U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Rural Health
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ORH PROJECT OVERVIEW

WE Care – Working to Engage Rural Caregivers

Background

Informal caregivers, such as family members, friends, and neighbors, are invaluable members of many rural Veterans' care teams. Studies show that:

I. Caregiver support improves patient health, life quality, longevity, [1] and care plan adherence.[2]

II. Supporting caregivers improves patient physical and mental health,[3] decreases caregiver stress and anxiety,[4] improves communication with the patient's care team and improves care coordination and continuity of care for patients.[5]

The Department of Veterans Affairs (VA) Veterans Health Administration (VHA) has a robust menu of evidenced-based services available to support caregivers. Yet, too often, informal caregivers remain unidentified, unengaged with care teams or unconnected to needed support services, particularly caregivers of rural Veterans.[6] Rural caregivers more frequently report 'having no choice in taking on care', more difficulty finding affordable services in their area, and providing more hours of care per week compared with their suburban and urban counterparts.[7]

Goals and Objectives

In response to these challenges, the VHA Office of Rural Health (ORH) Veterans Rural Health Resource Center-Salt Lake City developed and piloted an intervention to better engage caregivers of older, rural Veterans, including identifying at-risk Veterans who have or need caregivers, improving caregiver participation in Veterans' care teams, and connecting caregivers to resources.

Our aims included:

1. Developing preliminary intervention and evaluation design, including educational materials and evaluation methods.
2. Conducting an iterative and collaborative formative evaluation and pilot test of the preliminary intervention components.
3. Developing a final, robust intervention to implement at multiple VA locations in fiscal year (FY) 2025.

Methodology

Intervention development was informed by our previous ORH-funded portfolio project focused on the challenges rural caregivers face accessing support services, as well as their help-seeking behaviors and preferences. To ensure we developed an intervention that would work in a real-world setting, we regularly convened a Participatory Design Group (PDG) to guide intervention development and formative evaluation. The group included champions from the rural pilot implementation site, 4 caregivers of older Veterans, primary care and specialty care clinicians, Caregiver Support Program leadership, and health services researchers. We worked closely with site champions to develop and hone intervention components. Two site visits were conducted to observe implementation progress and interview pilot site staff, caregivers, and Veterans to elicit feedback about materials and processes.

Impact on Rural Veteran Health

We developed a multi-level, 3-component intervention called Working to Engage Rural Caregivers (WE Care) to address barriers to engaging with rural Veterans' caregivers and connecting them and the Veteran to needed support services.

Example of a caregiver-facing poster co-designed by the WE Care team and caregivers of rural Veterans.

The WE Care intervention includes:

a) caregiver-facing education materials,

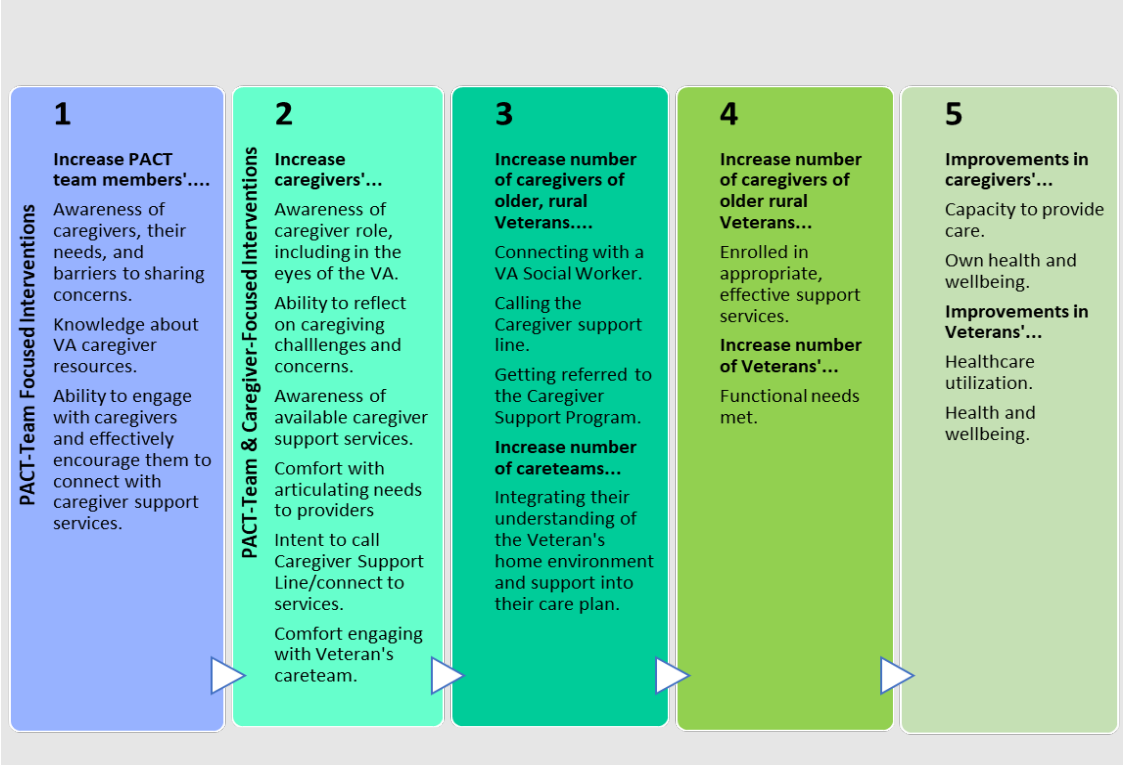
b) provider training for identifying, engaging, and connecting caregivers to VA and community supports, and

c) a case-finding process to identify and document caregivers in a newly created template in the Veteran's health record.

By improving support of Veterans' caregivers, research shows the program may:

- Improve rural Veteran physical and mental health.[3]
- Improve care coordination and continuity of care.[5]
- Extend Veterans' ability to age in place safely.[8]

The figure below demonstrates how the WE Care intervention components will increase provider awareness of caregivers, their value to the Veteran and the care team, and resources to support them, as well as caregiver self-awareness, confidence to engage with the Veteran's care team, and connection to resources such as respite care, adult daycare, and emotional support. In turn, Veterans will receive better care, engage with appropriate medical services, and have better health outcomes.



Flow chart showing how WE Care supports providers and caregivers.

In FY 2025, we will introduce WE Care to the rural Newport, Vermont outpatient clinic and will continue to hone evaluation methods and components, including a standalone Implementation Guide that will enable future sites to implement WE Care without research team involvement. Simultaneously, we are writing a grant proposal for submission in December 2025 to fund a large-scale trial to evaluate the implementation and effectiveness of the WE Care with the intent of integrating and sustaining WE Care across the VHA.

Key Takeaways

- Caregiver support improves patient health, life quality, longevity, and care plan adherence. Yet many VA providers and caregivers alike are unaware of the array of community and VA resources available to help.

Key Takeaways *(continued)*

- The WE Care intervention, built on years of evaluation with rural Veterans, caregivers, and VA providers, addresses gaps in identifying, engaging, and connecting caregivers to resources to help them take better care of themselves and provide better care for the rural Veterans they support.

- Engaging with and supporting caregivers may improve home care dynamics, reducing the burden on all parties and helping rural Veterans adhere to care plans and stay at home safely longer, improve rural Veteran engagement in appropriate services and, ultimately, the caregivers' and Veterans' health and wellbeing.

References

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