



Message from the Executive Director of the VA Office of Rural Health

Thomas Klobucar, Ph.D., ORH Executive Director

As 2021 comes to a close, I have been reflecting on the past year's successes at the U.S. Department of Veterans Affairs (VA) Office of Rural Health (ORH).

Through the work of ORH's VA Central Office staff, our Veterans Rural Health Resource Centers (VRHRCs) and our partners in the field, ORH actively engaged with rural Veterans to deliver health care solutions at 99 percent of VA medical centers across 18 Veterans Integrated Service Networks. In 2021, over 50 ORH Rural Promising Practices, Enterprise-Wide Initiatives, and rural-focused research and innovation projects provided increased access to care for our nation's nearly three million enrolled rural Veterans. In this issue, you'll read about a few of our innovative practices and hear about the impact that our programs have on rural Veterans.

Last month, ORH observed National Rural Health Day (NRHD) – a day to reflect on some of the most pressing challenges facing our nation's rural communities.

Read more in ORH Observes National Rural Health Day (NRHD) on page 2.

The Veterans Health Administration (VHA) and Indian Health Service (IHS) recently updated their [Memorandum of Understanding](#) (MOU) to improve health care delivery for the country's nearly 145,000 American Indian and Alaska Native (AI/AN) Veterans.

Read more in VHA and IHS join forces to serve American Indian and Alaska Native Veterans on page 4.

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ORH's five Veterans Rural Health Resource Centers (VRHRCs) are satellite offices that serve as hubs of rural health care, research, innovation, and dissemination. The fourth story in our series of VRHRC spotlight articles highlights the Gainesville, Florida location.

Read more in Office of Rural Health Veterans Rural Health Resource Center (VRHRC) Spotlight: Gainesville, Florida on pages 7-8.

Stay tuned as we highlight practical, tangible and beneficial ways to increase access to care for rural Veterans and explore the rural connections to VA's top health priorities. To join our rural Veteran community and receive program updates, please contact ORH Communications at ORHcomms@va.gov.

For the latest information about VA's response to the coronavirus pandemic, please visit <https://www.publichealth.va.gov/n-coronavirus/index.asp>. ♦

ORH Observes National Rural Health Day

On November 18th, the U.S. Department of Veterans Affairs Office of Rural Health (ORH) observed National Rural Health Day (NRHD) – a day to reflect on some of the most pressing challenges facing our nation's rural communities.

Approximately 80 percent of rural America is considered medically underserved, and the number of rural providers is predicted to decline by 23 percent over the next decade. According to the [National Rural Health Association](#), there is just one primary care physician for every 2,500 patients in rural communities.

U.S. RURAL CLINICAL WORKFORCE

Workforce Challenges



4.7 million U.S. Veterans live in rural parts of the country



80% of rural communities are medically underserved



One physician for every **2500 patients** in rural communities*

*from the National Rural Health Association

VA Office of Rural Health Clinical Workforce Programs



Rural Interprofessional Faculty Development Initiative (RIFDI)



Rural Health Career Development Awards (CDA) Program



Rural Quality Scholars Program

For Veterans in these rural communities, provider shortages can mean longer travel times to the nearest clinic, limited access to specialty care, and less successful patient outcomes.

For this year's NRHD, ORH released a [video](#) describing the ways that VA and ORH are creating solutions to the rural workforce crisis. ORH offers unique programs to combat these workforce shortages, including:

- **Rural Interprofessional Workforce Development Initiative (RIFDI)**, which provides training for residency proctors, enabling them to better train, mentor, and monitor residents serving rural areas.
- **Rural Health Career Development Awards (CDA)**, which provide mentorship and financial assistance to researchers focused on rural Veteran health care challenges.
- **ORH Rural Scholars Fellowship (RSF)**, which connects rural providers with opportunities for professional growth and development in order to spark innovation and drive leadership.

These specialized workforce initiatives inspire and shape the next generation of rural providers through mentorship, training, and professional development opportunities. Visit www.ruralhealth.va.gov to learn more. ♦

RIFDI Program Creates Leadership Opportunities for VA Clinicians

By **Beth Schwartz**, VA Office of Rural Health

Facing the dual threats of a provider shortage and an aging workforce, rural communities across the United States are experiencing unprecedented health care challenges. Half of rural doctors are over the age of 50, more than a quarter are over the age of 60, and the number of rural doctors is predicted to decline by 23 percent over the next decade.

To help reverse this trend, the U.S. Department of Veterans Affairs (VA) Office of Rural Health (ORH) collaborated with the VA Office of Academic Affiliations (OAA) to develop the [Rural Interprofessional Faculty Development Initiative \(RIFDI\)](#) - a two-year training program designed to attract providers, improve clinician job satisfaction and retention, and develop teaching and training skills for educators in rural settings. In August, the White House

[announced](#) its plan to improve the health of rural communities, which included increased support for RIFDI as well as directing [American Rescue Plan](#) funds to rural areas to help providers cover coronavirus-related expenses.

The RIFDI curriculum is divided into six components, all designed to provide participating clinicians with networking, training, and professional development opportunities:

- **Conferences** - Virtual professional development sessions featuring guest speakers delivering new and emerging VA training activities for clinicians serving rural Veterans
- **Webinars** - Interactive group trainings which address current learning needs, teaching skills, and other educator topics
- **RIFDI-Fundamentals in teaching** - Online, self-directed faculty development modules co-sponsored by the Society of Teachers of Family Medicine (STFM)
- **Peer Groups** - Cohorts designed to create communities of practice with OAA staff
- **Experiential Projects** - Educational expansion projects which each RIFDI participant completes with an OAA staff mentor; projects are designed to help RIFDI participants develop and expand training opportunities locally
- **Site Workshops** - Six-hour virtual workshops hosted at each site by a STFM facilitator

Judith Legault, a psychologist at the VA Community-Based Outpatient Clinic (CBOC) in Clermont, Florida, completed the RIFDI program in September 2021.

“I found myself wanting to get more involved in the training programs throughout VA,” said Legault. “The networking and the weekly presentations were both excellent.”

During her time in the RIFDI program, Legault accepted a new position as psychotherapy coordinator for the psychiatry residency program at the Clermont CBOC.

“Completing the RIFDI program was one of the things that helped in my selection for that role,” she said.

Legault is one of many VA clinicians who have accepted a leadership position at a rural-serving facility through VA workforce programs. Additionally, 70 percent of the 40 most rural VA medical centers have added physician residents through the [Veterans Access, Choice, and Accountability Act \(VACAA\)](#).

Legault says she would recommend the program to fellow clinicians who are interested in being involved in training opportunities at VA.

“This program is very much dedicated to improving the training of new providers, so it is perfect for anyone interested in teaching or precepting,” she said.

For more information about RIFDI, contact VHAOARIFDI@va.gov or [click here](#) to view a fact sheet about the program. ♦



VHA and IHS Join Forces to Serve American Indian and Alaska Native Veterans

The Veterans Health Administration (VHA) and Indian Health Service (IHS) recently updated their [Memorandum of Understanding \(MOU\)](#) to include feedback from American Indian and Alaska Native (AI/AN) Veterans.

Under the terms of the new MOU, VHA and IHS will coordinate efforts across health care access, patient experience, information technology and resource sharing initiatives to improve health care delivery for the country’s nearly 145,000 AI/AN Veterans.

Prior to completing these updates, the U.S. Department of Veterans Affairs (VA) released a [summary report](#) that presents tribal feedback on proposed updates to the MOU. This input was provided by AI/AN Veterans during a series of [tribal consultation sessions](#) hosted by VHA and IHS in late 2020 and early 2021.

 ACCESS	Increase access and improve quality of care and services for AI/AN Veterans
 PATIENTS	Ensure enrollment and seamless navigation for AI/AN Veterans in VHA and IHS
 INFORMATION TECHNOLOGY	Facilitate integration of VHA/IHS Health Information Technology systems
 RESOURCE SHARING	Improve access through resource sharing

“Mutual Goals” outlined in the 2021 VHA-IHS MOU

“The newly signed MOU is a crucial step forward to ensure our American Indian and Alaska Native Veterans receive the high-quality care they have earned,” said VA Office of Rural Health (ORH) Executive Director Thomas Klobucar. **“Through the collaborative efforts of both VA and HIS, we can continue to bridge existing gaps and provide equitable care delivery to this historically marginalized Veteran population.”**

First signed in 2003, the MOU has helped guide this historic collaboration between VHA and IHS, resulting in key accomplishments such as:

- Access to care:** Established agreements allow VHA to reimburse IHS for care that AI/AN Veterans receive at IHS and Tribal Health Program (THP) facilities, enabling patients to receive care at the most convenient facility

Since agreements were established, nearly \$149 million has been reimbursed by VHA to IHS and THPs for care to almost 14,000 AI/AN Veterans
- Access to medication:** Eligible AI/AN Veterans can avoid burdensome travel and request medication be delivered to their front door through VA’s mail-out pharmacy services, which are extended to cover medications prescribed at IHS and THP facilities

Since services were extended, nearly 6.8 million prescriptions have been processed for AI/AN Veterans
- Access to transportation:** VA’s Highly Rural Transportation Grant (HRTG) program—which provides funds to organizations to transport Veterans in highly rural areas to their medical appointments—regularly extends its services to dozens of tribal communities across the country

In the most recent fiscal year, the HRTG program served 26 tribal communities across nine states

Under the new MOU, VHA and IHS will build upon these past successes to create a seamless patient experience where AI/AN Veterans feel understood and respected when receiving care across VA and IHS facilities.

To learn more about the newly updated VHA-IHS MOU, [click here](#) to read a press release or visit the ORH website at www.ruralhealth.va.gov/aboutus/programs.asp. ♦

Advance Care Planning: A Gift for the Holidays

By **Mara Fuller**, LCSW, ACP-GV, Program Coordinator, Salem VA Healthcare System



The U.S. Department of Veterans Affairs (VA) National Advance Care Planning via Group Visits (ACP-GV) program is promoting awareness across Veterans Health Administration (VHA) of the importance of initiating advance care planning conversations with loved ones. These important conversations are a free gift Veterans can provide to their family and loved ones for the holidays by planning now for potential unexpected health situations in the future.

Throughout the holiday season, the ACP-GV Program, supported by the Office of Rural Health (ORH), will highlight the importance of talking to loved ones about *What Matters Most* regarding planning for future health care. Last year, more than 55 VA sites engaged Veterans, their families, and caregivers in advance care planning by facilitating a group discussion that elicited personal experiences and encouraged participants to identify a next steps in the process of planning for future health care needs.

Visit the below resources for additional information about advance care planning and completing an advance directive:

- VA Podcast Episodes -
 - 1) [What's an Advance Directive and Why Should I Complete One?](#)
 - 2) [Choosing a Health Care Agent](#)
 - 3) [I've Been Chosen as A Health Care Agent – Now What?](#)
- [Click here](#) to complete a VA advance directive form
- [Click here](#) to learn more about advance care planning at VA
- [Click here](#) to learn more about advance care planning in a group setting ♦

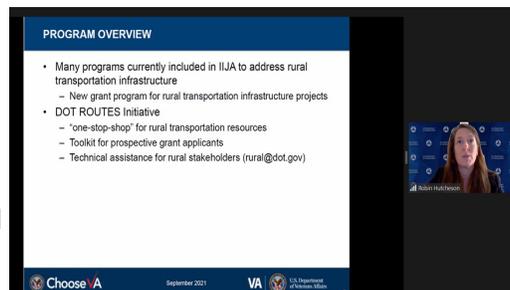
Infrastructure Week Arrives for the Veterans Rural Health Advisory Committee

By **Scott Bledsoe**, VA Office of Rural Health

While lawmakers on Capitol Hill were hashing out the final details of an infrastructure bill this past fall, the Department of Veterans Affairs (VA) [Veterans Rural Health Advisory Committee](#) (VRHAC) convened virtually for their bi-annual meeting to learn about the current transportation and broadband infrastructure challenges facing rural communities. These areas are of particular importance to rural Veterans, who often face long travel times to their nearest facility and spotty Wi-Fi service when trying to log in to their telehealth appointments.

Over the course of the two-day meeting, VRHAC members learned about potential solutions to the most pressing rural infrastructure challenges. Speakers included senior VA leaders, who highlighted VA rural transportation and telehealth programs that increase access to care for rural Veterans. Speakers also included executives from the U.S. Department of Transportation (DOT), the U.S. Department of Agriculture (USDA), and the Federal Communications Commission (FCC). (Continued on page

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Infrastructure Week Arrives for the Veterans Rural Health Advisory Committee (continued from page 5)

After learning about the state of rural infrastructure and how government and private sector organizations can collaborate to increase rural broadband access, the committee developed actionable policy recommendations for the VA Secretary to improve quality of care for rural Veterans. Their recommendations included:

- Expanding VA's Highly Rural Transportation Grant (HRTG) program to cover more rural areas of the U.S. This important program provides funding to organizations that provide rural Veterans transportation services to their medical appointments.
- Prioritizing geographic location during telehealth appointment scheduling. This would allow Veterans who face long travel times to the nearest facility to receive priority consideration for telehealth appointments.
- Using state, local, and Veterans Service Organization (VSO) partnerships to educate and inform Veterans in rural areas about various FCC broadband subsidies. These subsidies exist to help cover the cost of broadband in rural areas.

In addition to their work to form recommendations, the Committee also welcomed four new members from diverse backgrounds spanning academia, medicine, and government:



Kat Miller
Director,
Nevada Department of Veterans Services



Dr. Marcus Cox
Associate Dean and Professor,
College of Arts, Xavier University of Louisiana



Dr. Vanessa Meade
Assistant Professor,
University of Alaska-Anchorage School
of Social Work



Dr. Pavritha Ellison
Anesthesiologist and Program Director,
West Virginia University Medicine

The insight these new members provide proved invaluable as the committee formed their policy recommendations and ensured the concerns of America's rural Veterans were heard in the highest levels of VA. ♦

Office of Rural Health Veterans Rural Health Resource Center (VRHRC)

Spotlight: Gainesville, Florida

This story is the fourth in a series of articles focusing on the Office of Rural Health's five [Veterans Rural Health Resource Centers \(VRHRCs\)](#) across the United States. VRHRCs are ORH satellite offices that serve as hubs of rural health care research, innovation, and dissemination.

Veterans Rural Health Resource Centers were established by congressional mandate [38 USC § 7308](#) to support ORH's mission to improve the health and well-being of rural Veterans with a specific mandate to:

- *Improve understanding of rural-specific challenges*
- *Identify disparities rural Veteran care and services*
- *Formulate practices or programs to enhance the delivery of health care*
- *Implement practices systemwide*

VRHRCs are bridges for connecting innovative care models and study data with real-world, practical interventions that benefit Veterans living in rural areas. Each of ORH's VRHRCs maintains an annual portfolio of studies, innovative pilots, disseminations and other programmatic initiatives designed to expand rural Veterans' access to healthcare.

Located within the [North Florida/South Georgia Veterans Health System](#) at the [Malcom Randall VA Medical Center](#), the ORH Veterans Rural Health Resource Center (VRHRC) in Gainesville, FL was established in 2019. The Gainesville VRHRC maintains a diverse portfolio of 23 projects to deliver innovative solutions for rural Veterans. Focus areas include:

- *Improve independent living for rural Veterans*
- *Strengthen rural workforce recruitment, retention, and education*
- *Support rural policy analysis, strategic planning, rural geographic database design, and implementation in support of rural Veteran health care through geospatial solutions*



Malcom Randall VA Medical Center



Keith Myers, DPT, MBA & Sergio Romero, PhD

The Gainesville VRHRC is led by Clinical Director Keith Myers, DPT, MBA and Operations Director Sergio Romero, PhD. In addition to Drs. Myers and Romero, the Gainesville VRHRC is supported by Administrative Officer Liddy Matheny and Administrative Assistant Nicholas Bartolomeo. Across the country, over 200 additional research team members lead and support portfolio projects.

The Gainesville VRHRC partners with VA clinicians and researchers, as well as academic institutions across the country to develop high-impact rural interventions through research, pilot studies, and dissemination projects. FY22 projects include:

(Continued on page 8)

Office of Rural Health Veterans Rural Health Resource Center (VRHRC) Spotlight: Gainesville, Florida (continued from page 7)

- **Improving Access to Home Safety Evaluations and Home Modifications for Rural Veterans**

This project investigates current VA practice for conducting home evaluation and prescribing home alterations, collect best practices and barriers/ facilitators to conducting remote home assessments and develop an inventory of VA- applicable telehealth technologies and clinical guidelines for conducting remote safety evaluations for Veterans residing in rural communities.

- **Enhancing Pelvic Health Across the Rural Continuum**

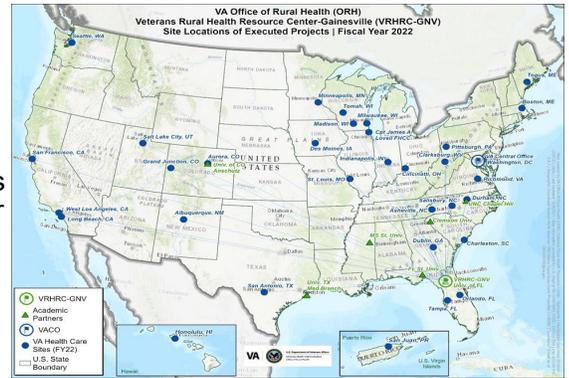
Comprehensive Pelvic Floor Physical Therapy (PFPT) is recommended as a first-line, low-risk, minimally invasive intervention for prevention and management of a multitude of Pelvic Floor Disorders (PFDs). While PFPT is shown to significantly help manage many types of PFDs, access to these types of programs and services are significantly lacking both within the VHA, as well as, in the community. This project specifically targets the needs of Rural Women Veterans by advancing and refining the skill set of our existing workforce, through formal training and mentorship in this specialty area.

- **ALS Comprehensive Care Supported by CVT in the Home**

This project is built on the successful framework of our Rural Promising Practice, *Clinical Video Telehealth (CVT) to Provide Comprehensive Care to Rural Veterans with Multiple Sclerosis*. It is designed to extend services such as Specialty Care Neurology, Social Work, Respiratory Therapy, Primary Care, and Physical Medicine Services [Physical, Occupational, and Speech Therapy] through CVT/VA Video Connect in a multi- disciplinary comprehensive care team model to Veterans diagnosed with Amyotrophic Lateral Sclerosis (ALS). It is currently in place at 11 VA Medical Centers and seeking to expand further through a hub and spoke model.

- **Telehealth Stepped Exercise Program for Rural Veterans with Knee Osteoarthritis**

Rural Veterans have higher rates of knee osteoarthritis (OA), more activity limitations, and less access to Physical Therapy due to both requirements to travel long distances to clinics and an inadequate number of physical therapists serving in rural areas. This project focuses on development and replication of a Telehealth STEpped Exercise Program for Knee OA (STEP-KOA) to improve knee OA rehabilitation care, access and outcomes among rural Veterans. ♦



ORH Supports New Colorado-based Suicide Prevention Resource for Veterans

By, **Veterans Health Administration**, Eastern Colorado Health Care System

Colorado is launching an online platform, Operation Veteran Strong, designed to connect Veterans to the right national and local resources at the right time to increase self-awareness, build resilience, and prevent the development of mental health and well-being crises. Although Veterans make up nearly 10 percent of the population, 17 percent of all suicides in Colorado are Veterans, and the suicide rate among Veterans is more than double the rate of non-Veterans. The U.S. Department of Veterans Affairs (VA) Office of Rural Health (ORH) is providing funding support to Operation Veteran Strong through the [Rural Suicide Prevention](#) Enterprise-Wide Initiative. ORH is also assisting with disseminating the portal across rural areas of the state.

Created by Grit Digital Health - a Denver-based behavioral health technology company, www.OperationVeteranStrong.org provides Veterans, and the communities in which they live, access to the necessary tools, resources, and referrals to foster resilience and prevent suicide via a customized digital platform. Operation Veteran Strong is available for free to all Veterans and their loved ones.

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ORH Supports New Colorado-based Suicide Prevention Program (continued from page 8)

"As a psychologist, I firmly believe that it's not enough to only provide care to those who seek it. We have to find creative ways to connect Veterans with resources to build resilience and prevent downstream mental health challenges. We are incredibly proud to provide this essential tool for our service members - ensuring they have the right mental health and well-being tools to navigate a successful transition the days, months, and years post service. This is one way to work towards reversing the harrowing trend of service members being more likely to die by suicide than in the line of duty," said Nathaan Demers, VP of Clinical Programs and Strategic Partnerships at Grit Digital Health.



In 2018, Colorado convened a multidisciplinary, cross-agency group, the Colorado Governor's Challenge to Prevent Suicide Among Service Members, Veterans, and their Families (Colorado Governor's Challenge) to lead state efforts. The Colorado Governor's Challenge has leadership from across state departments, Veteran-serving organizations, the Veterans Administration, and provider agencies. Cross agency support and funding from this group helps to support the launch.

After meeting and talking directly with Veterans in various research studies, Operation Veteran Strong was designed with a shared mission to provide upstream, comprehensive support and connections to Veterans that is free, confidential, and available at all hours. The online platform

leads with videos of Veteran stories and testimonials; a key insight uncovered during discussions with Veterans in developing the online tool. Hearing a story from another Veteran about strength and resilience can oftentimes be the difference between beginning the journey to getting the right help or not.

That help looks different for every Veteran, and www.OperationVeteranStrong.org provides personalized access to thousands of evidence-based resources depending on the individual Veteran's self-assessment. The types of Veteran-specific tools and connections available are holistic, meaning they are meant to support the full person instead of focusing solely on mental and behavioral support. Included are a variety of key topics that Veterans asked for such as career, employment opportunities, education, relationships, family, transportation, housing, food, veteran benefit connections, and more. Veterans can also connect with localized resources in their community when they need them, as county level resources are continually being customized and added.

"Veterans, servicemembers and their families have been a priority focus for suicide prevention efforts in Colorado. We are pleased to have the leadership of a multi-agency collaborative group providing focus and support for these efforts," Sarah Brummett, Director of the Office of the Suicide Prevention at CDPHE, said. "The launch of this Colorado resource represents one tool for communities, families, and individuals to promote health and well-being and to connect with Veteran-specific resources in our state."

State Office of Suicide Prevention funding supported the build out of regional and statewide resources as well as additional resources in six priority counties in Colorado that are participating in the development and implementation of comprehensive suicide prevention efforts. ORH is funding an evaluation of the site as well as support to tailor portal assistance and dissemination within rural Colorado communities. Rural Veteran communities are an area of concern as they often have a higher rate of suicide.

The platform works with local communities across the state to bridge the gap that Veterans are experiencing. "On this Veteran's day, take the time to learn the story of the Veteran in your life or go out of your way to honor and get to know the Veterans and the resources that exist in your community," said VA Eastern Colorado Health Care System Director Michael Kilmer. ♦



New VA Resources Explore Military-Related Environmental Exposures

By, **Veterans Health Administration**, Employee Education System Staff

Veterans have unique health concerns, which may not exist within other populations. As a result, providers who see and treat Veterans need a clinical understanding of the challenges Veterans increasingly face from potentially toxic military and deployment-related environmental exposures. The [War Related Illness and Injury Study Center \(WRIISC\)](#), in conjunction with the newly named [U.S. Department of Veterans Affairs \(VA\) Health Outcomes Military Exposures \(HOME\)](#) office has created several new resources focused on key exposure and other clinical deployment health topics.

eLearning Series

This on-demand, eLearning training series, consisting of five modules, offers information and tools to increase knowledge of community and VA providers to support high quality care for Veterans. These WRIISC-HOME courses are accessible below.

- Module 1: Assessing Deployment-Related Environmental Exposures** – This course informs learners how to recognize the role and importance of deployment-related exposures through conducting a life time exposure assessment; identifying the steps for determining deployment-related environmental exposures; and describing approaches to communicating deployment-related exposure issues to Veterans, their caregivers and their family members. Non-VA employees click [here](#) to register. VA employees click [here](#) to register.
- Module 2: Airborne Hazards** – This course provides clinicians with the knowledge needed to identify and understand deployment-related airborne hazards concerns of Veterans. Non-VA employees click [here](#) to register. VA employees click [here](#) to register.
- Module 3: Gulf War Illness** – This course provides health care providers with the knowledge needed to identify, diagnose, manage and appropriately treat Gulf War illness in Veterans. Non-VA employees click [here](#) to register. VA employees click [here](#) to register.
- Module 4: Chronic Multi-Symptom Illness** – This course offers health care professionals an opportunity to gain insight into chronic multi-symptom illness, as well as the latest resources and management strategies to consider for care. Non-VA employees click [here](#) to register. VA employees click [here](#) to register.
- Module 5: Depleted Uranium and Toxic Embedded Fragments** – This course discusses current research on health effects of depleted uranium (DU) in potentially DU-exposed populations; information about enrolling Veterans with suspected DU or toxic embedded fragments (TEF) into VA registry programs; and guidance about the clinical approach to Veterans with TEF. Non-VA employees click [here](#) to register. VA employees click [here](#) to register.



“Veterans’ Health Matters” Podcast Series

WRIISC sponsors “Veterans’ Health Matters”, a podcast series offering clinicians, Veterans and caregivers information on post-deployment care.



Providers need to better understand the unique challenges Veterans with post-deployment and exposure health concerns face to use best practices in identifying, assessing, managing and communicating Veteran care. With so many other pressing needs, it can be difficult to find the time to get important information. This podcast series makes it easy for listeners to learn ways to improve the care of the Nation’s Veterans. In under 25 minutes, listeners will hear about and gain tools on effective patient-provider communication; various functional and integrative medicine approaches; exercise; and much more.

In each episode of “Veterans’ Health Matters”, subject-matter experts weigh in on these topics and discuss the services the WRIISC provides, because every Veteran’s health really does matter.

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New VA Resources Explore Military-Related Environmental Exposures (continued from page 10)

Click below to listen to all available episodes:

- Episode 1– [Difficult Patient/Provider Conversation](#)
- Episode 2– [Improving Patient Provider Communication](#)
- Episode 3– [Toxic Exposures and Gut Health](#)
- Episode 4– [Tackling Chronic Inflammation](#)
- Episode 5– [Gut Function and Health](#)
- Episode 6– [Rebalancing for Wellness](#)
- Episode 7– [Eliminating Unhealthy Foods](#)
- Episode 8– [Detoxifying: A Nutritional Body Cleanse](#)
- Episode 9– [Mighty Mitochondria](#)
- Episode 10– [Essential Food Nutrients](#)
- Episode 11– [Wearable Technology Trends](#)
- Episode 12– [War Related Injury & Illness Study Center](#)



Future episodes will discuss key exposure topics and VA registry programs including for Agent Orange, Airborne Hazards and Gulf War Illness.

Webinar Series

The WRIISC-HOME webinar series is dedicated to Veterans' post-deployment and exposure health concerns and unique health care needs.



These webinars reflect current best practices, science, and policies. They are categorized into clinical specialty areas, and provide introductory, intermediate, and advanced-level training. Topic areas include integrative and functional medicine, cognitive and psychosocial health, exposure, airborne hazards, chronic multi-symptom illness, and gulf war illness. Live and recorded webinar sessions can be accessed [here](#).

Contact Information

For more information on WRIISC, please click [here](#). With questions about the eLearning series, webinar series, or podcast, please contact VA program analyst Paulette Brower at Paulette.Brower@va.gov. ♦



www.ruralhealth.va.gov

VA Office of Rural Health

“The Rural Connection” is a quarterly publication of the U.S. Department of Veterans Affairs’ (VA) Office of Rural Health (ORH). As VA’s lead advocate for rural Veterans, ORH works to see that America’s Veterans thrive in rural communities. To accomplish this, ORH leverages its resources to study, innovate and spread enterprise-wide initiatives through partnerships.

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Questions? Comments?
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