

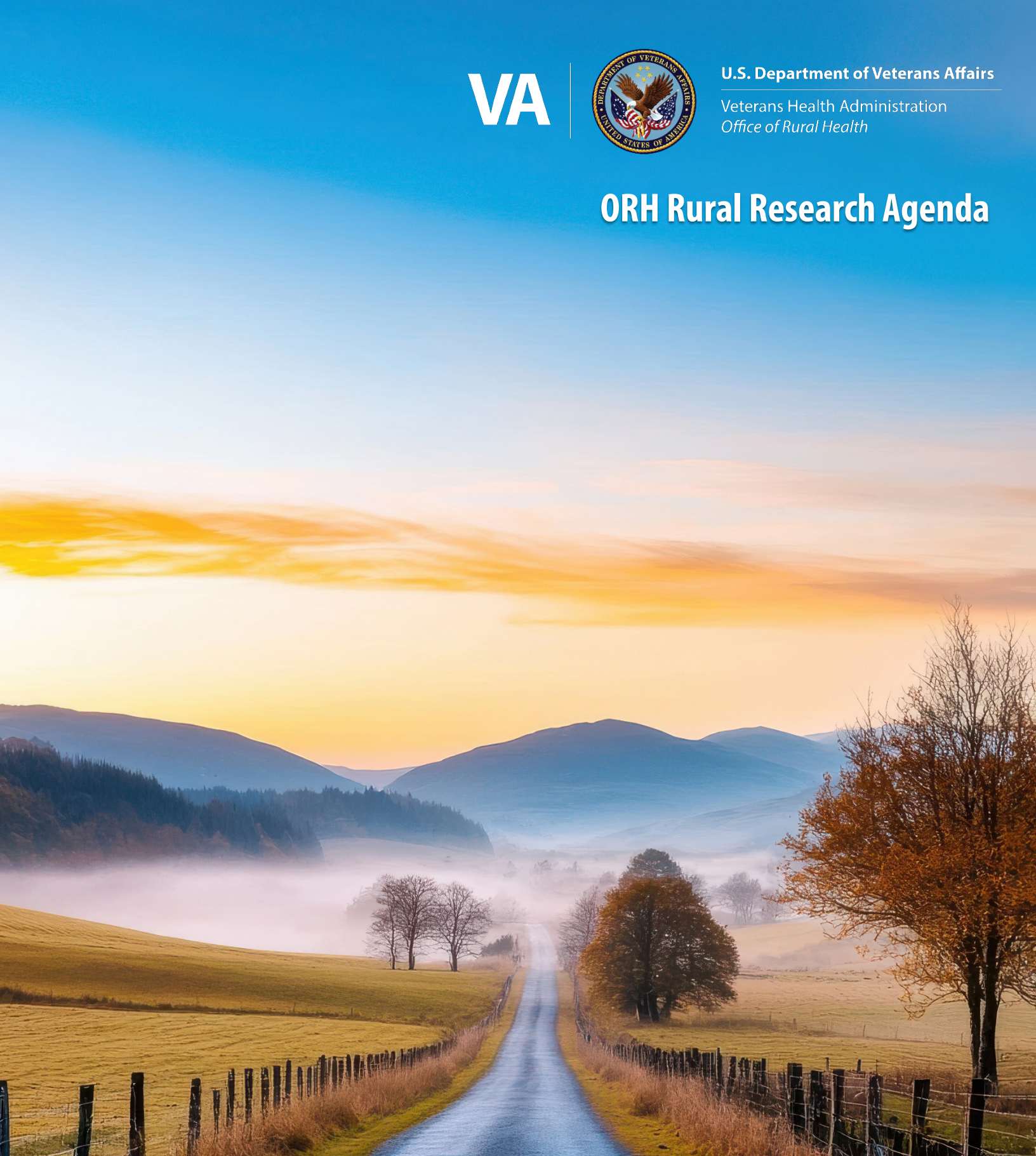
VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Rural Health

ORH Rural Research Agenda



DEPARTMENT OF VETERANS AFFAIRS (VA) VETERANS HEALTH ADMINISTRATION (VHA)
Office of Rural Health (ORH) Rural Research Agenda

April 2025

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I. MISSION

The mission of the VHA Office of Rural Health (ORH) *is to improve the health of rural Veterans by increasing their access to care and services through innovation*. ORH's Congressional mandate (38 U.S.C. § 7308) states the Office will "assist the VA Under Secretary of Health to conduct, coordinate, promote and disseminate research into issues affecting Veterans living in rural areas." This research can be initiated by investigators funded by ORH, as well as researchers funded by the VHA Office of Research and Development and agencies outside the VA.

The Veterans Rural Health Resource Centers (VRHRCs) are five satellite offices of ORH that provide guidance, oversight, and facilitation of innovation, research, quality improvement (QI), and dissemination and implementation of programs funded by ORH. The Congressional mandate under 38 U.S.C. § 7308 also identifies four areas of focus (**Figure 1**).



Figure 1. VRHRC Congressional Mandate

Guided by this mandate, VRHRCs support research and QI to identify health care needs of rural Veterans, develop and rigorously evaluate novel interventions that improve the health of rural Veterans and disseminate and implement programs to determine the impact of novel health care solutions. To ensure that all components of 38 U.S.C. § 7308 are addressed, ORH has identified specific research and QI objectives and research priorities that define the ORH Research Agenda. The Research Agenda will be evaluated by ORH and updated annually to ensure the research and QI priorities are consistent with VHA's current and future priorities.

II. RESEARCH AND QI FUNDING MECHANISMS

The rural health research literature has shown rural residents typically use less health care and report poorer health status than urban comparison groups and suggests rural Veterans suffer from the same health care disparities as other rural patients. To identify and improve our understanding of these disparities, as well as formulate, test, and disseminate effective solutions to these disparities, ORH has established four research and QI funding mechanisms. Collectively, these mechanisms address the four areas of the Congressional mandate outlined in **Figure 1**.

1. **Rural Veterans Needs Assessments**. Projects designed to improve the understanding of rural Veteran challenges to inform the development of innovations that aim to improve rural Veteran access to and quality of care.
2. **Rural Workforce and Infrastructure Analyses**. Projects that identify disparities in availability of health care to Veterans living in rural areas that inform the development of innovations to improve rural Veteran access to and quality of care.
3. **Rural Veteran- or Provider-Targeted Innovations**. Investigational pilot practices or programs to enhance the delivery of health care to Veterans living in rural areas, including innovation development, implementation, and replication.
4. **Rural Mentored Implementation**. Rural Mentored Implementations (RMI) are projects developed through prior VRHRC-supported initiatives that demonstrate improvements in rural Veterans' access to care or care quality, but which require additional development to understand potential for scalability and sustainment.

III. RESEARCH AND QUALITY IMPROVEMENT PRIORITIES

ORH encourages research in multiple priorities, aligned with our research and QI objectives, the ORH Operational Plan, VA Strategic Plan, Congressional legislative priorities, and guided by a multi-faceted conceptual model of health care access and quality. The priorities are also aligned under the four Rural Health Challenges (**Figure 2**). These research and QI priorities represent areas of ongoing ORH-funded activities and where new and expanded investigation is warranted.

1. **Workforce**: Develop and evaluate initiatives focused on rural workforce development (e.g., recruitment, retention, education, and training of care providers and support staff).
2. **Rural Disparities**: Assess, understand, and improve equitable access to and delivery of services for all rural Veterans.
3. **Health Policy**: Support rural policy analysis, strategic planning, rural geospatial solutions, and implementation in support of rural Veteran health care.

4. **Rural Population Health:** Understand rural Veterans needs across the lifespan, those with complex and chronic conditions, and from marginalized and historically underserved populations (e.g., American Indian and Alaska Natives, Minorities, Women)
5. **Social Determinants of Health:** Identify challenges facing rural Veterans in addressing social determinants of health. (e.g., food security, transportation, housing/homelessness, health and digital literacy, social isolation) or develop related interventions and programs.
6. **Clinical Areas of Focus:** Although all clinical care can present with unique challenges in rural areas and for rural residing Veterans, the following are of special interest:
 - *Primary Care:* Explore collaborative models enhancing access to high quality primary care informed by specialty care consultation.
 - *Mental Health:* Identify and promulgate treatment delivery models to address mental health needs, including suicide prevention, using novel approaches.
 - *Substance Use Disorder (SUD):* Assess available specialized services and expertise for the range of SUD conditions in rural areas (e.g., opioids, alcohol, poly-substance) and programs to improve access.
 - *Rehabilitation Services:* Assess access to and availability of services and develop/disseminate interventions that improve independent living for rural Veterans.
 - *Pharmacy Services:* Appreciate the unique issues in rural communities for access to clinical pharmacy services and the delivery of medications.
 - *Whole Health:* Disseminate evidence-based holistic approaches to chronic disease management.
 - *Cancer screening, management, and survivorship care:* Advance population approaches to early cancer detection and ensure rural Veterans receive high-quality cancer treatment.
 - *Geriatrics, frailty, age-related conditions, and caregiver needs:* Develop interventions or services to improve clinical outcomes for older Veterans and support aging in place and effective use of long-term care.
 - *Specialty Care:* Rural Veterans requiring specialty care face considerable barriers that can be addressed through innovative health models and workforce development strategies explored initially via research protocols.
7. **Practice and Research Infrastructure:** Leverage telehealth, internet infrastructure, and VA and other data sources to improve access for rural Veterans.
 - *Care Coordination:* Enhance coordination of rural Veteran care from VHA to community, community to VHA, and care provider to patient.
 - *Acute Care:* Understand the unique challenges of providing acute care (i.e., inpatient, emergency department, and urgent care) in rural settings.

- **Mobile Services:** Determine what mobile services are effective in meeting the needs of rural Veterans and promote patient and provider adoption.
- **Research Participation:** Partner with VHA Office of Research and Development to ensure equitable access to research studies.
- **Research Implementation:** Understand challenges and opportunities for implementation of research and QI in a rural context.
- **Peer Support and non-licensed Clinical Health Workers:** Expand the network of non-licensed care providers who address unmet health needs of rural Veterans.

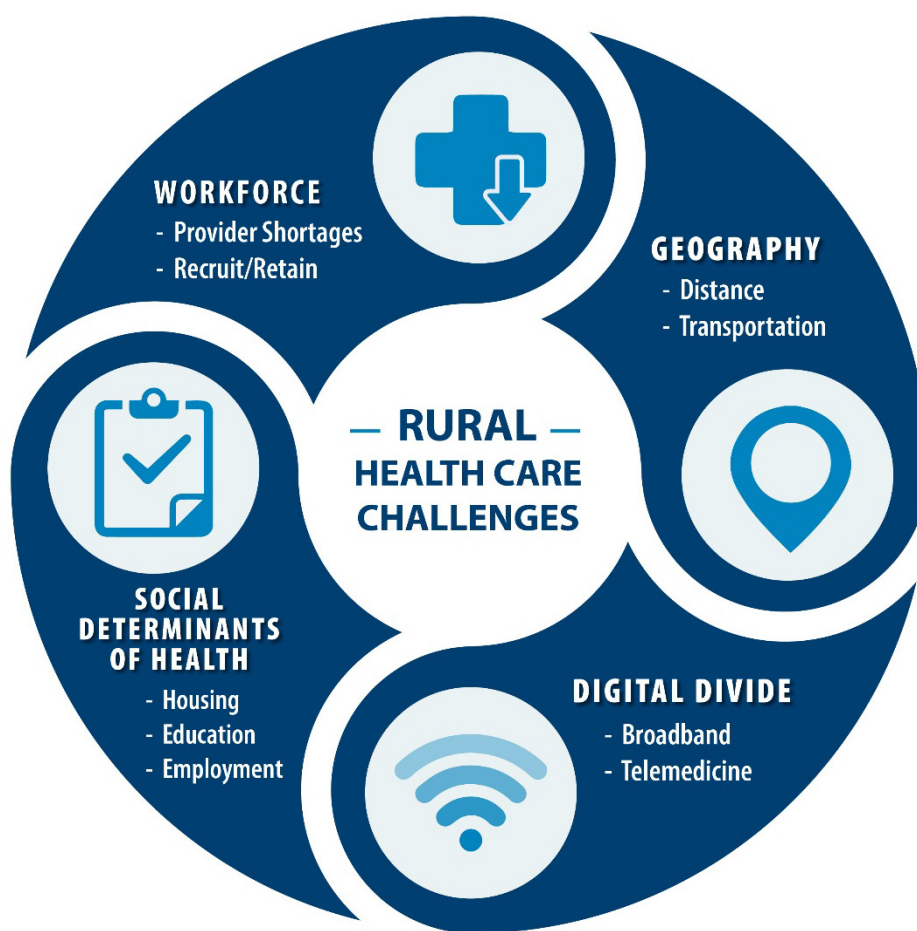


Figure 2. Rural Health Challenges

IV. Measuring Success in Addressing ORH Priorities

In response to GAO report (24-107245) requesting ORH “Develop performance goals that reflect leading practices identified in prior GAO work, such as being objective, measurable, quantifiable, and linked to other strategic plan components”, ORH has adopted the following measures and incorporated them into our NOMAD tracking system. Not all measures will apply to every project.

- Peer Reviewed Publications (e.g., total, impact factor, h-Index)
- Meeting Abstracts
- Presentations at regional or national meetings
- White Papers and Reports
- Toolkits
- Veterans Served
- Providers Trained
- Researchers Trained
- Partnership Funding (e.g., NIH, VA ORD, HRSA, IHS)
- Adoption of research into practice
- Patents
- Electronic tools (e.g., apps, websites, electronic toolkits)
- Transition of Rural Mentored implementation to Enterprise-Wide Initiatives

V. SUMMARY

The VHA Office of Rural Health is committed to the mission: *improve the health of rural Veterans by increasing their access to care and services* through innovation, research, quality improvement, and dissemination and implementation. This research agenda will help us achieve that mission.

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