

Military Women's Health Research Priorities

COMBINING KNOWLEDGE, SCIENCE, AND STRATEGY

Lori L. Trego, CNM, PhD, FAAN
COL (Ret) US Army
Associate Professor
College of Nursing
University of Colorado Anschutz Medical Campus

The works presented are a cumulation of research since 2010 which at times were performed as a part of my official duties or have been funded by the TriService Nursing Research Program, Uniformed Services University of the Health Sciences, and intramural funding from the University of Colorado AMC College of Nursing. The contents, views or opinions expressed in this presentation are those of the author and do not necessarily reflect official policy or position of Uniformed Services University of the Health Sciences, the Department of Defense (DoD), or Departments of the Army, Navy, or Air Force.

I report no conflicts of interest.

Preliminary Studies:

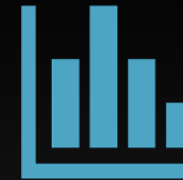
Detailed reports provided in additional resources portfolio



A Systematic Review of the
literature on Military Women's
Health, 2000-2010



Military Women's Health: A
Scoping Review and Gap
Analysis, 2000-2015



MHS Utilization
Data

A Delphi Study to Determine Military Women's Health research Priorities

TSNRP Grant Award N17-A05
Uniformed Services University of the
Health Sciences, Award number
HU0001-17-1-TS02



Purpose: To generate a Military Women's Health Research Agenda that will guide future research efforts and funding mechanisms.

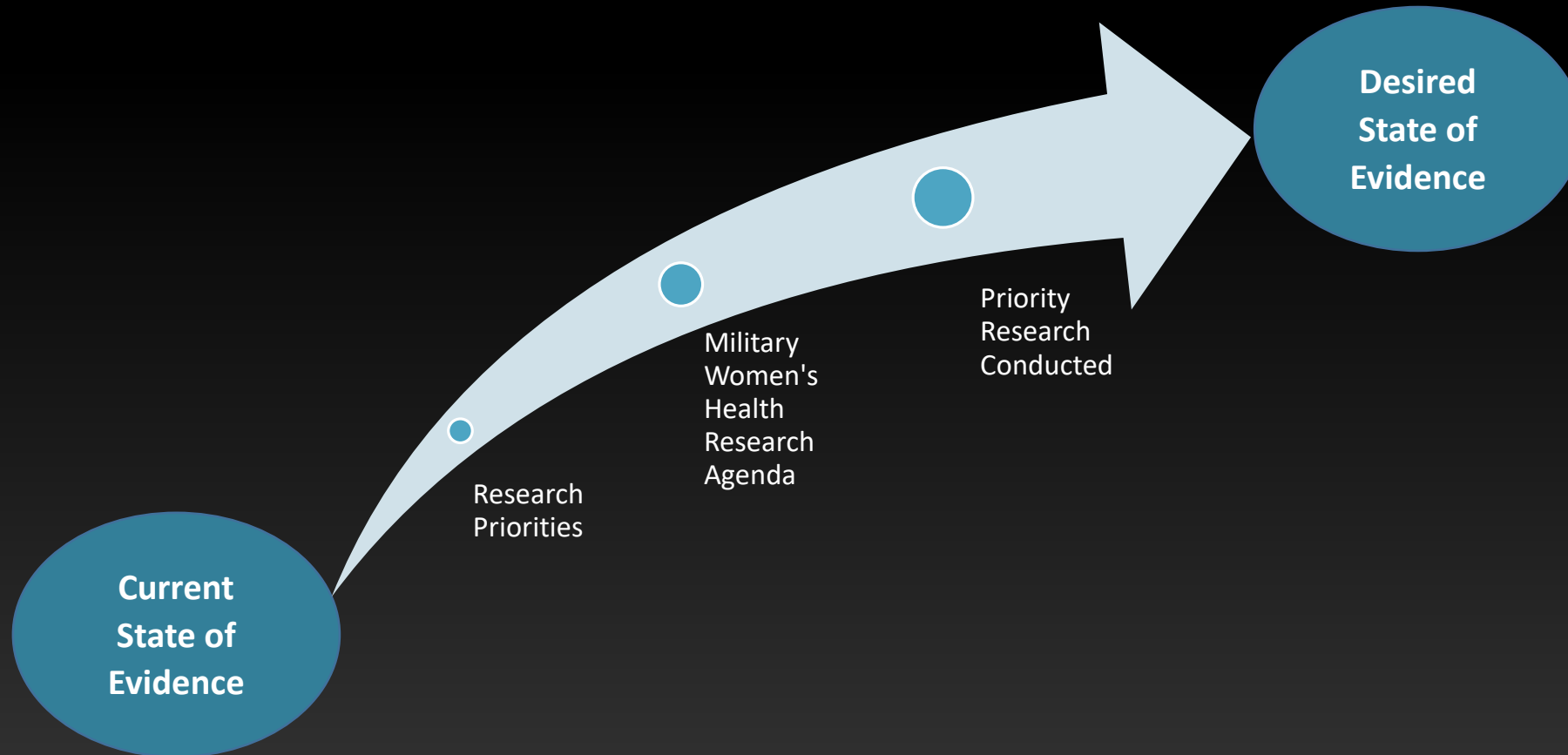


Methods: Delphi consensus process with Subject Matter Experts (SMEs) from DoD, VA, and academia

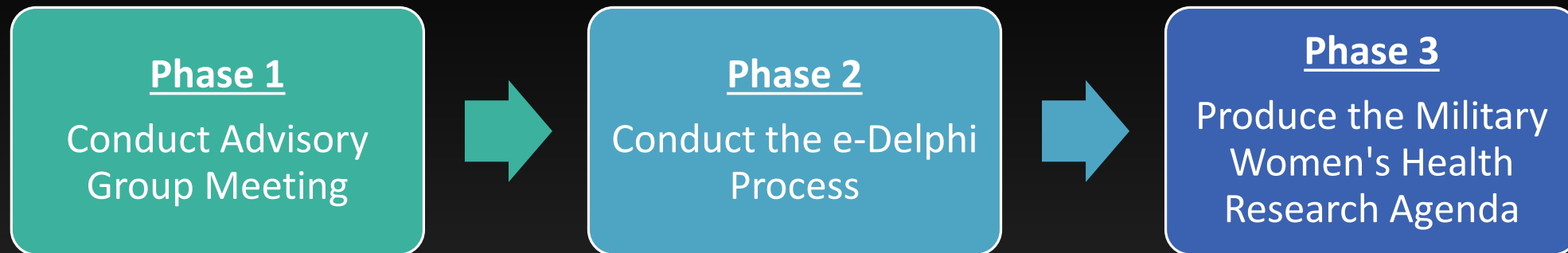


Preliminary results

Long Term Goal of the Delphi Study



The Delphi Study Process



Delphi Study Advisory Group Members - Military



**Margaret Wilmoth, Ph.D.,
M.S.S., R.N., FAAN. Major
General (RET) US Army**
Former US Army Deputy
Surgeon General for the Army
Reserve.



**Catherine Witkop, MD, MPH,
Colonel (RET) USAF**
Director, General Preventive
Medicine Residency Program,
Uniformed Services University
of the Health Sciences.



**Jacqueline D. Rychnovsky,
PhD, RN, CPNP, FAANP
Captain (RET) US Navy.**
Former Commanding Officer,
Naval Medical Research
Center, Silver Spring,
Maryland.



**Pamela Schweitzer, Pharm.D.,
BCACP. Rear Admiral (RET)
U.S. Public Health Service**
Former Assistant Surgeon
General Chief Professional
Officer (CPO), Pharmacy.



**Lieutenant Colonel Vanessa
Wong, MD, USAF, MC,
Forensic Psychiatrist.**



**CDR Edward H. Owens II, US
Navy, PA-C, MPAS, Consultant
to the U.S. Navy Surgeon
General for Physicians'
Assistants.**

Delphi Study Advisory Group Members- Civilian



Caro K. Lewitoff, CNM, PhD, FACNM, Former Program Director for Women's Health, Medical Ethics and Patient Advocacy, Clinical and Policy Programs, Office of the Secretary of Defense, Health Affairs, DOD.



Elizabeth Spencer, R.N., Deputy Director, Office of Research on Women's Health, Executive Secretary, The Advisory Committee on Research on Women's Health (ACRWH).



James P. McClung, PhD, United States Army Research Institute of Environmental Medicine (USARIEM), Natick, Massachusetts.



Becky Yano, Ph.D., M.S.P.H., Director, VA HSR&D Center for the Study of Healthcare Innovation, Implementation & Policy at the VA Greater Los Angeles Healthcare System.



Yvonne T. Maddox, Ph.D., Vice President for Research, Uniformed Services University of the Health Sciences.



Nancy Fugate Woods, PhD, RN, FAAN, Dean Emeritus and Professor, Department of Family and Child Nursing, School of Nursing, University of Washington. Member, National Academy of Medicine.

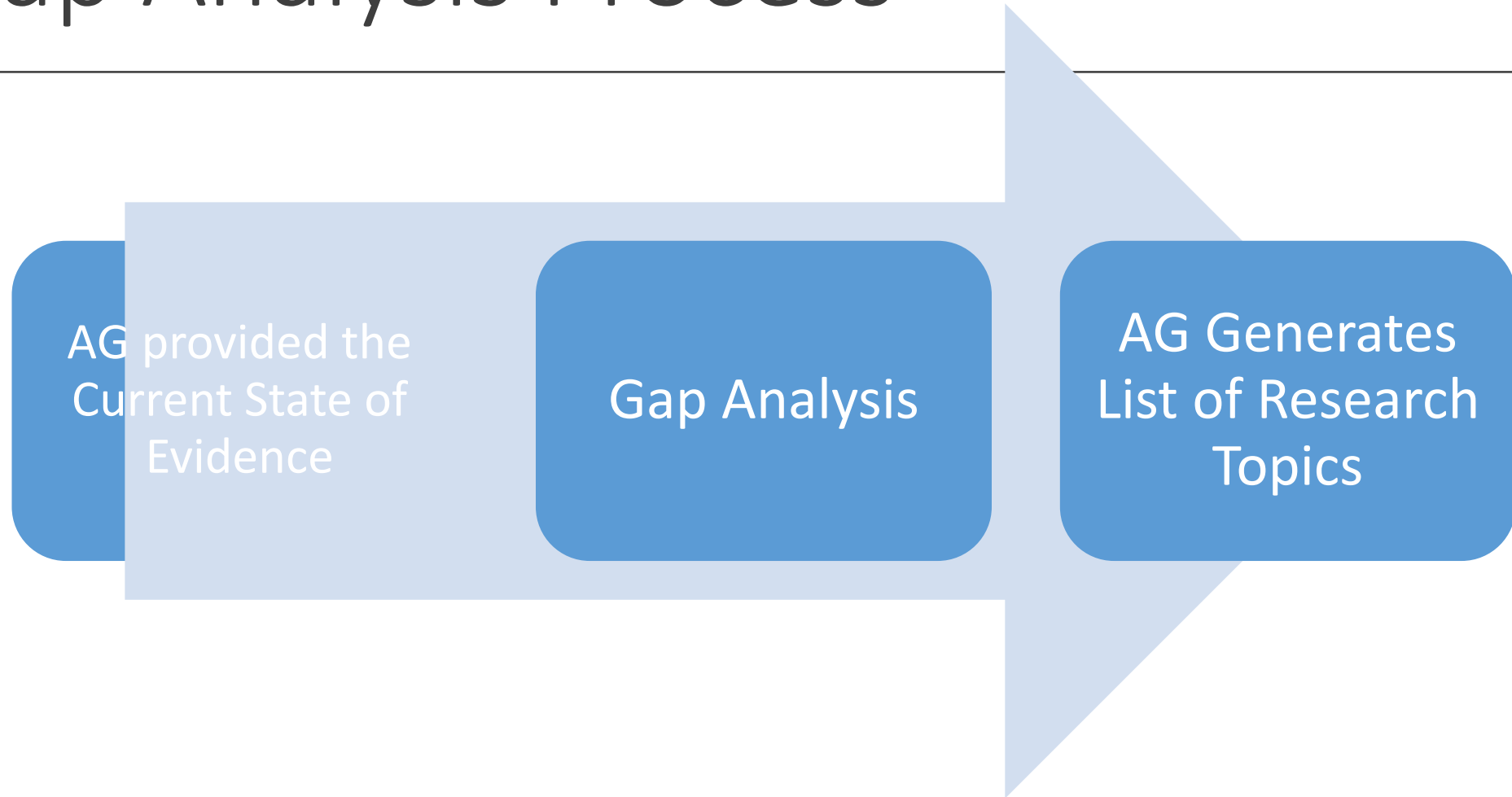
Phase 1: Advisory Group Meeting

Key Questions for Gap Analysis:

- What is the current state of evidence?
- What are the key gaps in evidence?
- What research could address the gaps?



Gap Analysis Process



Advisory Group Results:

15 topics necessary to achieve the desired state of evidence

Cancer

Chronic Illness

Sleep

Genitourinary Health

Sexually Transmitted Infections

Menstrual Cycle

Contraception

Behavioral Health

Fertility

Unplanned Pregnancy

Obstetrics

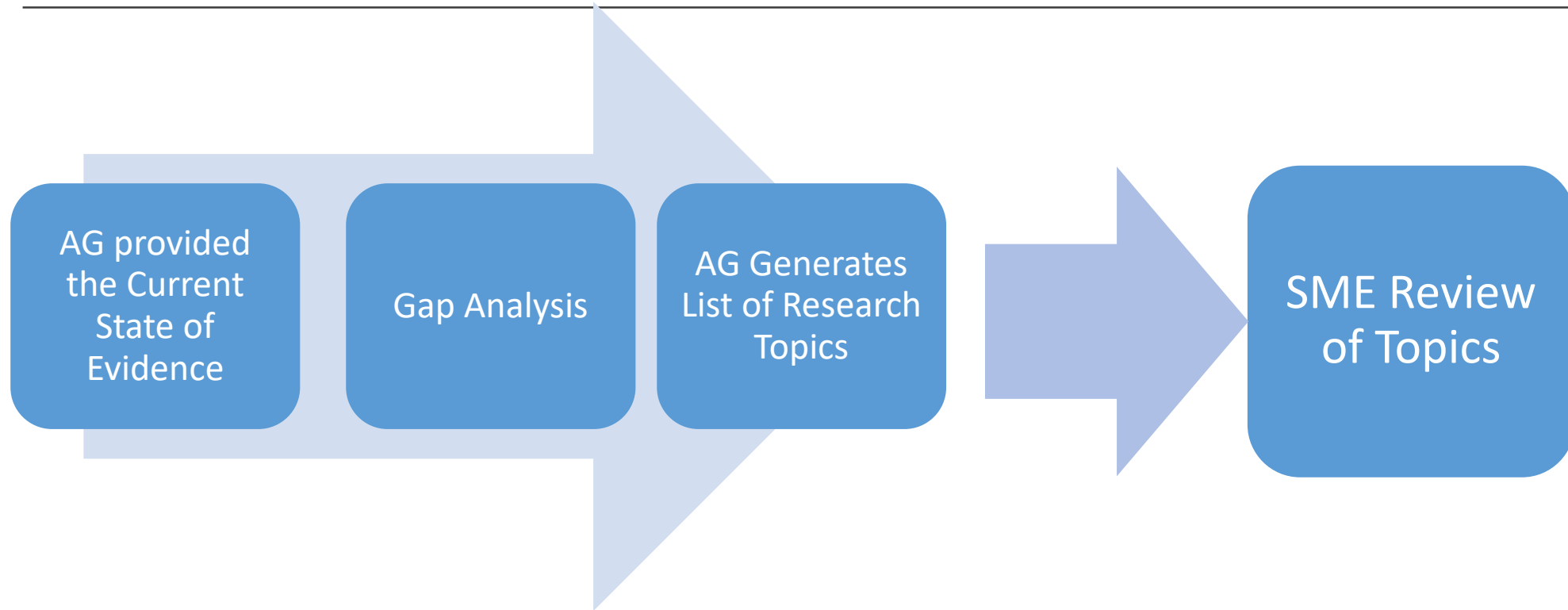
Breast Wellness

LGTBQ

Sexual Assault

Physical Assault

Research Priorities



Phase 2: SME Review of Topics

Subject Matter Experts (N=32)

- Clinical/provision of healthcare (n=13);
- Research (n=10);
- Education (n=6);
- Research funding (n=1);
- Management of care services (n=1)
- Healthcare policy (n=1)

Average of 22 years of experience in their areas of expertise

Representation from the Army, Navy, Air Force, VA, USUHS, and other academia and DoD groups

SMEs scored the 15 topics

Relevance*

- 1 Genitourinary Health
- 2 Sexual Assault
- 3 Menstrual Cycle
- 4 Contraception
- 5 Chronic Illness
- 6 Behavioral Health
- 7 Obstetrics
- 8 Physical Assault
- 9 Sleep
- 10 Fertility
- 11 Cancer
- 12 Unplanned Pregnancy
- 13 LGBTQ
- 14 STI
- 15 Breast Wellness

*(ranked by mean agreement)

Relevance: The relation of a research topic to the *Medical Readiness of female Servicemembers*. The relevance should be to the provision of healthcare services that promote medically fit female Servicemembers.

Feasibility: The likelihood that research on the topic *will result in recommendations* for clinical practice, education, or policies that will improve the readiness of women in the U.S. Armed Forces

Feasibility*

- 1 Contraception
- 2 Sexual Assault
- 3 Behavioral Health
- 4 Genitourinary Health
- 5 Menstrual Cycle
- 6 Physical Assault
- 7 Sleep
- 8 Fertility
- 9 Obstetrics
- 10 Unplanned Pregnancy
- 11 STI
- 12 Chronic Illness
- 13 Breast Wellness
- 14 Cancer
- 15 LGBTQ

*(ranked by mean agreement)

SMEs scored the 15 topics

Rank*	Topic
1	Genitourinary Health
2	Contraception
3	Sexual Assault
4	Menstrual Cycle
5	Behavioral Health
6	Physical Assault
7	Obstetrics
8	Sleep
9	Chronic Illness
10	Fertility
11	Unplanned Pregnancy
12	STI
13	Cancer
14	LGBTQ
15	Breast Wellness

*(ranked by mean agreement)

Likert scores for Relevance and Feasibility were ranked by mean agreement for a combined ranking

Topics Revised for Round 2

SMEs also provided feedback on the topics

Qualitative analysis

Study Team used to revise the topics

Round 2 to SMEs

SMEs assigned **Urgency** category to each topic:

- **Most urgent:** Research should be conducted within the next 5 years
- **Somewhat urgent:** Research should be conducted within 5-10 years
- **Not urgent:** Research should be conducted within 10-15 years

SMEs **Rank-ordered** topics in order of importance for medical readiness for military women

1 (most important) through 15 (least important)

Results of Round 2*

Topics rank-ordered as #1 priority **

Top 3:

Sexual Assault

Genitourinary Health

Behavioral Health

Runner-ups:

Menstrual Cycle

Contraception

|

*Preliminary Results, n=23

**Forced order ranking, in order of importance for medical readiness for military women

Results of Round 2*

Urgency**

	Most Urgent	Somewhat Urgent	Not Urgent	NMAE***	Total # SMEs
Sexual Assault	19	4	0	0	23
Genitourinary Health	17	4	0	2	23
Behavioral Health	13	19	0	0	23
Menstrual Cycle	4	12	3	4	23
Contraception	12	7	2	2	23

*Preliminary Results, n=23 SMEs

**Topics could only be assigned to one category or NMAE

***Not my area of expertise

Next Steps

1. Complete statistical analyses
2. Conduct mixed methods analysis of results from all three phases
3. Disseminate the Military Women's Health Research Agenda

**Thank you for your work to improve
the health of military women!**

For further information please contact Lori L.Trego, PhD, CNM, FAAN
at lori.Trego@cuanschultz.edu

4 NOV 2019