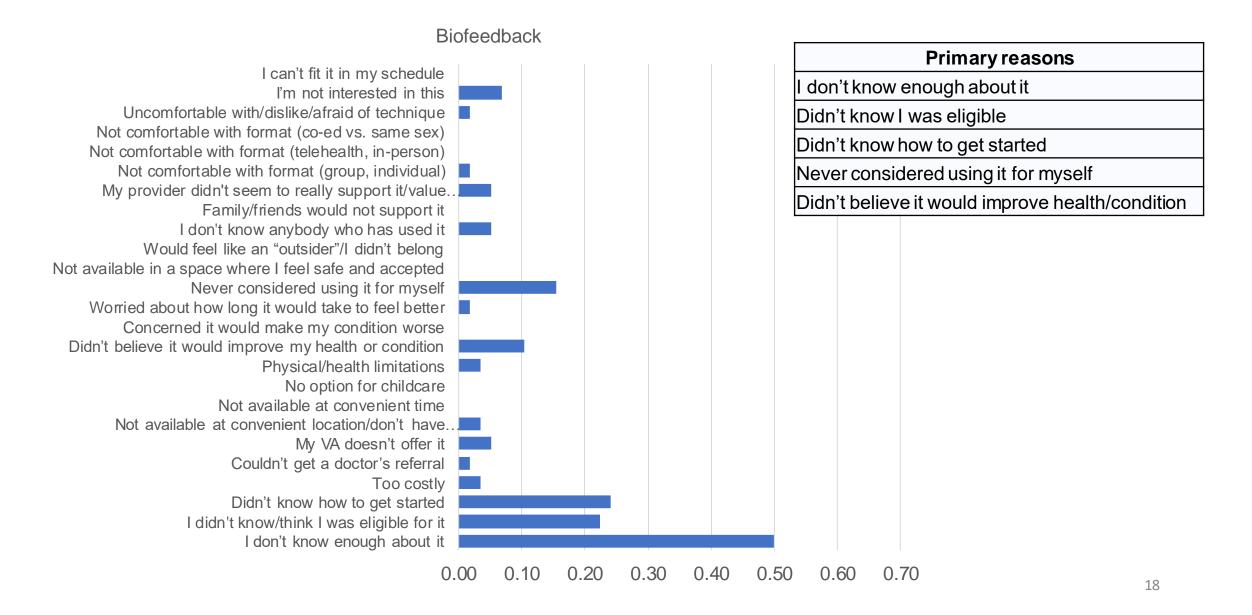
Among Veterans who had used any CIH, location differed by modality



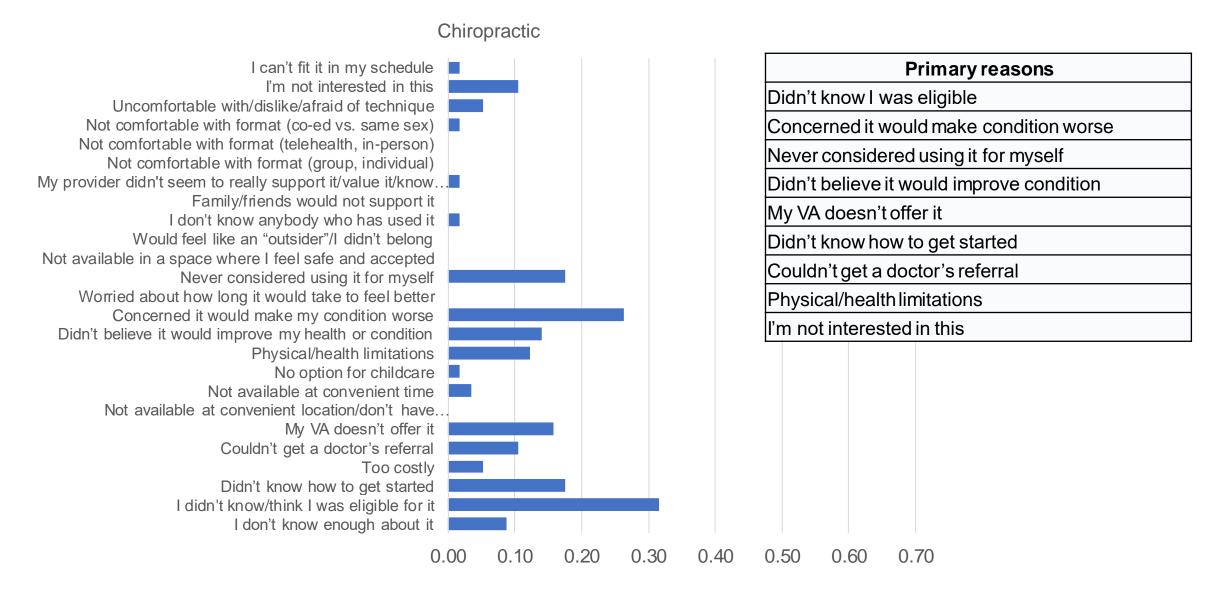
Reasons I never tried Acupuncture (N=78)



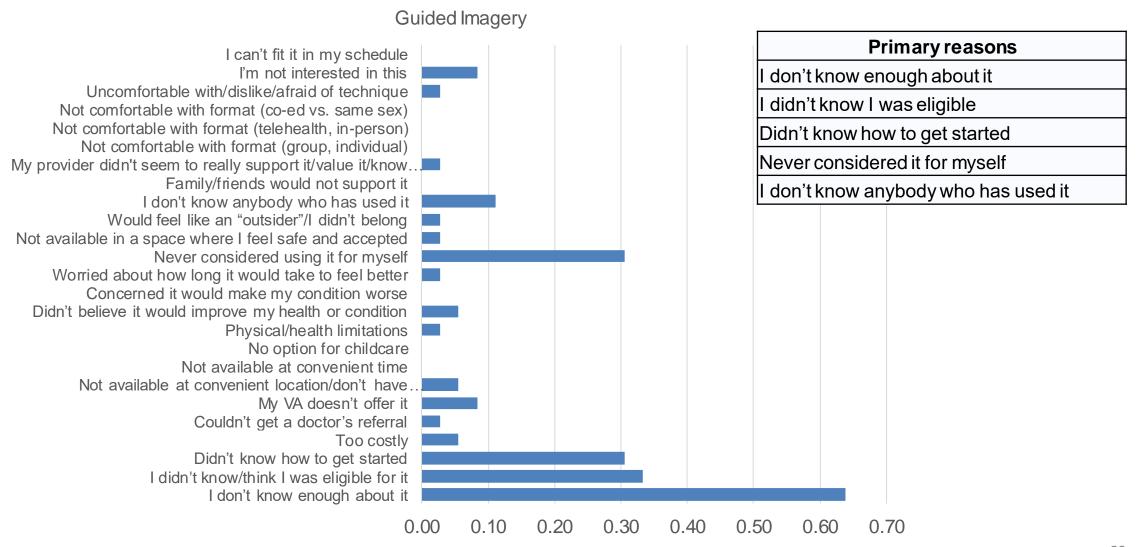
Reasons I never tried Biofeedback (N=58)



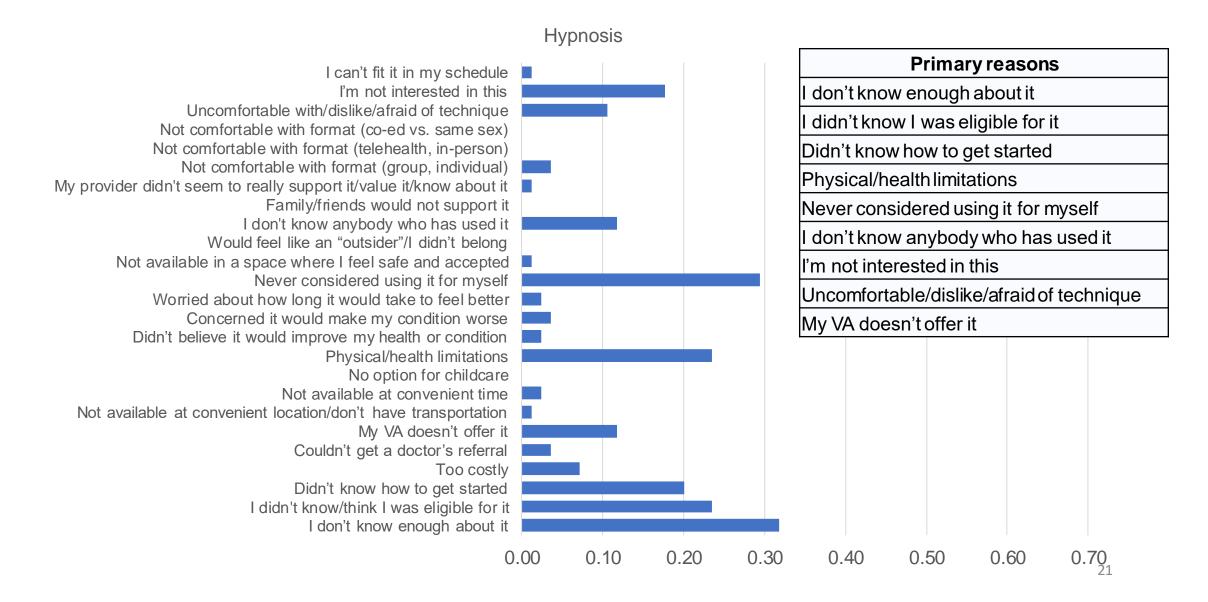
Reasons I never tried Chiropractic Care (N=57)



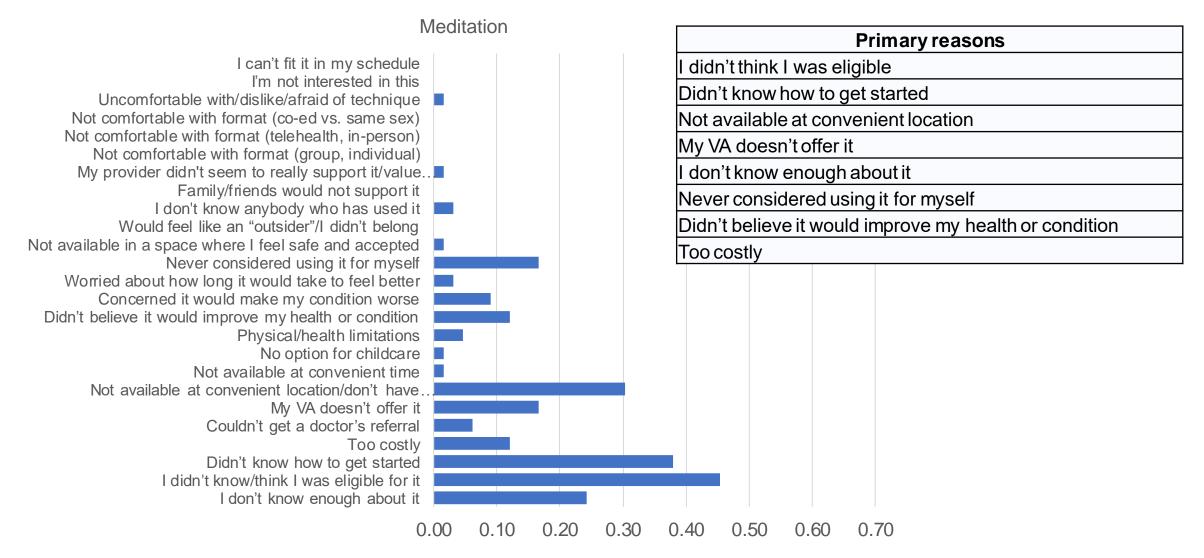
Reasons I never tried Guided Imagery (N=36)



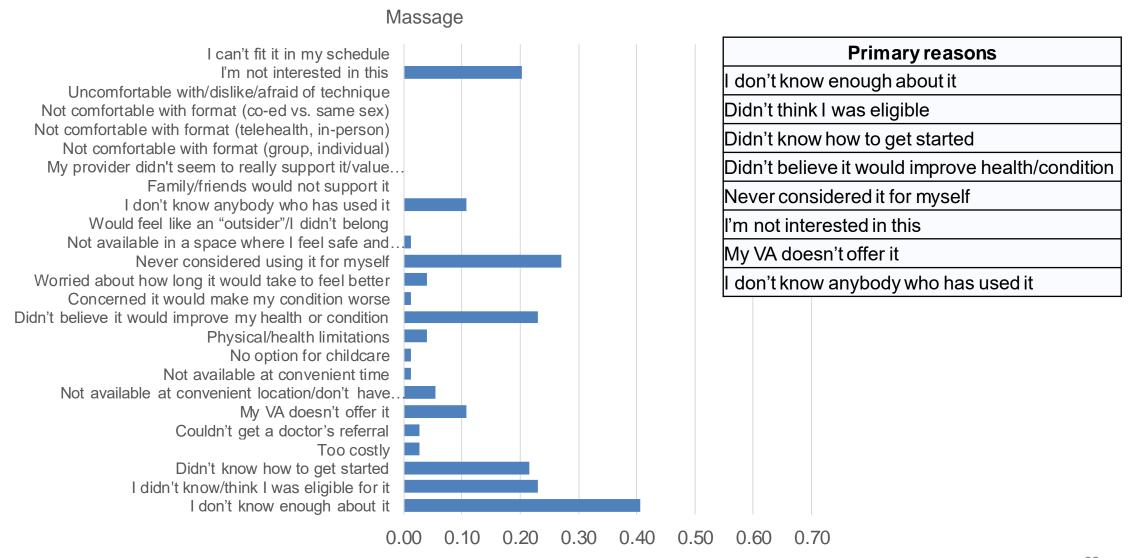
Reasons I never tried Clinical Hypnosis (N=85)



Reasons I never tried Therapeutic Massage (N=66)

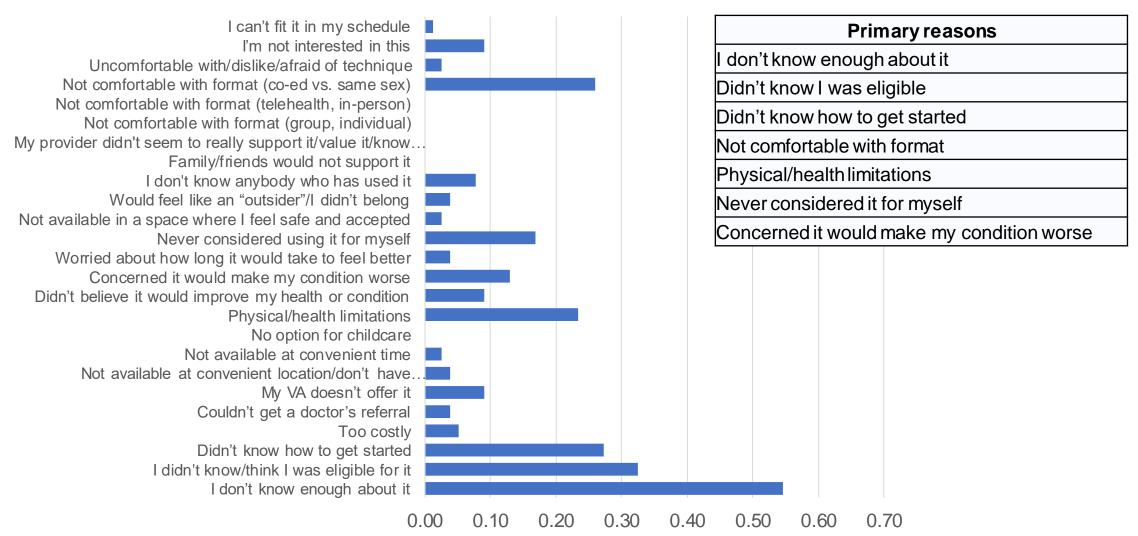


Reasons I never tried Meditation(N=74)

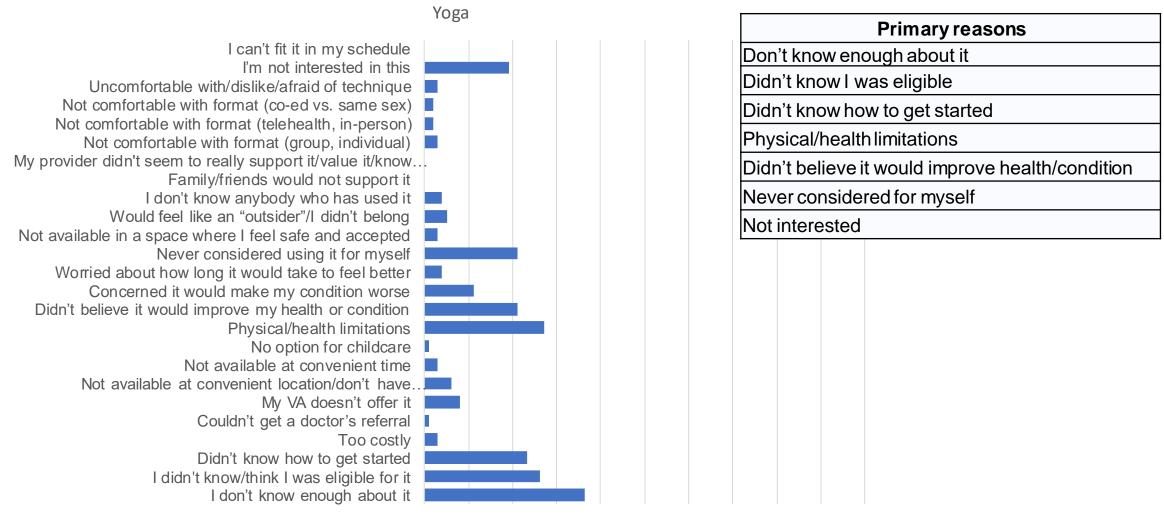


Reasons I never tried Tai Chi/Qi Gong (N=77)





Reasons I never tried Yoga (N=99)

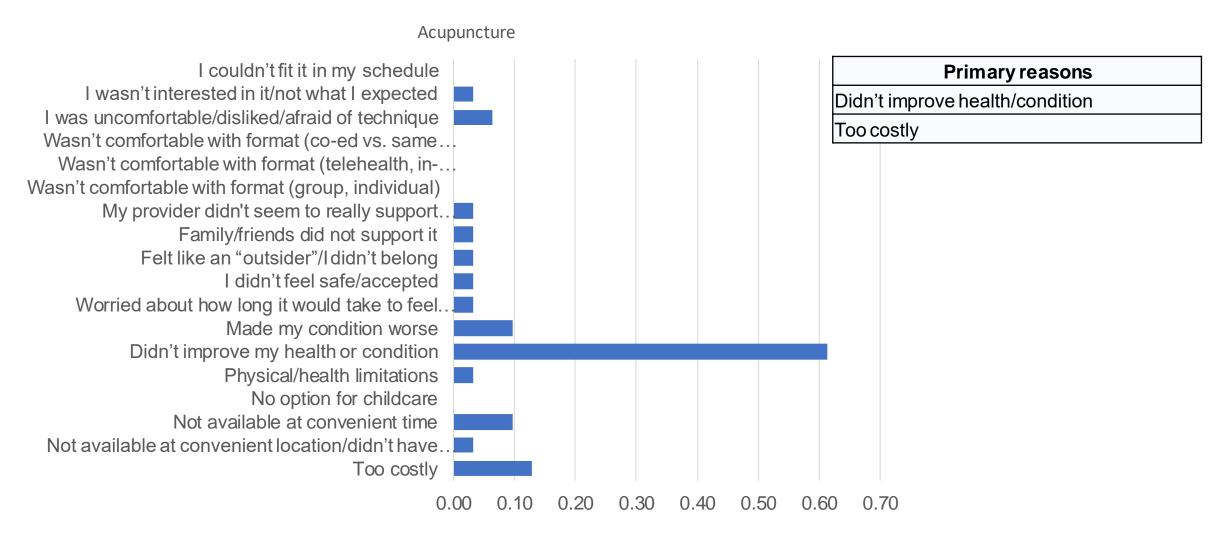


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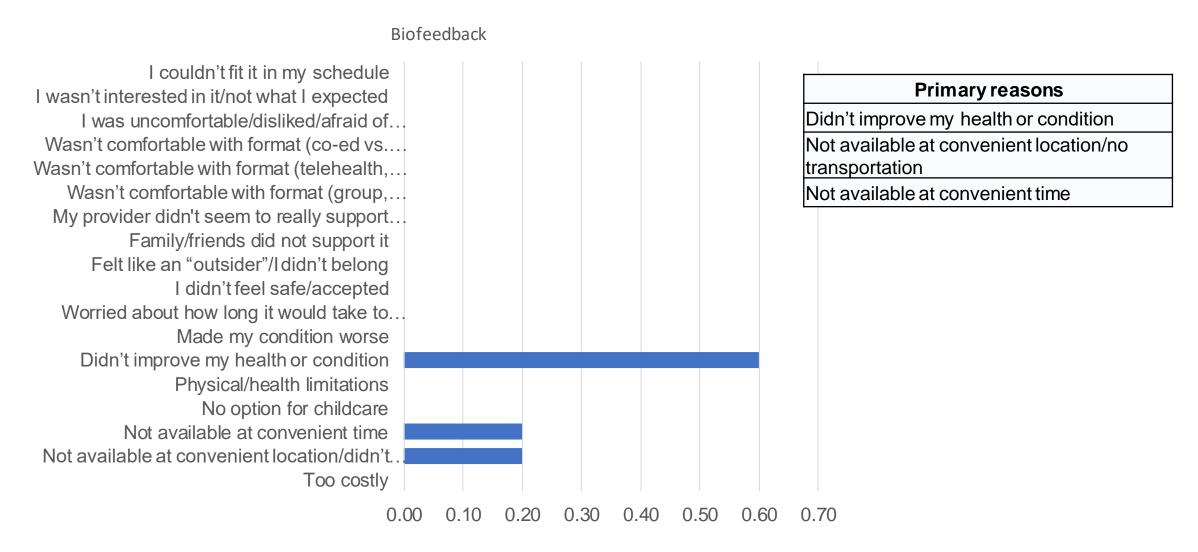
Summary: Primary barriers to trying a CIH modality related to lack of information and access

Domain	Item	N	Acup	Bio	Chiro	GI	Нур	Mass	Med	Tai Chi	Yoga
Information	Didn't know I was eligible	9	Χ	Χ	X	Χ	X	X	Χ	Χ	Χ
Information	Didn't know how to get started	9	Χ	Χ	X	Χ	X	X	Χ	Χ	Χ
Belonging	Never considered it for myself	9	Χ	Χ	X	Χ	X	Χ	Χ	Χ	Χ
Information	Don't know enough about it	8	Χ	Χ		Χ	X	X	Χ	Χ	Χ
Effectiveness	Didn't believe it would improve my health or condition	6	Χ	Χ	X			X	Χ		Χ
Access	My VA doesn't offer it	5	Χ		X		X	X	X		
Belonging	I don't know anybody who has used it	4	Χ			Χ	X		X		
Access	Physical/health limitations	4			X		X			Χ	Χ
Personal	I'm not interested in this	4			X		X		Χ		Χ
Effectiveness	Concerned it would make my condition worse	2			X					Χ	
Access	Couldn't get a doctor's referral	1			X						
Format	Uncomfortable/dislike/afraid of technique	1					X				
Access	Not available at convenient location/no transportation	1						Χ			
Access	Too costly	1						X			
Format	Not comfortable with format (co-ed vs. same sex)	1								Χ	26

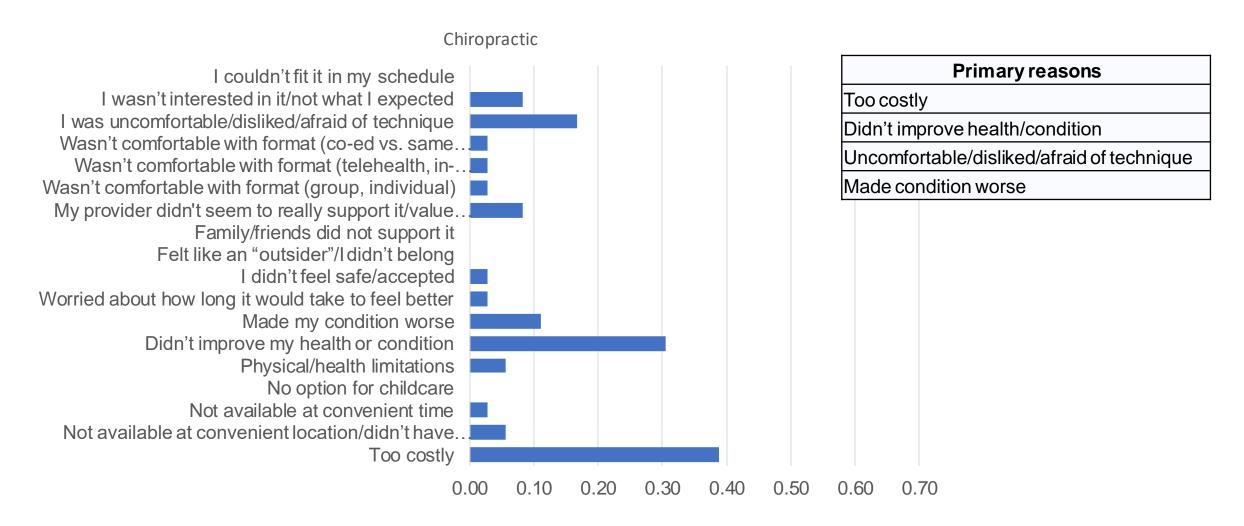
Reasons I tried but didn't continue Acupuncture (N=31)



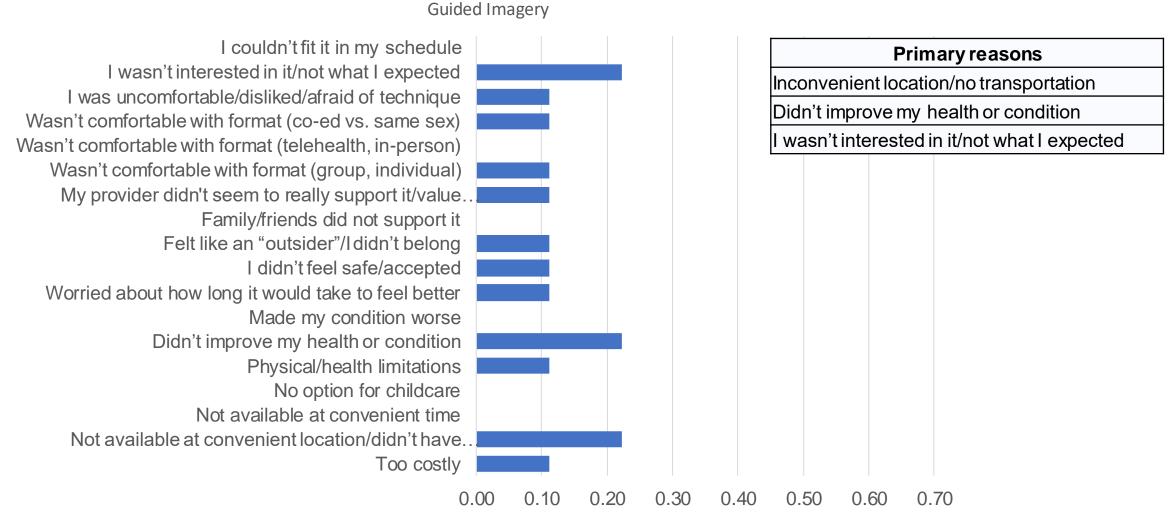
Reasons I tried but didn't continue Biofeedback (N=5)



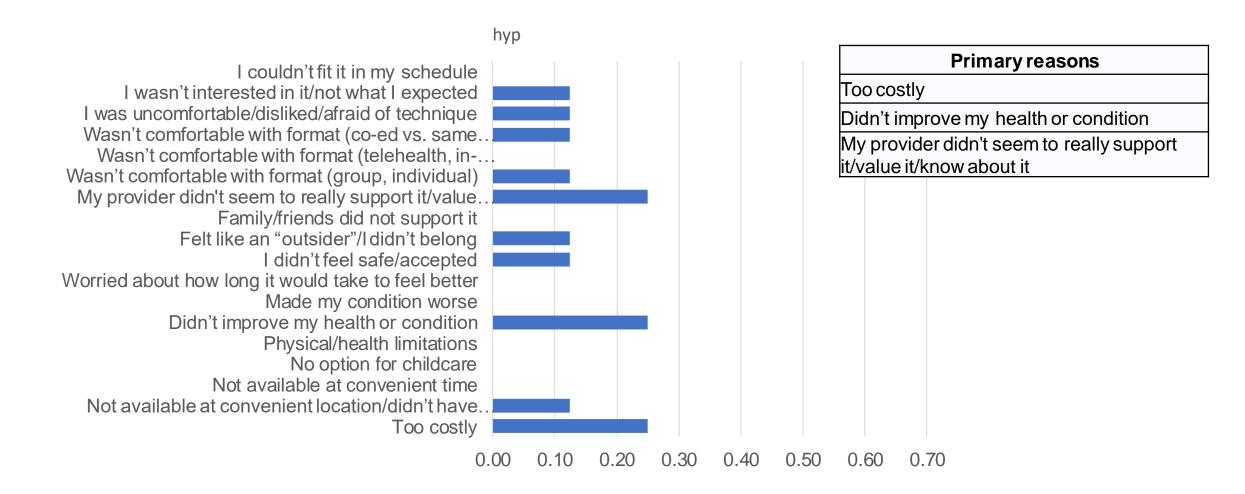
Reasons I tried but didn't continue Chiropractic Care (N=36)



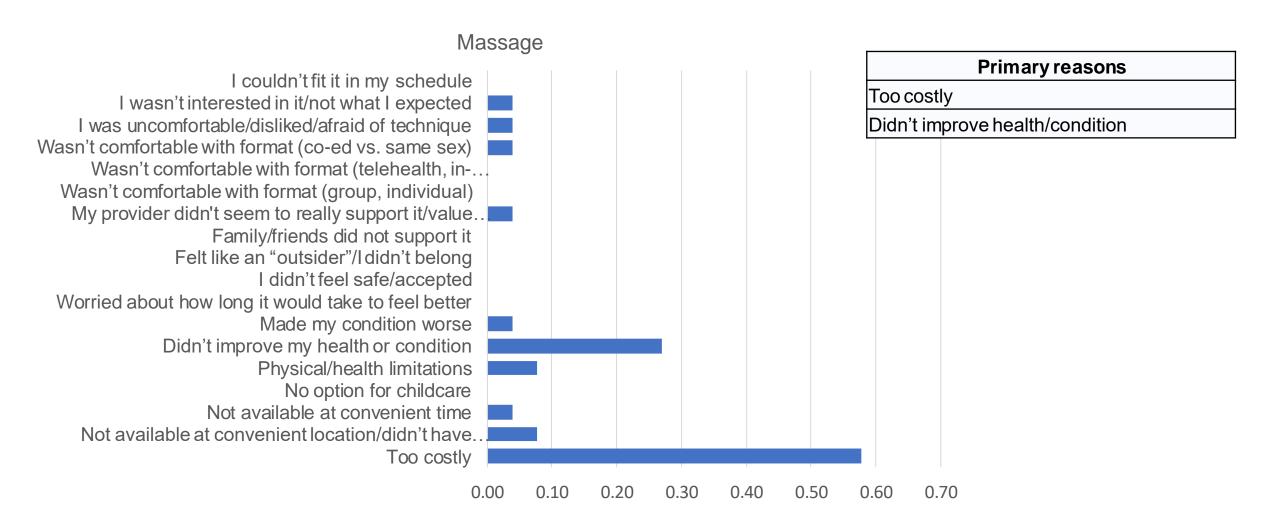
Reasons I tried but didn't continue Guided Imagery (N=9)



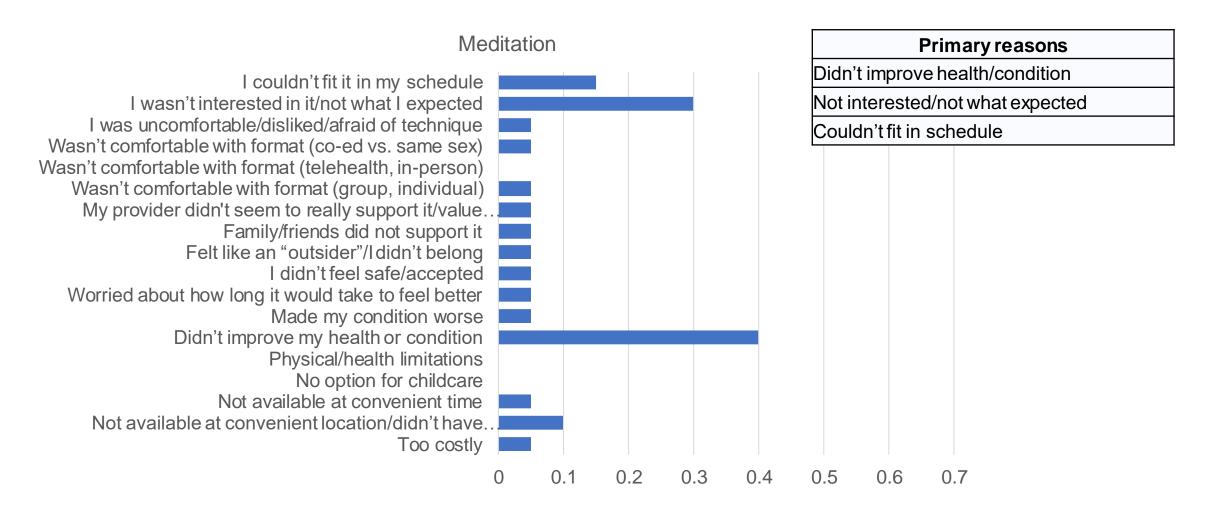
Reasons I tried but didn't continue Clinical Hypnosis(N=8)



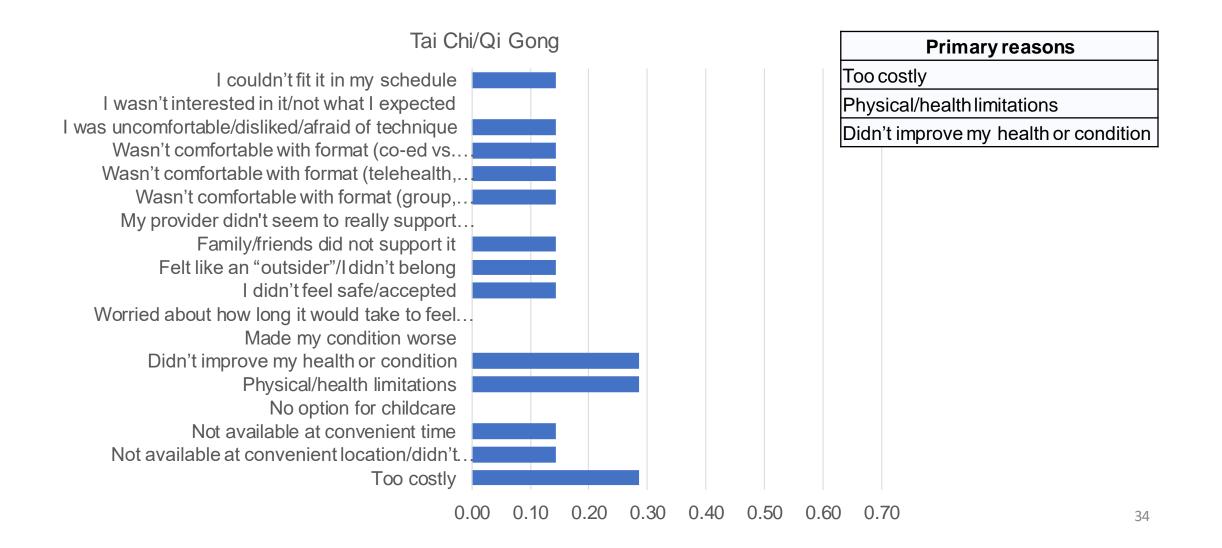
Reasons I tried but didn't continue Therapeutic Massage (N=26)



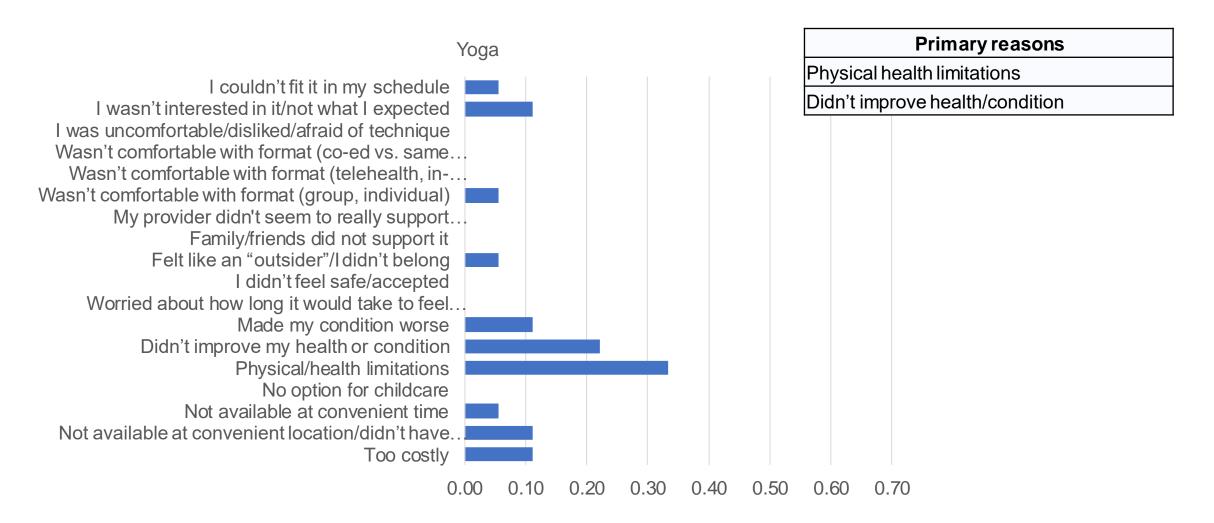
Reasons I tried but didn't continue Meditation (N=20)



Reasons I tried but didn't continue Tai Chi/Qi Gong (N=26)



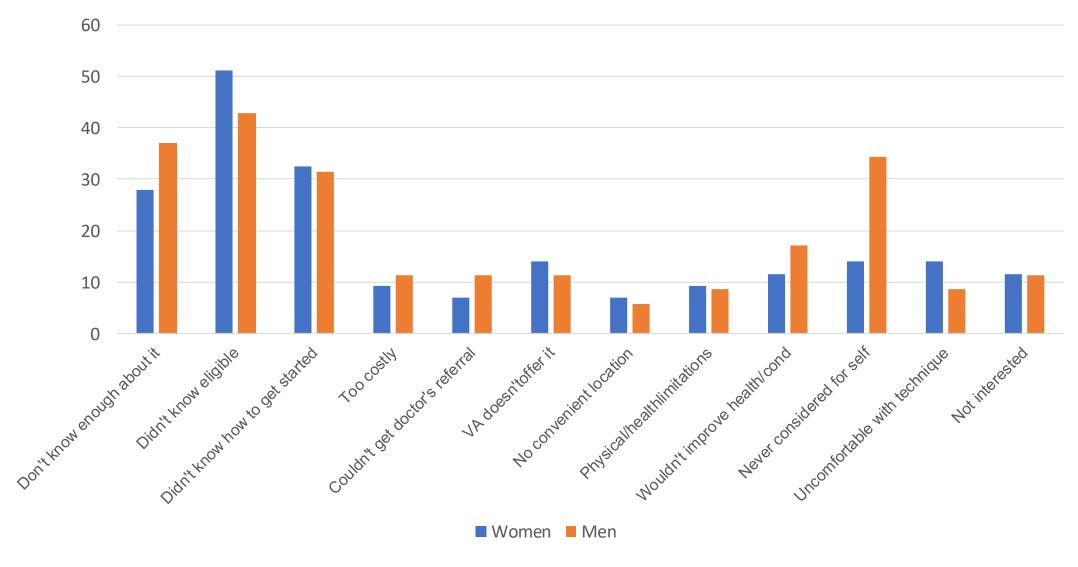
Reasons I tried but didn't continue Yoga (N=26)



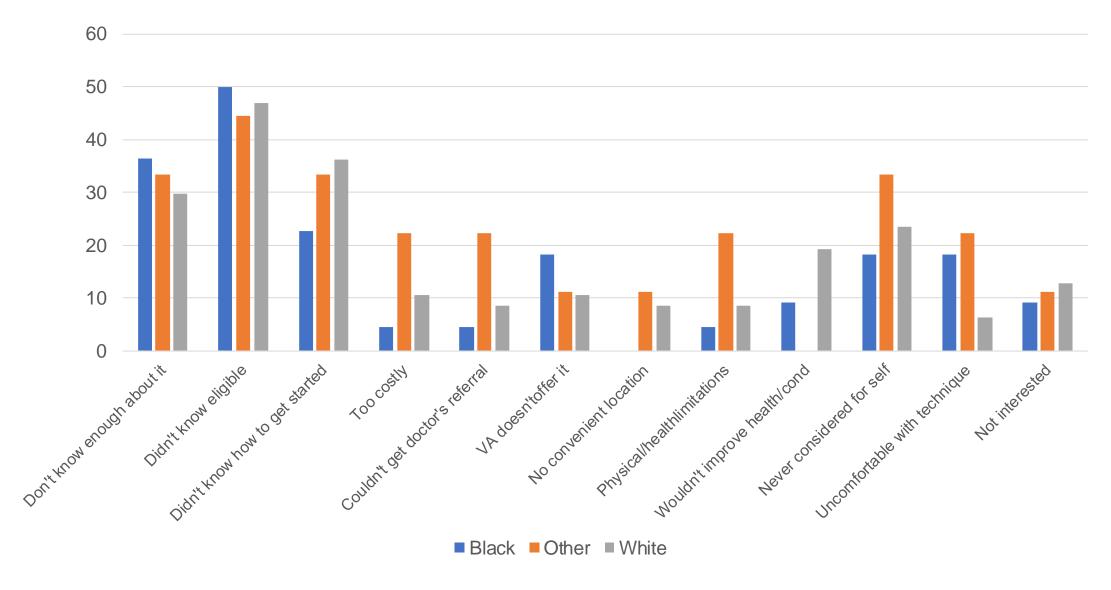
Summary: Primary barriers to continuing a modality related to effectiveness and cost

Domain	ltem	N	Acup	Bio	Chiro	GI	Нур	Mass	Med	Tai Chi	Yoga
Effectiveness	Didn't improve health/condition	9	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	X
Access	Too costly	5	X		Χ		Χ	X		Χ	
Access	Not available at convenient location/no transportation	2		Χ		X					
Access	Physical/health limitations	2								Χ	X
Personal	Not interested/not what I expected	2				Χ			X		
Access	Not available at convenient time	1		Χ							
Support from others	Provider didn't support/value/know about it	1					X				
Personal	Uncomfortable/dislike/afraid of technique	1			Χ						
Effectiveness	Made condition worse	1			Χ						
Personal	Couldn't fit it into schedule	1							Χ		

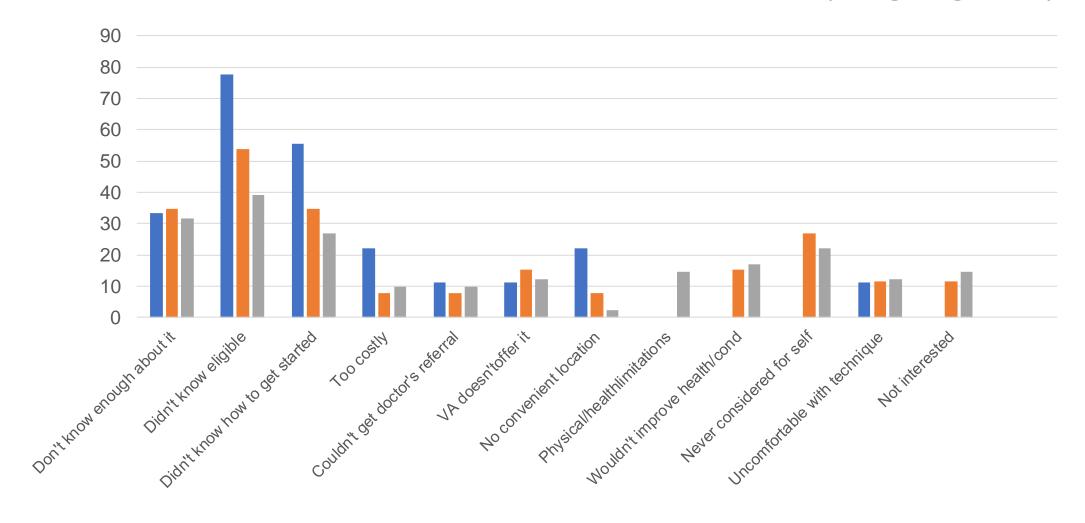
Barriers to CIH use across modalities by sex



Barriers to CIH use across modalities by race



Barriers to CIH use across modalities by age group



Conclusions

- Veterans had some exposure to CIH
- The majority of modalities were accessed in the community or at home
- Efforts to broaden Veterans' exposure to CIH should target information dissemination and access
- Barriers related to concern for worsened condition, discomfort with technique or format, and cost appear modality-specific
- Efforts to maintain Veterans' engagement in CIH should address issues of cost
- Further research is needed regarding Veterans' perceived lack of therapeutic effectiveness
- Further research is needed regarding suggested differences in barriers by Veteran characteristics; targeted implementation strategies by age group may be warranted

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