

The US Department of Veterans Affairs: Disparities in Disability Compensation Approval Rates for ethnic minority Veterans, what is the Way Forward?

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Abstract

Introduction and Background: The U.S. Department of Veteran Affairs (VA) provides social services to eligible military veterans, including education, rehabilitation, healthcare, and compensation payments. However, the VA has faced challenges in administration management claims, with significant disparities in initial claim approval rates between racial and ethnic groups. Minority veterans, including African Americans, Asian Americans/Pacific Islanders, Hispanics, Native Americans/Alaska Natives, and Native Hawaiians, may qualify for numerous benefits. Briefly describe the research problem or question, providing context for the study. **Objectives or Research Questions:** How disparities in disability compensation approval rates among ethnic minority veterans compared to white veterans within the US Department of Veterans Affairs and mitigate strategies?" The study's main objective is to address disability compensation approval rate disparities for ethnic minority veterans by identifying causes, assessing impact, recommending solutions, ensuring equity, and monitoring progress. **Methodology:** The study analyzed disability compensation approval rates for minority veterans within the Department of Veterans Affairs (VA) using a quantitative research design. Data was collected from VA administrative records and databases. A representative sample of 100 claim applications was selected. Descriptive

statistical analysis revealed significant disparities in approval rates, controlling for age and disability severity. Results: The study found that minority veterans had the lowest approval rate for disability claims, at 61%, compared to 75% for white veterans. Conclusion: The Department of Veteran Affairs (VA) has been criticized for racial disparities in disability compensation claims, with white veterans receiving the highest approval rates and African American veterans receiving the lowest. The VA's leadership's negligence and failure to address these disparities have led to systematic benefit obstruction for minority veterans. The study recommends enhancing training programs, implementing an equity action plan, and developing standardized guidelines for all veterans.

Keywords: veterans affairs, disability compensation, racial disparities, minority veterans, approval rates, VA challenges, compensation claims, systemic bias

1. Introduction

1.1 Background Information on the Department of Veterans Affairs

The U.S. Department of Veteran Affairs (VA) is the federal agency responsible for providing governmental social services to eligible military veterans and their families. The agency is responsible for offering educational opportunities, rehabilitation services, healthcare services, and compensation payments for disabilities or deaths related to military services (US Department of Veteran Affairs, 2023). Also, the VA provides home loan guarantees, pensions, and funds the burial ceremonies for the veterans. As one of the most funded military compensation agencies, the VA administers the most significant federal disability compensation programs in the U.S., disbursing over \$100 billion to over 5 million veterans for the 2022 fiscal year (GAO, 2023). For a long time, the VA has faced challenges associated with administration management claims, with the analysis of the agency's disability compensation between 2010 and 2020 showing significant disparities in compensation and approval processes. According to the U.S. Government Accountability Office (GAO), during the period, there were significant disparities in initial claim approval rates between the racial and ethnic groups, with the white veterans having the highest approval rates and the minority group veterans having the lowest approval rates (GAO, 2023). Minority veterans, including African Americans, Asian Americans/Pacific Islanders, Hispanics, Native Americans/Alaska Natives, and Native Hawaiians, may qualify for various benefits offered by the Department of Veterans Affairs. The existing data from the associated agencies has further highlighted disparities in disability compensation for minority veterans, which highlights the need for analysis of the challenges the Department of Veterans Affairs (VA) faced in managing disability compensation claims for minority veterans.

1.2 Overview of Disability Compensation Claims and the Approval Process

In the past three years, between 2019 and 2022, the Veterans Benefits Administration (VBA), under the U.S. Department of Veteran Affairs, has faced highly publicized allegations of disparities in disability compensation for minority veterans. The VA takes 159.8 days to make a decision on disability-related claims in January 2024, depending on the type of claim, the complexity of the injuries or disabilities, and the collection of necessary evidence (Logue &

Blanck, 2010). According to an article by Spotswood (2023), VA disability claims were rejected at a higher rate for minority veterans in 2020, with a lawsuit being filed in federal court by Conley Monk Jr., a minority veteran who served in Vietnam, to redress the harm caused by VA's minority discrimination. The focus of the lawsuit was to challenge the failures of the agency leadership to redress long-standing racial discrimination in VA's benefits programs and was hinged on proving that minority veterans have historically had their claims disproportionately denied and that the agency was aware of what was happening (Spotswood, 2023). The Veterans Benefits Administration provided over \$112 billion in disability benefits to 5.4 million veterans in FY 2022 but faces challenges in managing claims. Minority veterans have the lowest approval rates, requiring a comprehensive study for equitable decisions. The VA reports that veterans from historically disadvantaged racial and ethnic groups made up 24% of the total veteran population in 2017, and by 2045, they will make up over 36% of all living veterans. VA's efforts to collect and assess data on these veterans and the disparities in disability compensation provision to stamp out racial discrimination in disabled veteran compensation claim approval rates.

According to the VA's fiscal year 2020 report, veterans from historically disadvantaged racial and ethnic groups constituted slightly over 20 percent of the total veteran population in the United States in 2017, with a projection of the population rising to above 35% of all living veterans in 2045. While the VA has reinstated its commitment to equality in the disbursement of disability compensation claims, policymakers and associated stakeholders have highlighted concerns related to the experiences of veterans from historically disadvantaged racial and ethnic groups. While veterans' health disparities have been widely documented in the research literature, limited information is available about potential racial and ethnic disparities related to disability compensation. The US Comptroller General is mandated to study race and ethnicity disparities in benefits administered by the Secretary of Veterans Affairs, as per Public Law 117-66 S.1031. Against this background and the legislative requirements, the current research study aims to critically analyse the Department of Veterans Affairs' (VA) challenges in managing disability compensation claims for minority veterans, identify the underlying factors contributing to these disparities, and propose potential solutions. The study reviewed federal laws, VA policies, and claims data and interviewed VA officials and representatives from advisory groups and selected veterans service organizations to analyse historically disadvantaged veterans. The current research assessed the agency policies to determine the data the VA collects and maintains about the racial and ethnic composition of veterans, including those who may apply for disability compensation, and reviewed the relevant VA reports and plans to determine the current state of disability compensation.

2. Literature Review

2.1 Historical Context of Racial Disparities in the VA System

The historical context of racial disparities in the Veterans Administration system has been documented through academic literature, studies, and agency records. Saha et al. (2008) found racial disparities in VA healthcare services, influenced by patient-provider

communication, shared decision-making, and patient participation, affecting medication adherence and invasive procedures. The agency's disparities stem from racial disparities in patient medical knowledge, social support, resources, participation in healthcare interactions, and the skepticism and trust of racially discriminated veterans. Additionally, other factors that have contributed to the historical racial disparities include bias related to clinician judgment, the racial/cultural milieu of healthcare settings, and differences in the quality of care at facilities attended by different racial groups (Saha et al., 2008). While the agency has reinstated its commitment to equality in compensation approval, numerous studies, including Saha et al. (2008), have highlighted the existence of racial and ethnic disparities in health care in the United States, with discriminatory practices directed at minority groups, including minority veterans.

The Dismuke-Greer et al. (2021) study examined the link between military veteran socio-demographics and service-connected disability with civilian traumatic brain injury and long-term Veterans Health Administration (VHA) costs. Results showed that African American or Hispanic veterans had a higher rate of civilian assault or gun use as the mechanism of injury. After discharge from the trauma center, these veterans had more than twice the odds of being assaulted or shot. Veterans with service-connected disability $\geq 50\%$ had more than twice the odds of assault or gun use (Dismuke-Greer et al., 2021). The study suggests that assault and gun prevention efforts may be necessary within the VHA, especially among minority and service-connected disability veterans.

Since 2013, the ACMV has raised concerns about racially based disparities in Veteran Benefits Administration benefits provision, citing the VA's lack of race and ethnicity data, a significant issue considering changing veteran demographics. The VA's lack of collection of race and ethnicity data is a significant concern, especially considering the evolving demographic make-up of the veteran population. According to an article by Williams (2023), which also highlighted the Monk Court case, *Minority Veterans*, there has been a statistically significant difference in compensation claims between the racial and ethnic groups of veterans since 2013 based on the analysis of data obtained by Freedom of Information Act (FOIA) requests. Considering the long history of obfuscation by the VA and the significance of the claimed disparities, it is of great significance for social science research scholars and academicians to focus on the challenges faced by the agency in managing disability compensation claims among different racial and ethnic groups. The need for research on the topic is based on the recent precedents from which the VBA has drawn significant recommendations for improving the equality of the compensation and approval processes among veterans. Institutional and academic research provides essential lessons the agency can draw upon to enhance administration and management efficiency.

2.2 Previous Studies on Disability Compensation Approval Rates for Minority Veterans

Peterson et al. (2018) conducted a review of studies comparing racial and ethnic mortality disparities in the Vietnam Veterans Administration (VHA) to inform health equity research. The VHA's equal access health care system has reduced many racial and ethnic mortality disparities, even though there are mortality disparities that have persisted for minority

veterans in a wide range of clinical areas. reported that between 2010 and 2020, minority veterans had the lowest approval rate for disability claims, at 61%, compared to 75% for white veterans (Partin et al., 2019). Factors contributing to this disparity include disadvantaged veterans' medical records and a lack of awareness on where to get help to file claims. Peterson et al. (2018) suggest that some veterans from racial and ethnic minority groups still experience inferior health outcomes and inadequate services compared to their majority counterparts. Gross et al.'s 2021 longitudinal research revealed higher PTSD prevalence among minority veterans compared to white veterans and poor clinical outcomes for those with mental conditions. The two studies highlight the existence of disparities in disability compensation approval rates based on racial and ethnic inclinations and the urgent need to address the same.

Ward et al. (2021) employed the Cochran-Mantel-Haenszel test and linear mixed models to compare age-standardized frequencies and means across race and ethnic groups stratified by gender among U.S. veterans. The study reveals significant differences in self-rated health, VA healthcare utilization, and combat exposure among racial and ethnic groups, with minority-race veterans reporting worse health conditions and greater combat exposure. According to the research results, minority men and women reported worse self-rated health, greater VA healthcare utilization, and more combat exposure than whites. Minority veterans, both male and female, reported higher circulatory, muscular, skeletal, mental health, and infectious health conditions compared to their white counterparts. Washington et al.'s 2017 study confirmed racial and ethnic disparities in VBA patient-centered medical homes, with whites receiving more benefits from social service centers. The disparities are primarily attributed to the concentration of most racial and ethnic minority veterans using the VA within small subsets of VA facilities, which increases the chances of differential outcomes (Washington et al., 2017). The authors further note that psychosocial factors and social support characteristics associated with race or ethnicity can play a critical role in undermining access to care for racial or ethnic minority groups.

2.3 Identification of Critical Factors Contributing to Disparities

Several underlying factors have been attributed to the disparities among racial and ethnic veteran groups in the U.S. Just as reported by Washington et al. (2017), the U.S. Government Accountability Office (GAO) in their 2018 annual report reported that psychosocial factors and social support characteristics of different racial and ethnic groups play a critical role in access to social services offered by the VA. Based on the lawsuit case filed by Monk, it is further hypothesized that the existing disparities can be attributed to the negligence of VA leadership and their failure to train, supervise, monitor, and instruct agency officials to take steps to identify and correct racial disparities, which has created a systematic benefit obstruction of minority racial and ethnic veterans (Spotswood, 2023). Furthermore, according to Washington et al. (2017), the racial and ethnic disparities are a result of the concentration of most racial and ethnic minority veterans using the VA within small subsets of the agency's facilities, which increases the chances of differential outcomes. According to the study mandated by Congress by the U.S. Government Accountability Office (GAO), there is a statistically significant difference in the compensation approval claims between

minorities and white veterans, with the former reporting 61% and the latter reporting 75% approval ratings. The research study by GAO (2023) highlights racial and ethnic perceptions as the primary contributing factors to the existing disparities.

Moore et al. (2016) study aimed to identify disparities in successful return-to-work outcomes among veterans with an IPE based on race, gender, and educational attainment. A randomized cross-model validation research design was used to test logistic regression models. Results showed that white veterans had nearly 1½ times the odds of a successful return, and African American female veterans had the lowest probability. Further, a Belsher et al. (2012) study examining 776 veterans from 2005 to 2010 found that treatment expectations were modestly predictive of treatment outcomes. Minority veterans seeking increased compensation reported marginally lower treatment expectations but did not experience poorer outcomes. Ethnic Minority Veterans from the Iraq and Afghanistan Conflicts reported lower treatment expectations and slightly higher symptoms at intake.

Other academic and policy research studies have further highlighted several factors associated with the existing racial and ethnic disparities in the VA. According to a literature review by Gignac et al. (2021), the degree of veteran medical knowledge and information sources contributes to racial disparities in VA healthcare. The review highlights a difference in the degree of familiarity with the knowledge of the available social services offered by the agency among white and non-white veterans (Gignac et al., 2021). The U.S. Government Accountability Office (GAO) has identified trust and skepticism among veterans as key factors contributing to existing disparities in veterans' compensation rates from 2017 to 2021. According to the reports, minority veterans harbor less trust and more skepticism about the services offered by the VA relative to their risks. The reports further show that minority veterans are more skeptical of information provided by healthcare professionals as compared to white veterans (GAO, 2018). The other contributing factors highlighted by the existing literature include the racial and cultural milieu, patient participation, clinician judgment, and characteristics of healthcare facilities (GAO, 2018; Long et al., 2012). Other policy papers have also identified less social support and other external resources to help with both illness management and the decision-making of the veterans as contributing factors to the racial disparities in VA.

Key variables

The determinants of the study comprise the disability compensation rate for African American veterans (race, gender, health conditions), the application approval rate, and others. Relevant variables collected included demographic information (such as race, age, and gender), disability claim details (including type and severity of disabilities), and outcome of disability claim decisions (approved or denied).

3. Methodology

3.1 Data Collection Methods (e.g., analysis of VA Reports, Statistical Data)

This study employed a quantitative research design to analyze the disparities in disability compensation approval rates for minority veterans within the Department of Veterans Affairs

(VA). A cross-sectional design was used to examine a specific period and compare the outcomes of disability claims filed by minority veterans with those filed by white veterans. The data for this study was collected from secondary sources, specifically VA administrative records and databases. Relevant variables collected included demographic information (such as race, age, and gender), disability claim details (including type and severity of disabilities), and outcome of disability claim decisions (approved or denied) (Peterson, McCleery, & Waldrip, 2016). A representative sample of disability claims filed by veterans was selected from the VA administrative records. A stratified sampling technique was employed to ensure a sufficient sample size, stratifying the sample by race with a sample size of 100 claim applications reviewed.

3.2 Data Analysis Techniques (e.g., Qualitative Analysis, Statistical Analysis)

The study analyzed disability compensation approval rates for minority and white veterans using descriptive statistical analysis. The researchers found significant disparities in approval rates, controlling for age and disability severity. They divided responses by race and used a two-tailed test to categorize differences as disparities. The study used 100% stacked graphs for comparisons between priority groups and the reference group. Research analyzed data on racial disparities in compensation rates by aligning metrics with research objectives and categorizing responses to best care versus other responses (Wilkins et al., 2023). Researchers used two criteria to categorize differences as disparities: a statistically significant absolute difference with a p-value < 0.05 and a relative difference of at least 10%. Both criteria had to be satisfied for a difference to be categorized as a disparity. The presentation format for comparisons between priority groups and the reference group used 100% stacked graphs.

4. Result and Discussion

4.1 Presentation of Results

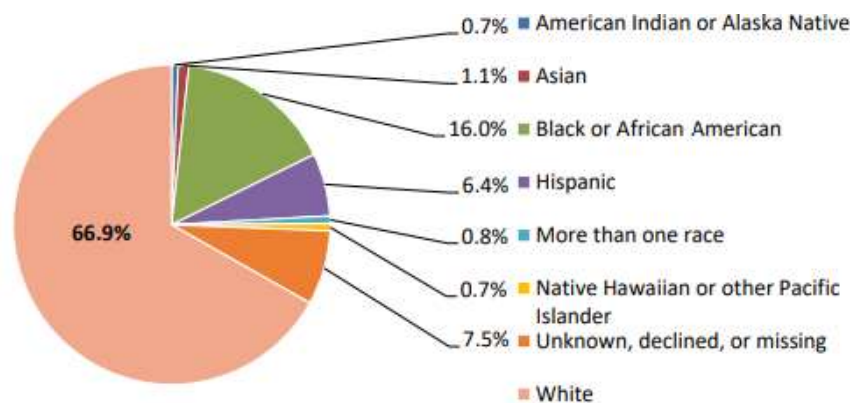


Figure 1. Racial Distribution of Veteran Patients in the U.S

A stacked bar chart for gender distribution by race is shown below.

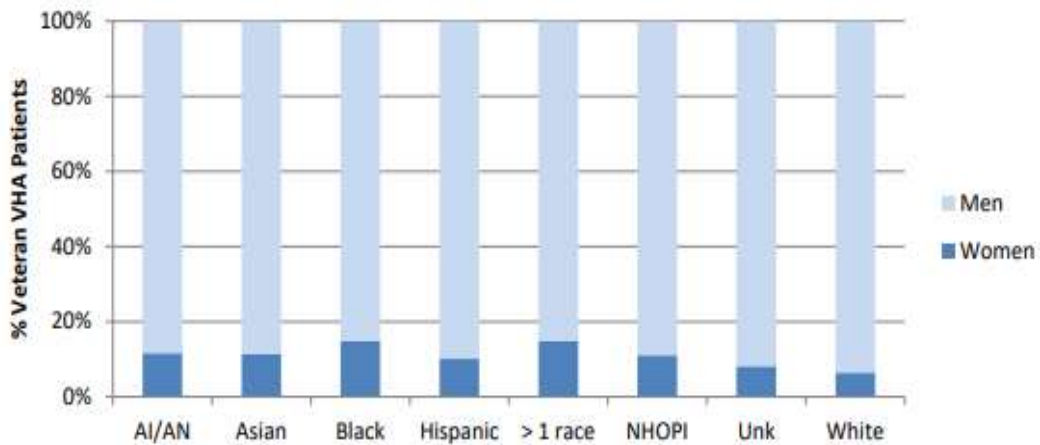


Figure 2. Distribution of Gender by Race/Ethnicity among Veteran VHA Patients

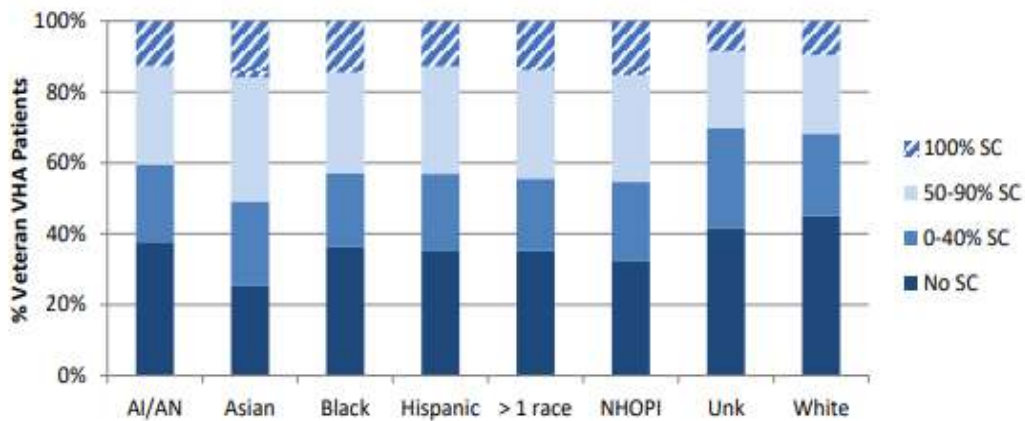


Figure 3. Distribution of Service-connected Disability Rating by Race/Ethnicity among Veteran VHA Patients

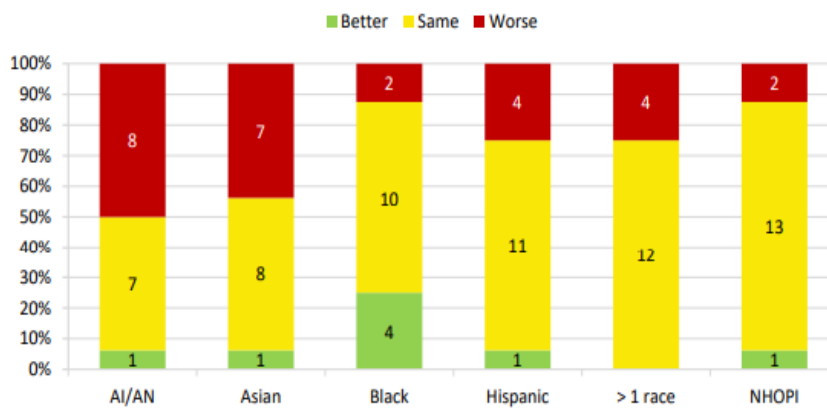


Figure 4. Person-to-person care of veterans based on race/ethnic group

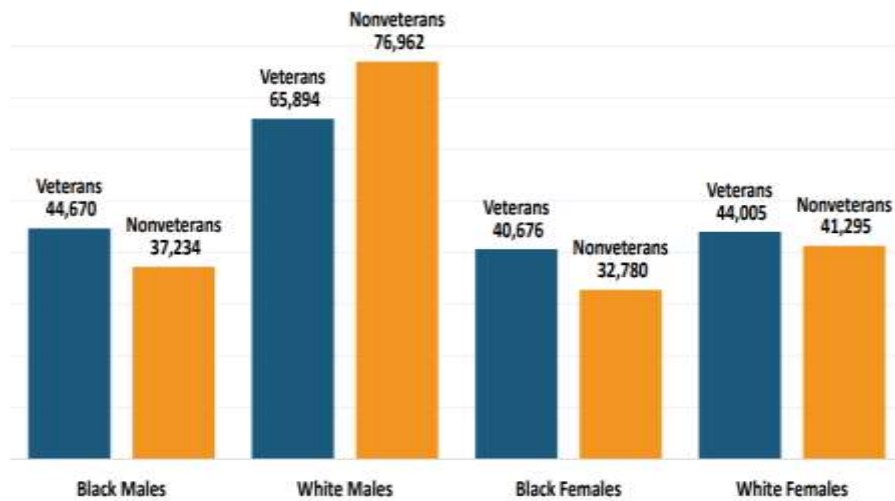


Figure 5. Compensation rates for Veterans and Non-Veterans across racial/ethnic groups

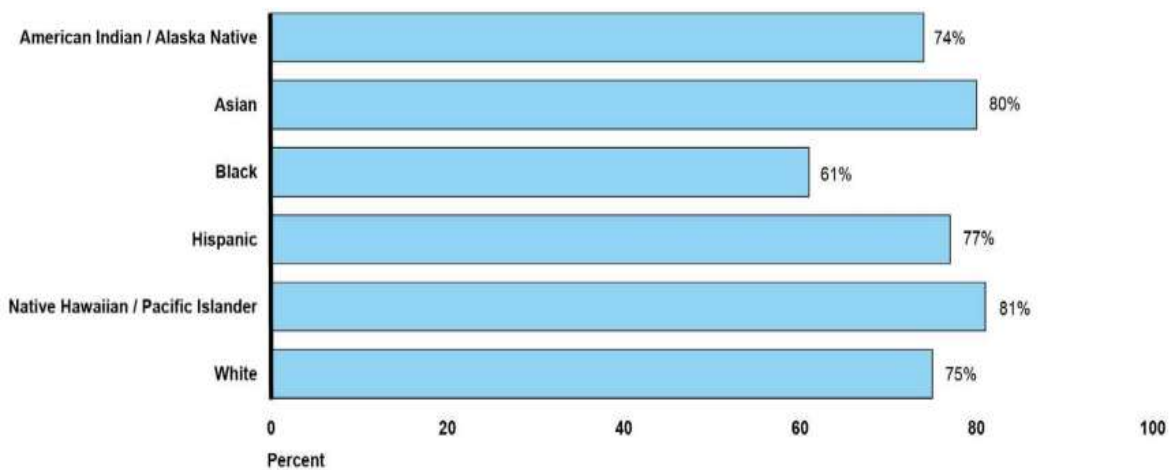


Figure 6. Compensation approval rates for Veterans' initial claims by race and ethnicity between 2010 and 2020

4.2 Discussion of Results

4.2.1 Examination of Racial/Ethnicity Within the VHA

According to the research results, the largest proportion of veterans during the analysis period were non-Hispanic whites (66.9%). Among veterans from minority racial and ethnic groups, 33.1% were minority. The proportion of disabled veterans applying for compensation was balanced, with 50% white and 50% minority groups, to evaluate the aspect of racial discrimination in claim approval rates.

4.2.2 Assessment of Cultural Biases and Systemic Racism within the VHA

The cultural biases and systemic racism within the VHA cover a wide range of aspects, including service-connected veteran disabilities and the VHA patient experience of access to care by veterans. In terms of service-related disabilities, the results show that white veterans

reported the highest rates of no service-connected disability compared to the other racial and ethnic groups. Minority veterans had the highest rates of service-connected disability compared to the white ethnic groups, as shown by the stacked bar charts above.

4.2.3 Disparities in Disability Compensation Approval Rates

In terms of patient experiences and the provision of veteran social services, the results showed that white veterans received a higher level of experience with person-centered care and approval of compensation claims as compared to veterans of other racial and ethnic groups. The results show that veterans of other racial and ethnic groups had the same experience of person-to-person care on most measures, except for AI/AN veterans and Asian veterans, who reported worse experiences.

4.2.4 Comparative Analysis of Compensation Based on Race

According to the results of the comparative analysis of the compensation by rates and veteran status, there is a statistically significant difference between the compensation offered to the minority veterans as compared to the white veterans. The results show that between 2015 and 2019, minority male veterans earned an annual average of \$44,670, while white male veterans earned an average of \$65,894. On the same note, in terms of gender, the minority female veterans had an annual average of \$40,676. In contrast, white female veterans earned an annual average of \$44,005 (O'Hanlon et al., 2017). Surprisingly, the results show that non-veterans earned a higher annual compensation than veterans of all genders by racial and ethnic groups. The results of the comparative analysis of veterans' compensation based on race are shown in the bar graph above.

4.2.5 Comparative Analysis of Approval Rates for Initial Disability Compensation Claims

Regarding the approval rates for initial claims, the results clearly show that minority veterans reported lower approval rates as compared to their white counterparts. The results show that for the fiscal years of the last decade, between 2010 and 2020, the approval rate for initial disability compensation claims for minority veterans was 61 percent, as compared to 75 percent of claims from their white counterparts. Furthermore, the results showed that the disparities in VA approval rates for initial claims between minorities and white veterans persisted each year from fiscal years 2010 through 2020. The results for the disability compensation approval rates for veterans' initial claims by race and ethnicity between 2010 and 2020 are shown above.

4.3 Recommendations

4.3.1 Enhanced Training and Education Programs for VA Employees

Based on the research findings, it is recommended that the VA enhance training and education programs for VA employees to address the existing racial disparity in providing social services and approval of disability compensation claims among veterans. It is recommended that VA employees be adequately trained in the collection and analysis of racial and ethnic data for identification, monitoring, and addressing potential disparities that affect minority veterans (Wilkin et al., 2023). On the same note, it is recommended that the agency seek

additional relevant information and data to address the existing disparities and inequities in providing its programs to veterans.

4.3.2 Allocation of adequate resources and staff to the Claim's Management Process

Apart from training and education programs, it is also recommended that the VA follow its commitment to allocate the necessary personnel resources to facilitate the implementation of an equity action plan. In this regard, there should be a complete review of personnel and resource requirements to effectively support the equity action plan, including a comprehensive assessment of the functions to be centralized and those to be disbursed among field officers (Yamoah et al., 2022). The plan can be effective in reaching out to minority groups and promoting organizational consistency in terms of consideration of racial factors when dispensing services to veterans.

4.3.3 Implementation of Standardized Guidelines for Claim Adjudication

Another recommendation for addressing racial disparities is implementing standardized guidelines for claim adjudication. According to the research, a primary contributing factor to the difference is the degree of familiarity with and knowledge of the available social services offered by the VBA among minority and white veterans. As a result, there are minority veterans who harbor less trust and more skepticism regarding the services offered by the VA relative to their risks. Based on this background, it is recommended that the agency focus on developing and implementing standardized guidelines that all veterans can easily access regardless of their racial or ethnic affiliation (Horton, 2022). On the same note, there should be equal dissemination of information associated with the agency's services concerning claim adjudication.

5. Conclusion

The Department of Veteran Affairs (VA) has long struggled with effectively and equitably adjudicating claims, leading to disparities in approval rates based on race. Existing literature and agency data have highlighted significant disparities in initial claim approval rates between racial and ethnic groups, with white veterans having the highest approval rates and African American veterans having the lowest approval rates. VA leadership's negligence in addressing racial disparities has led to systematic benefit obstruction for minority racial and ethnic veterans, as noted by Wilkins et al., 2023. Also, the other contributing factors highlighted by the research include the racial/cultural milieu, patient participation, clinician judgment, and characteristics of the healthcare facilities.

Based on the findings, it is recommended that the VA enhance training and education programs for VA employees to address the existing racial disparity in providing social services and approval of disability compensation claims among veterans. Further, the department should facilitate the implementation of an equity action plan by allocating personnel and resources (Carter et al., 2016). The research also recommends that the agency focus on developing and implementing standardized guidelines that all veterans can easily access, regardless of their racial or ethnic affiliation. The study shed light on the disparities in disability compensation approval rates for minority veterans within the VA, highlighting

potential areas where improvements can be made to ensure equitable treatment and outcomes for all veterans. The findings of the study may inform policy changes and interventions to address the challenges faced by the VA in managing disability claims for minority veterans. The study is limited to the availability and quality of the data collected from VA administrative records.

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