data from HERO CARE, a prospective survey, to describe the medical, psychological, and social unmet needs of female Veterans and compare them with those of male Veterans. We received survey responses from 8,056 community-dwelling Veterans (227 (2.8%) females and 7,829 (97.2%) males) from San Antonio, Palo Alto, Miami, Salt Lake City Veterans Affairs (VA) Medical Centers, and Veteran Integrated Service Network 8 in July 2021. We compared difference in needs between the female and male respondents using chi-square tests and difference in age in years using t-tests. Respondents were classified as having an unmet need if they responded that they needed “a little” or “a lot more help” for specific needs. Female respondents were 74.3 (SD: 14.5) years-old on average, and 7.9% Hispanic, 15.4% non-Hispanic Black, 72.7% non-Hispanic White. Male respondents were older 80.3 (SD: 9.8) years-old on average (p< 0.01), with no significant difference in race/ethnicity. Female Veterans reported unmet needs in ADLs (14.1%), IADLs (40.1%), nursing tasks (7.1%), pain management (17.6%), communicating with the healthcare team (10.6%), and social needs like legal or housing (16.3%). All unmet needs were like those of male Veterans (all p>0.05). Among female Veterans, 20.1% screened positive for anxiety (GAD-2 score >2) and 22.8% for depression (PHQ-2 score >2), compared to male Veterans: 15.2% (p< 0.01) and 21.6% (p=0.41), respectively. Routine assessment of aging female Veterans, specifically focusing on mental health and IADLs, may better address their needs.

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UNMET NEEDS OF OLDER FEMALE VETERANS AND GENDER DIFFERENCES USING THE PROSPECTIVE HERO CARE SURVEY DATA

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Aging female Veterans face unique healthcare needs which are yet to be well-described. We analyzed round one