**Moderator’s Discussion Guide: Active Duty and Veteran Women**

1. **Welcome, Introductions & Ground Rules (10 minutes)**

Welcome and thank you for participating in today’s focus group discussion. My name is \_\_\_\_\_\_\_\_, and I work for Hager Sharp, an independent communications company working on behalf of the U.S. Department of Health and Human Services’ (HHS) Office on Women’s Health (OWH).Today we are going to discuss active duty and veteran women’s experiences in receiving health care from providers outside of the Veterans Health Administration (VHA) or the Military Health System (MHS). The feedback I receive from you today will help provide OWH with a better understanding of how health care providers can serve active duty and veteran women and help active duty and veteran women get the best care. We will have about 90 minutes for our discussion today.

Focus Group Process and General Rules

Before we begin, I would like to remind you that your participation in this discussion is voluntary and you may end it at any time or feel free to skip questions you feel uncomfortable answering.

Today I will be here to guide this discussion and ask you questions that are meant to generate a discussion, but there are no right or wrong answers. We are looking to get your honest opinions and I encourage you to express your opinion even if it might be different from other participants. We will be audio and video recording the session so that I have a record of the discussion to write a report, and this recording will be kept private and only be shared with my colleagues. Once the report is written, we will destroy the recording. At no time will your name or any other identifying information ever appear in any reports or presentations that result from this work.

I am not a medical doctor nor an expert on military culture or active duty and veteran women. I may not be able to answer your questions about the content being discussed today, but I can point you to some additional resources at the end of our discussion if you’d like.

My job is to keep us on the right track and moving along so that we’re done in an hour and a half. I’d like to share a few other ground rules before we get started:

* Project staff from Hager Sharp and OWH may be listening to our conversation as they are also interested in hearing insights from participants.
* All comments, positive and negative, what you know and don’t know, are important.
* It is important to hear what everyone thinks, so please speak up and please let others do the same.
* Respect each other and personal opinions; even though you may not always agree.
* Don’t wait for me to call on you, but please speak one at a time.
* Respond to each other as well as to me.
* If I ask a question that you’re not comfortable answering, feel free not to answer.
* If you need to go to the restroom or need a break, feel free to leave the room, but please come back as soon as possible because all opinions are important.

Do you have any questions before we get started?

Great! Let’s start with a quick introduction. Please tell me your first name ONLY, your active duty or veteran status, and your branch of service.

1. **Active Duty and Veteran Women’s Preferences for Health Care Setting (15 minutes)**

As I mentioned earlier, today we are going to discuss your experiences receiving health care, as active duty and veteran women, from providers outside of the Veterans Health Administration (VHA) or the Military Health System (MHS). When you signed up for this group, you all indicated that you receive some, if not all, of your health care from providers outside of the VA/MHS. I’d like to talk a little bit more about that.

1. What factors do you generally consider when choosing a health care provider either within the VA/MHS or outside of these systems?
	* PROBE: Convenience, appointment availability, insurance coverage, provider choice
	* Which of these factors is most important? Least important?
2. To what extent do you feel you have a choice when it comes to where you receive health care?
	* How do you feel your health care options differ from those of civilian women?
3. **Active Duty and Veteran Women’s Experiences Receiving Health Care in Civilian Settings (40 minutes)**

The following questions are specific to your experiences receiving health care outside of the VA/MHS.

1. How often do your health care providers ask about your active duty or veteran status?
	* PROBE: all providers, all the time; some providers; just at initial visit/in discussing medical history; ongoing screening
2. On a scale of 1-10, how important is it for your health care provider to know your active duty/veteran status?
	* What makes it important/not important?
	* In what ways, if at all, do your health care needs differ from those of civilian women?
3. Beyond taking a medical history that may include questions about active duty/veteran status, what generally prompts a discussion about your military experience?
	* How often do providers ask about your location of service, duration of service, or military occupation?
	* How often do providers ask questions about combat or sexual trauma, depression, PTSD, or other factors that may relate to your military experience?
4. For those of you who may have previously received care within the VA or MHS…
	* What are/were your reasons for seeking care at the VA or MHS?
	* To what extent do/did the services available at VA or MHS meet your health care needs?
	* To what extent do/did the providers at the VA or MHS meet your health care needs?
	* In what ways do you prefer the health care you receive in VA/MHS settings?
5. How does the health care you receive in civilian settings differ from VA/MHS settings?
	* What are the reasons you might choose to seek health care with a civilian provider (compared to a VA/MHS provider)?
	* In what ways do you prefer the health care you receive in civilian settings?
	* To what extent do civilian providers meet your health care needs?
	* What changes could be made to better meet your needs?
6. What challenges or barriers to do you experience when receiving healthcare with a civilian provider (outside of the VA/MHS)?
	* Probe for: Understanding of military culture/experience, insurance coverage, location, or eligibility of care.
	* What might help overcome some of these challenges?
7. What makes it easier for you to get health care with a civilian provider (outside of the VA/MHS)?
	* Probe for: Location, quality of services, appointment availability, or eligibility of care.
8. Beyond what we’ve already discussed, what other changes might improve the experience of active duty or veteran women like you seeking care at non-VHA/MHS facilities?
9. **Sources of Health Information / Needed Resources (15 minutes)**
10. Where do you typically get health information?
	* What people or organizations do you trust as reliable sources of information? What makes them a trusted source?
	* Which of these sources are most helpful to you? Why?
	* To what extent do these sources meet your health information needs as an active duty/veteran woman?
11. Are you a member of any military-related organizations? If so, which ones?
12. Do you regularly receive information online or from other media outlets (e.g. newspaper, TV) specifically for active duty/veteran audiences?
	* If so, which ones?
	* What made you start following/reading that information?
	* What topics do they cover that most interest you?
	* What do you like about them?
	* Have you seen any online media sources for active duty or veteran women’s health that you do not like? If so, what do you dislike about those sources?
13. What other resources or tools would be useful to support your physical and mental health?
14. **Close (5 minutes)**

Okay, this concludes our discussion for today. Is there anything else you would like to share related to your health care seeking experiences or health needs that we haven’t already discussed?

I would like to thank you for participating in this discussion. Your thoughts and opinions will be very useful in understanding the health care needs and experiences of active duty/veteran women.