SUPPORTING THE CAMOUFLAGED IN TRANSITION:

SERVING STUDENT VETERANS

WITH DISABILITIES

A Dissertation Presented to the Faculty
of
California State University, Stanislaus

In Partial Fulfillment
of the Requirements for the Degree
of Doctor of Education in Educational Leadership

By
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CERTIFICATION OF APPROVAL

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DEDICATION

"The two most important days in your life are the day you were born and the day you

find out why." ~ Mark Twain

I'm proud and honored to find my path has led me to a place where I can be of

service to those who have served. This study is dedicated to all student veterans,

whose life, service, and dedication are an inspiration.

ACKNOWLEDGEMENTS

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ABSTRACT

The purpose of this study was to identify the ways in which veterans with disabilities navigate the process of transition from their lives as members of the military community to participants in the community college. This study analyzed the subset of veterans with disabilities in a community college to identify the support structures and services that can help this population to navigate their academic experiences effectively. A qualitative, community-based participatory research design was used to provide a holistic account of the military to community college transition experience for student veterans with disabilities who participated in the Iraq and Afghanistan Wars. Three major themes emerged from the data. The themes include: (a) the personal journey into new roles and identities; (b) building communities and overcoming adversities; and (c) the reflective veteran. This study provides community colleges with insights that may enable them to improve their services for this camouflaged population.

CHAPTER I

INTRODUCTION

The date of September 11, 2001 (also known as "9/11") is the infamous date

of terror attacks, loss of life, and plane hijackings in New York City, Washington,

DC, and Shanksville, PA. Following September 11, 2001, more than 2.8 million

United States military personnel were deployed as part of Operation Enduring

Freedom (OEF) and Operation Iraqi Freedom (OIF). Operation Enduring Freedom

was the original U.S. military name for efforts in fighting the broad war on terrorism

(2001), now more frequently associated with combat events in Afghanistan.

Operation Iraqi Freedom was the U.S. military name for U.S. and coalition combat

efforts in Iraq (against Saddam Hussein and ensuing insurgent groups).

The OEF and OIF conflicts are the longest since the Vietnam War and are

unparalleled in regard to what has been demanded from their all-volunteer personnel.

Service members had longer and more frequent deployments with shorter recovery

times with an increased role for individuals within the National Guard and military

reserve units. There was also a greater number of women and personnel with young

children involved (Institute of Medicine, 2013).

Vacchi (2012) defines a student veteran as "any student who is a current or

former member of the active duty military, the National guard, or Reserves regardless

of deployment status, combat experience, legal veteran status, or GI Bill use" (p. 17).

Almost two million U.S. soldiers, sailors, airmen, coast guardsman and marines have

since returned home from wartime service with the anticipation of securing a better future for themselves and their families (Lighthall, 2012; O'Herrin, 2011) and intend to utilize their educational benefits, such as the Post-9/11 G.I. Bill, at higher education institutions in order complete their career objectives (McBain, Kim, Cook, & Snead, 2012). Further, it is estimated that 43% of veterans who served in the military and who decide to attend college will do so at public 2-year or community college institutions, (Radford, 2011; Wheeler, 2012). As a result, since 2008, California has witnessed the number of veterans enrolled in community colleges grow more than 70% (California Community Colleges Chancellor's Office, n.d.).

Many veterans, especially veterans with disabilities, face challenges finding jobs or pursuing a career after military service (Morin, 2011). Veterans have difficulty translating their military training and experiences into transferable skills recognized by civilian employers. This can be further complicated by difficulties maintaining their composure in the work environment due to the typical readjustment after combat exposure and, in some cases, posttraumatic stress disorder (Frain, Bishop, & Bethel, 2010; Ostovary & Dapprich, 2011; Sayer, Carlson, & Frazier, 2014; Sayer, Noorbaloochi, Frazier, Carlson, Gravely, & Murdoch, 2010). By establishing a welcoming and supportive college environment, scholars (DiRamio & Jarvis, 2011; Hamrick & Rumann, 2012; Kim & Cole, 2013; O'Herrin, 2011; Rumann & Hamrick, 2010) suggest that college leaders can have a positive effect on the transition, integration, and overall success of student veterans and, in particular, student veterans with disabilities (Church, 2008; Vance & Miller, 2009).

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This community-based participatory research study investigates the transition experiences of student veterans with disabilities who enrolled in the community college after completing their military service. A student veteran is defined in this study as a former service member of the U.S. Armed Forces who has left military service upon successful completion of service, under an honorable discharge, a medical discharge, or retirement and subsequently enrolled in college. This study seeks to understand how student veterans, and particularly student veterans with a disability, manage their transitions from the military to an academic environment. Additionally, this study seeks to identify factors that could support this transition and the successful completion of their academic goals. By understanding these factors, the community college faculty, staff, and administrators can better support this student population and their academic success. This chapter discusses existing scholarship to contextualize who veterans are and the challenges veterans with disabilities face as they exit the military and transition into becoming community college students. It addresses the significance of the problem, the purpose of the study, and identifies the research questions.

Wounded Warriors and Their Entrance into Higher Education

In recent years, changes in legislation impacted our military and veteran populations and their opportunities to enroll and achieve success in higher education. The G.I. Bill was originally signed into federal law in 1944; the original G.I. Bill provided servicemen and servicewomen: (a) the opportunity of resuming their education or technical training with financial assistance for tuition and living

expenses, (b) a federal government guarantee for certain home loans, (c) unemployment allowances, and (d) established a process for job counseling for veterans. It was officially called the Serviceman's Readjustment Act of 1944.

The 1944 G.I. Bill was developed to provide assistance to returning World War II veterans to reintegrate them back into the workforce and into society (Mettler, 2005). This bill forever changed the landscape of higher education and resulted in the fledgling community college system taking hold and staking a claim in the world of post-secondary education (AACC, 2010. In the process, it broke down the economic and social barriers allowing more than 2.2 million veterans to attend college (AACC, 2010).

In 2009, the G.I. Bill underwent changes and improvements to meet the changing educational needs of returning military and was amended to become the Post-9/11 G.I. Bill. The bill now provides 36 months of increased tuition assistance with the ability to cover the cost of tuition at private institutions, housing allowances, and the ability to transfer educational benefits to family members (Veterans Administration). In 2009, these increased educational benefits provided improved access to higher education for over 600,000 veterans at that time (Cook & Kim, 2009). The Post-9/11 G.I. Bill, similar to its World War II predecessor, created increased access and educational opportunities for veterans (Cook & Kim, 2009).

Although legislation exists to support veterans' return to school and reintegration into society, some veterans continue to struggle as a result of the side effects of their military service and experiences. Difficulty readjusting to civilian life

has been cited as a main reason for a reported average of 22 veterans committing

suicide every day in the United States (Department of Veterans Affairs, n.d.).

Advances in technology and medicine have contributed to a 90% survival rate on the

battlefield (Klocek, 2008). However, many of those survivors now live with

disabilities. Veterans who suffered service-related injuries are also more than twice as

likely to report difficulties readjusting to civilian life, and they are less likely to be in

overall good health later in life or to hold full-time jobs (Morin, 2011).

Almost 40% of combat veterans are returning home with some form of a

disability (Kato, 2010; Shea, 2010). About 30% of Post-9/11 veterans have been

determined by the Department of Defense and the Department of Veterans Affairs to

have some level of disability from service-related injuries including loss of limb,

burns, traumatic brain injury (TBI), illnesses, or psychological conditions such as

post-traumatic stress disorder (PTSD). Between 14% and 19% of those deployed have

developed symptoms of Post-Traumatic Stress Disorder (PTSD), Traumatic Brain

Injury (TBI), and/or depression (O'Herrin 2011). Nearly six out of ten veterans are at

least 30% disabled and four out of ten have lost at least half of their normal ability to

function (Morin, 2011).

Upon return or discharge, a substantial portion of today's veterans will be

enrolling in the community colleges with minor to severe service-related disabilities

(Cate, 2014). A student veteran with a disability is a veteran of who has received any

level of a disability rating from the United States Department of Veteran's Affairs. As

these 'wounded warriors' seek to utilize their educational benefits, campuses must

ask questions as to how veterans with disabilities will transition and integrate into campus life and the extent to which they may need supportive campus environments to assist in the successful completion of their educational goals and transition to civilian life.

Statement of the Problem

There are specific obstacles that community colleges face that must be taken into consideration with regard to providing accessible services to the veteran and disabled veteran populations. Veterans tend to resist announcing their veteran status and disability for the sake of receiving any preferential or specialized attention (Ackerman, DiRamio, & Garza Mitchell, 2009; Branker, 2009; Cantrell & Dean, 2007; DiRamio, Ackerman & Mitchell, 2008; Hamrick & Rumann, 2012). The military training that service members have undergone specifically indoctrinates them with an identity of strength and perseverance and an aversion to anything that would make them appear weak or unfit for duty (Ackerman, DiRamio, & Garza Mitchell, 2009; Branker, 2009; Cantrell & Dean, 2007). This phenomenon is a specific area of disconnect in the higher education environment because disability services require students to self-identify in order to qualify for any accommodations or support (Church, 2009; DiRamio, & Spires, 2009; Frain, Bishop, & Bethel, 2010).

Another complicating factor in providing assistance to this population of students is that veterans tend to exhibit a distinct distrust of decisions made by those in power with limited experience or knowledge of what it means to be in the military or to be a veteran (Branker, 2009; Cantrell & Dean, 2007; Cook & Kim, 2009).

Therefore, any decisions made on their behalf but without their consultation and any offering or changes to services that do not consider their unique situations, desires, or needs could ultimately disenfranchise veterans and undermine the purpose of supportive services and programs.

Currently, research can be found on the transition experience for student veterans into higher education (Ackerman, DiRamio, & Garza Mitchell, 2009; Burnett & Segoria, 2009; Cook & Kim, 2009; DiRamio, Ackerman & Mitchell, 2008; Griffin & Gilbert, 2015; Jones, 2013) and best practices and recommendations on how to meet the needs of student veterans (Branker, 2009; ACE, 2008; Baechtold & De Sawal, 2009; Brown & Gross, 2011; Burnett & Segoria, 2009; DiRamio & Jarvis, 2011; Ford, Northrup, & Wiley, 2009; Hamrick & Rumann, 2012; McBain, Kim, Cook, & Snead, 2012). A shortfall of most existing literature is that previous studies address student veterans as a homogeneous population without disaggregating specific groups such as veterans with disabilities.

The areas of research related to veterans with disabilities are limited to research on PTSD (DiRamio & Jarvis, 2011; Persky & Oliver, 2010; Rumann & Hamrick, 2010; Wheeler, 2012) and the acknowledgement that these students are resistant to self-identify their disabilities (Church, 2009; DiRamio, & Spires, 2009; Frain, Bishop, & Bethel, 2010). Studies have found that many veterans feel stigmatized by the PTSD label; they feel that they are perceived as "ticking time bombs," which, in turn, increases veterans' hesitancy to identify any additional support needs in the academic environment (Church, 2009; Wheeler, 2012).

The transition experiences of student veterans with disabilities at the community college has not been thoroughly investigated or well understood. Without an in-depth understanding of this subgroup of veterans, community colleges may not be prepared to assist this growing population of students who navigate a path from a structured military environment to that of a more fluid academic environment while also learning to manage a new disability. It is necessary to understand how veterans with disabilities experience their transition from their role as soldiers, sailors, marines, Coast guardsmen, or airmen to community college students. Gaining new knowledge about this population will help in the design of higher education support structures and services intended to guide veterans through their process of transition.

Purpose of the Study

The purpose of this study was to identify the ways in which veterans with disabilities navigated the process of transition from their lives as members of the military community to participants in the community college. This study analyzed the subset of veterans with disabilities in a community college to identify the support structures and services that could help this population navigate their academic experiences effectively.

The following research questions guide this study:

1. How do veterans with disabilities perceive their transition experiences from the military to the community college?

2. What are the barriers, personal or structural, that student veterans with disabilities experience in self-identifying and accessing services related to

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their disabilities?

3. What types of structures and services do veterans with disabilities identify as factors that can facilitate their transition into college?

Objectives

This study explored student veterans with disabilities' experiences and concerns as they attempted reintegration into the civilian life via higher education while also learning to manage their disability(ies). The insights gained from this research will provide valuable insight on how to serve a population of students who tend to remain camouflaged. This research adds to the body of knowledge and potentially contributes to a future blueprint for the successful transition, education, and support of student veterans with disabilities. Finally, this research aimed to acknowledge the voices of student veterans with disabilities who are community college students.

Methodologically, this study utilized a participatory research methodology (i.e., Community-Based Participatory Research) to integrate the voices of the participants in the study and learn along with them (Israel, Schulz, Parker & Becker, 1998). It was imperative that the student veterans with disabilities were included in the research process as the veteran transition experience is unique and the student veteran population, as whole, has a tendency to operate independently or with the company of those who have shared similar experiences (Ackerman, DiRamio, and Garza, 2009). Further, veterans distrust decisions made on their behalf from those in

a position of authority with limited knowledge or experience of what it is to be a military service member (Branker, 2009; Cantrell & Dean, 2007; Cook & Kim, 2009). Therefore, anyone outside of the population would consequently not possess the credibility or trustworthiness to implement program changes that address their needs.

The community college exemplifies the American ideal of opportunity and serves as a conduit for those who desire to build a better future for themselves and their families. A large number of veterans are returning home with disabilities, and intend to utilize their educational benefits in hoped of this better future. Aligned with their open access philosophy, it is the responsibility of community colleges to take steps that ensure that student veterans with disabilities are appropriately served. America and American higher education has benefited from the freedoms and rights for which these servicemen and women have sacrificed. It is imperative that both the country and its system of higher education do what is possible to assist student veterans with disabilities in their successful transition from the military into college and on to the successful attainment of their education and employment goals.

CHAPTER II

LITERATURE REVIEW

The literature review for this study focuses on the following areas for veterans and veterans with disabilities: (a) understanding veterans and the military experience; (b) services for student veterans and student veterans with disabilities; and (c) student-veteran transitions, in general. The discussion of these themes allows for a general understanding of the complexity of the student veteran and student veteran with disabilities experience while highlighting the strength and resilience of these groups of college students.

An understanding of the veterans' journey into, through, and out of the military is presented in order to provide an understanding of military culture and the experiences that shape veterans and veterans with disabilities. This discussion is followed by a description and review of federal legislation and programs related to veterans. Current issues and challenges that veterans and veterans with disabilities face as they leave active duty and transition to the civilian world are also considered. A review of the history and presence of veterans in higher education provides background knowledge of the veteran experience in higher education, followed by a summary of the shortfalls and successes currently in practice when serving student veterans in higher education. Finally, the chapter concludes with a summary of the available literature related to transition experiences of student veterans in general. The discussion presented here shows that there is minimal scholarly research

available on student veterans with disabilities and their transition to the college environment.

Understanding the Military Culture and Journey of the Veteran

The decision to enlist in the military varies for each individual, but the December 2010 Department of Defense Youth Poll sheds some light on the reasons many decide to become a military service member. The typical enlistment requirements are that an individual must be 18 years old and have a high school diploma (although exceptions exist). For these reasons, the majority of individuals who choose to enlist in the military are between the ages of 18 and 21 years old.

The reasons behind their enlistment can vary, but the majority of reasons tend to be any combination of (1) gaining educational benefits to pursue post-secondary education, (2) a family member who served in the military, (3) patriotism and a love of country, (4) escaping a negative home environment or situation, (4) difficulties in school, (5) lack of direction following high school, and (6) a lack of job opportunities (Department of Defense, n.d.).

Upon entering the military, the first experience is basic training. The process of basic training is one of depersonalization and de-individualization in which the military must strip the individual of all previous self-definition (Cantrell & Dean, 2007; Hoge, 2010). The basic training process is also intended to vest each participant with a clear notion of what it means to be a service member (Herbert 1998). The individual identity is torn down and rebuilt as a high functioning member of the armed services. Basic training forces service members into a strictly adhered identity

and role that, typically, is only highly valued within the constructs of the military culture (Baechtold & De Sawal, 2009).

Military service members are trained for combat and to make split-second, lethal decisions in what can be highly ambiguous environments; this training keeps the service member alert, awake, and alive (Branker, 2009). These individuals are trained to withstand the trauma of modern day hostilities, and basic training is used to develop resilience and a sense of common purpose and teamwork in successful completion of the mission. Military service members subscribe to a moral code of ethical self-discipline to decipher enemies from innocent civilians while carrying the legacy of a warrior, which incorporates the distinct values of bravery, honor, and sacrifice (Hoge, 2010). The military, as a whole, is a culture that upholds strength, unity, and perseverance through all obstacles.

According to Hoge (2010), the veteran who also has combat experience faces a further transitional change, which is described as being a warrior. These individuals react differently after deployment. Their strength of character can be sharp and direct and may, at times, make others feel uncomfortable. It is not uncommon for service members to feel as if they have aged one or two decades during a single deployment. These warriors can be more independent, which may also make it difficult to tolerate authority at work or at school.

A standard active duty enlistment is 4 years, although some may choose to re-enlist and serve up to 20 years before retiring. Because the specific training and skills obtained in the military are difficult to match and transition into employment

opportunities in the civilian sector (Wasley, 2008), retraining and continuing education is seen as an integral and essential step for successful reintegration to civilian life (Wasley, 2008).

Wounded Warriors as Veterans

It has been estimated that 90% of injuries sustained in Operation Iraqi Freedom (OIF) or Operation Enduring Freedom (OEF) will be survived (Klocek, 2008) due to major advances in technology and medicine. This is a significant increase in comparison with a 70% survival rate during the Vietnam War, and fewer still in both the Korean War and World War II (Frain, Bishop, & Bethel, 2010). Of the 2.2 million wounded warriors in the United States, Pew Research Center (Morin, 2011) reports that many have physical and emotional consequences of their wounds that can endure long after they leave the military.

According to the same Pew Research Study (Morin, 2011), among all disabled veterans, about three in ten (28%) are slightly impaired, having lost less than 10% of their physical functioning. Nearly six in ten disabled veterans are at least 30% disabled, meaning that their service-related injury or condition has permanently reduced their overall functionality by 30% or more. Approximately, four in ten have lost at least half of their normal ability to function and about one in eight (13%) are 100% disabled (Morin, 2011).

It is important to mention that not all of the wounds suffered by members of the armed forces are physical. Seriously wounded veterans are almost three times as likely to suffer from post-traumatic stress (47% vs. 16%). Similarly, four in ten

injured veterans (40%) report they have flashbacks, distressing memories, or recurring nightmares about an emotionally traumatic experience they had in the military. Of those who were not injured while serving, another 15% report they are similarly troubled (Morin, 2011). Of those combat-related injuries, cognitive injuries, most predominantly traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD), are the most prevalent for today's service members (Kato, 2010; Shea, 2010; American Council on Education [ACE], 2010). An estimated 40 percent of those who served in Iraq and Afghanistan report a cognitive injury (Kato, 2010; Shea, 2010). In January 2010, a statement to the House Committee on Veterans Affairs (VA) by the Executive Director of Veterans for Common Sense cited a VA report indicating that OIE/OEF veterans have filed 442,000 VA disability claims with 134,000 of them being for Post-Traumatic Stress Disorder (PTSD).

According to ACE (2010), traumatic brain injury (TBI) is defined as a blow or jolt to the head or a penetrating head injury that disrupts the functioning of the brain. A common cause of TBI is the ignition of an improvised explosive device (IED) that emits shrapnel, forcing the head of an individual suddenly against another object such as the roof of a jeep, or simply emits a barometric wave of energy. The severity of a TBI injury can range from mild (a brief change in consciousness), to severe (an extended period of unconsciousness or amnesia after the injury). TBI can result in short or long problems, although most are eventually able to function independently. The most rapid recovery occurs within the first six months after the injury, and in less severe cases, the individual will be back to normal within three months. The problem

that is often reported from veterans is not that they received a TBI injury; it is that

they returned to duty before completely recovering and acquired subsequent TBI

injuries as well.

According to ACE (2010), post-traumatic stress disorder (PTSD) is a

psychological health injury that can develop in response to exposure to a traumatic

event (ACE, 2010). A traumatic event could include military combat, violent personal

assaults (e.g., rape, mugging, robbery), terrorist attacks, natural or man-made

disasters, or serious accidents. The trauma can be directly or indirectly experienced or

witnessed in another person and involves actual or threatened death, serious injury, or

threat to one's personal integrity. The individual's response to the event is one of

intense fear or helplessness, and manifests itself with substantial hormonal and

chemical changes to the brain. Some individuals may experience flashback episodes,

intrusive recollections of the events, and nightmares (ACE, 2010). A stress reaction

may be provoked when individuals are exposed to events or situations that remind

them in the slightest way of the event; therefore, avoidance of those triggers is a

significant feature of PTSD. Symptoms usually emerge within a few months of the

event; although symptoms can appear months or even years later. Service dogs have

been found to be valuable in helping alleviate many of the worst effects of PTSD in

veterans (ACE, 2010).

Both TBI and PTSD are associated with depression and suicidal ideation

(Kato, 2010). Factors that can trigger or worsen symptoms include academic

stressors, health concerns and interpersonal issues such as dissolution of personal and

marital relationships, sleep deprivation, alcohol and drug abuse, notice of redeployment, separation of battlefield and unit colleagues, and deaths of such colleagues (Kato, 2010).

Federal Legislation and Programs for Veterans

The allocation of benefits and programs to veterans is a mixed history of support and opposition to the needs of this group. On the one hand, the United States citizenry has a long history viewing our military veterans as being owed a debt of gratitude by a grateful nation. On the other hand, the government itself has sometimes met this responsibility with resistance. This can be seen dating as far back as 1636, when the Pilgrims of Plymouth Colony were at war with the Pequot Indians. The Pilgrims passed a law that stated that disabled soldiers would be supported by the colony (United States Department of Veterans Affairs, 2016). Originally, the founding fathers felt that providing veterans with any sort of provisional benefits was damaging to the moral fiber of the country (Resch, 1988). Jefferson later changed his stance during in his second presidential term due to mounting pressure from a new generation's conviction to memorialize and reward veterans with pensions resulting in the 1818 Revolutionary War Pension Act (Resch, 1988).

Documents from The National Archives (Potter & Schamel, 1997) reveal that veterans were also the first to receive recompense in the form of land grants with The Homestead Act of 1862, which was signed into law by President Abraham Lincoln. By the end of the Civil War, not only were Union soldiers' privy to land grants, federal employment, and pensions, but disabled veterans were additionally privileged

to receive medical care (Boulton, 2005). With these strokes of the pen, the social

status of veterans was transformed. According to the United States Veterans Affairs,

the first consolidation of federal veterans programs took place on August 9, 1921,

when Congress combined all World War I veterans programs to create the Veterans

Bureau. But by 1924, during the Coolidge presidency, the perspective of what was

expected and owed to a war veteran had undergone significant changes (Boulton,

2005) and veterans experienced promises of benefits that were not upheld.

According to the U.S Department of Veterans Affairs, the second

consolidation of federal veterans programs took place July 21, 1930, when President

Herbert Hoover signed Executive Order 5398 and elevated the Veterans Bureau to a

federal administration—creating the Veterans Administration (VA) to consolidate and

coordinate Government activities affecting war veterans. It was at that time the

National Homes and Pension Bureau also joined the VA.

In 1944, with the G.I. Bill of Rights, Franklin Delano Roosevelt (FDR) took

action as a means to avoid the return of 16 million unhappy and underappreciated

men and women from military service in WWII (Mettler, 2005) The G.I. Bill

provided veterans with a stipend of $500 a year for tuition, books, and fees, as well as

a $50 to $75 per month allowance based on the number of dependents each veteran

had. At the time, this support was enough to enable veterans to attend the country's

most prestigious universities—Harvard tuition was $450 per year (Camire, 2008).

This resulted in what the American Association of Community Colleges (AACC)

(n.d.) described as one of the turning points in the advancement of public community

colleges as the opportunities of the G.I. Bill broke down economic and social barriers, allowing more than 2.2 million of veterans to attend college, including more than 60,000 of whom were women and approximately 70,000 of whom were African American (AACC, 2009, p 9).

Vietnam veterans did not fare as well as those from WWII when they came home to an ungrateful nation (Horan, 1992). Vietnam veterans received about 50% less in relative benefits than WWII veterans, forcing many to work while they attended college (Horan 1992). In Boulton's (2005) view, the reasons that the G.I. Bill revisions were lacking was due to (1) the overall negativity of the Vietnam War and (2) a lack of scholarly research.

Unfortunately, over time the WWII G.I. Bill became significantly outdated and did not keep pace with the rising costs of college tuition (Diament, 2010; Camire, 2008). This resulted in the introduction of the Post-9/11 Veterans Educational Assistance Act, by U.S. Senator and former Secretary of the Navy James Webb, which was subsequently signed into law by President Bush on June 30, 2008. The Post-9/11 Veterans Educational Assistance Act was signed into law in 2008 and became effective on August 1, 2009, increasing higher education benefits to individuals who served on active duty in the U.S. Armed Forces after September 10, 2001 (Steele, Salcedo, & Coley, 2010). Effective August 1, 2001, individuals who have received an honorable discharge from the armed forces and have at least 90 days of aggregate service, or were discharged with a service-connected disability after 30 days since September 11, 2001 are entitled to financial support for education and

housing. Tuition payment is based upon the highest in state tuition (United States, 2009).

The purpose of the Post-9/11 G.I. Bill was to afford the same opportunity for an educational future as those who served during World War II. The bill provided an opportunity for veterans to choose a more expensive private education, as the government would match the monetary support that a private school was willing to invest (Camire, 2008). The new law gave veterans with active duty service on or after September 11, 2001, enhanced educational benefits that cover more educational expenses, provide a living allowance, include money for books, and can be transferred to spouses or children (U.S. Department of Veterans Affairs, 2016). Educational benefits for veterans saw an increase from $221, to $1,321 per month (Alvarez, 2008), eliminating many educational cost issues for veterans. This, in turn, provided access to higher education for over 600,000 veterans at that time (Cook & Kim, 2009).

An increase of physical and mental health disorders witnessed in the veteran community also inspired an amendment to the Americans with Disabilities Amendment Act (ADAAA) in 2008, which included changes to recognize any limiting functions in the area of concentration and thinking. For this reason, it is expected that improved access under the ADAAA will see large numbers of veterans with disabilities utilizing their educational benefits and pursuing a college education (Johnson, Graceffo, Hayes, & Locke, 2014, p. 260).

There are also specific educational benefits afforded to veterans with service-related disabilities through the VA's Vocational Rehabilitation and Employment (VR&E) program. According to the VA, the VR&E program assists veterans with service-connected disabilities and an employment barrier to prepare for, obtain, and maintain suitable employment, which can also be in the form of educational benefits. VR&E also provides benefits and services to eligible family members. VR&E administers the varying benefits characterized under Chapter 31, Chapter 36, and Chapter 18 benefits under Title 38 of the United States Code (U.S.C.) of federal regulations, VR&E also provides counseling to dependents eligible for Chapter 35. Unfortunately, this program has a reputation of excessively long waiting periods to establish services riddled with bureaucracy and delays in receiving benefits at all (U.S Department of Veterans Affairs, 2016).

Reintegration to Civilian Life

Cantrell and Dean (2007) argue that though there has been a great deal of effort and time spent training citizens to become warriors, there are little resources being spent on re-training warriors into becoming civilians, and there is a great need for more veteran reintegration programs and contacts to assist when these service-members return to civilian life.

Social Interaction

Veterans experience difficulty rebuilding relationships with friends, family, and significant others who may struggle to entirely understand the complicated and arduous nature of combat service (Runmann & Hamrick, 2010; Zinger & Cohen,

2010). Family members and significant others have trouble understanding service members' experiences, which often leads to feelings of isolation and frustration for veterans (DiRamio et al., 2008).

According to the study done by Cantrell and Dean (2007), who analyzed the life and psychological implications of combat on active soldiers, veterans tend to quickly develop the skills of burying the pain in order to carry on, which is in some cases is necessary for their survival. When in dangerous or life threatening situations, these walls which service members develop are natural defense systems that aid in survival and typically work well. The only problem is that when the danger is no longer present, those walls remain, which can make life very confusing.

Relationship with the Government

While veterans may have to access Veterans Affairs (VA) benefits, these are riddled with complicated and confusing procedures and numerous delays in receiving benefits (DiRamio, Ackerman, & Mitchell, 2008). This frustrating and confusing federal government bureaucracy has been identified as a risk factor for veterans (Wheeler, 2012). With approximately six million veterans receiving services, it is obvious that veterans have to wait for services, but it is common for veterans to wait upwards of six months for an initial appointment to even begin the process of initiating their benefits (Mulhall & Williamson, 2010; Randall, 2012). This also involves completing dozens of pages of documentation, which can potentially delay receiving health care, disability and or education benefits if not completed adequately (Wheeler, 2012).

Finance and Employment

Veterans can also have difficulties in adjusting financially to the changes in a steady military paycheck, being solely responsible for all of their own living expenses for themselves and their families, and finding a job with equivalent pay (Fairchild, 2011). This financial adjustment can place additional strain and stress on the service member and their families. In fact, this is a major incentive for service members to immediately pursue their college education and utilize their educational benefits that can ease this transition. Additionally, the long wait for health care, disability, or education benefits to activate can contribute to further stress and strain.

The Pew Research Center indicates that veterans who suffered major service-related injuries are more than twice as likely to experience difficulties readjusting to civilian life than those without, and they are less likely in later life to be in overall good health or to hold full-time jobs (Morin, 2011). Nearly three in ten disabled veterans (28%) report that their disability has kept them from getting or keeping a job, and over four in ten (46%) disabled veterans who are not working feel their impairment is keeping them from getting a job. Almost half (49%) of seriously injured veterans are not employed (Morin, 2011).

Educational Opportunities

Exiting the military and entering higher education is a significant life transition as veterans move from a highly structured military environment to that of higher education, which has been noted by veterans to lack the highly-structured environment and clear chain of command they are accustomed to in the military

(Griffin & Gilbert, 2015; DiRamio, Ackerman & Mitchell, 2008; DiRamio & Spires, 2009; Runmann & Hamrick, 2010). Veterans typically find themselves trying to blend in with traditional-aged college students (DiRamio, Ackerman & Mitchell, 2008; Griffin & Gilbert, 2015) while simultaneously renegotiating their identities in light of their veteran status (Griffin & Gilbert, 2015; Runmann & Hamrick, 2010). All of these transitions are also occurring as some student veterans are coping with service-related disabilities (DiRamio & Spires, 2009; Griffin & Gilbert, 2015).

Once in college, veterans may find themselves in a higher education environment with the unfamiliar characteristics of structuring their own schedules, not having a commanding officer to answer to, and being thrust into an environment that now necessitates that they question and challenge authority (Ackerman, DiRamio, & Garza Mitchell, 2009). Wheeler (2012) identified risk factors that make student veterans' transition and potential success in higher education challenging. The first factor is related to veterans with disabilities not utilizing services on campus.

The second factor is that a transition into civilian life is further complicated by a shift from a military culture into that of higher education (Wheeler, 2012). Military personnel have been trained to follow strict orders, adhere to an explicit chain of command where it is customary to experience swift reprimands for mistakes, and demand nothing less than perfection (Coll et al., 2011). This is a dramatic contrast of cultures compared to what can be found in higher education and this juxtaposition can be unsettling to veterans attempting to navigate this new terrain (Coll, et al., 2011; Zinger and Cohen, 2010).

Finally, student veterans have reported difficulties relating to their peers who demonstrate extreme immaturity and disrespect in the classroom (DiRamio, Ackerman and Mitchell, 2008). Many veterans have also expressed problems with instructors either wanting to use the veteran as an example in class or challenging veterans on political or philosophical opinions of war and the military. Both of these contradict the student veterans desire to blend in amongst their peers (DiRamio, Ackerman and Mitchell, 2008).

Considering these factors, many student veterans list the experience of starting college as the most difficult transition out of the military (Ackerman, DiRamio, and Garza Mitchell, 2009; Griffin & Gilbert, 2015), yet only 22% of schools provide veteran-specific transition support (Cook and Kim, 2009; Griffin & Gilbert, 2015). While a higher education institution cannot entirely meet a reintegration need, it is important to remember this lack of veteran-specific support when working with a student veteran population.

History and Presence of Veterans in Higher Education

Following World War II, the G.I. Bill and its increased educational benefits, brought veterans in droves to the college campuses, forever changing the higher education landscape (Cohen, 1998). At that time, approximately one-third of the veterans who were eligible for benefits were entering colleges; therefore, attention was focused on accommodating these increased enrollments. Higher education institutions were forced to address the change in student demographics, which brought differing needs and new demands for student services (McClellan, Stinger &

Barr, 2009). It was not until the Vietnam War that campuses experienced another influx of veterans coming to campus (Cohen, 1998).

The Post-9/11 G.I. Bill of 2008, similar to its World War II predecessor, increased access and educational opportunities for veterans by providing 36 months of tuition and financial assistance in the form of their educational benefits (Steele, Salcedo & Coley, 2010). Many of these veterans have again chosen to enroll in the community colleges.

California, in particular, has an estimated 1.8 million veterans and has seen the number of veterans enrolled in community colleges grow more than 70% since 2008. In 2012-2013, more than 44,000 veterans utilized education benefits at a California community college (California Community Colleges Chancellor's Office, n.d.). California has experienced an increase in veteran enrollments due to many factors (Ackerman, DiRamio, & Garza Mitchell, 2009): (1) there are a large number of military institutions in California where a great deal of service members end their service and decide to stay; (2) veterans are given a Basic Housing Allowance that is calculated by zip code based on the cost of living in an area, because California has a higher cost of living, this amount is higher than other states; and (3) some veterans prefer not to return to their original location. In addition, there are an estimated 8,000 to 10,000 active duty personnel enrolled annually at community colleges in California not including dependents (California Community Colleges Chancellor's Office, n.d.)

While the increased number of veterans in higher education is a positive improvement in access, it is argued that student veterans face numerous challenges

that place them "at-risk" of not completing their degrees (Griffin & Gilbert, 2015).

The Veterans Administration reports that veterans are using an average of 17 out of allotted 36months of their Post-9/11 educational benefits and financial assistance, and that only 6% had used the entire 36 months (Field, 2008). In this context, there is limited information about the particular struggles and barriers that veterans with disabilities face to complete their educational goals.

Minorities and women are disproportionately represented among disabled veterans, according to the Current Population Survey conducted by the United States Census. Among those who are veterans, about 13% of whites have some degree of disability, compared with 19% of African American veterans and 18% of Hispanics. Overall, about one in eight male (13%) and one in six (16%) female veterans are disabled (Morin, 2011).

In 2014, the Student Veterans of America, the National Student Clearinghouse, and the U.S. Department of Veterans Affairs conducted a study to determine how successful student veterans are at completing their postsecondary goals (Cate, 2014). The preliminary results showed that the current graduation rate for veterans out of the OEF/OIF conflicts was 51.7% from all higher education institutions across the nation (Cate, 2014). These numbers are low in comparison to the graduation rates of previous generations: 80% of WWII veterans, 73% of Korean War veterans, and 68% of Vietnam War veterans (Mentzer, Black, and Spohn, 2015).

Unfortunately, the study does not explore in detail the reason for the decline in graduation rates, and there is no disaggregated data for student veterans with

disabilities.

Student Veterans with Disabilities and Self Identification

As previously demonstrated, many of the student veteran population enrolling in higher education will have combat wounds, mental health diagnoses, or both (Cate, 2014). These disabilities, whether visible or invisible, will have an impact on a student veteran's academic success and struggles. The student veterans may experience unpredictable class attendance due to pain, other symptoms related to their injuries, or scheduling conflicts with difficult-to-obtain VA doctor appointments (Ackerman et al., 2009; DiRamio et al., 2008). Further, the medications prescribed to treat physical pain and/or mental health diagnoses can often affect a veteran's ability to remain alert, concentrate, take notes, or perform well on exams, having a negative effect on academic performance (Church, 2009).

While transitioning into higher education, student veterans in general are not inclined to announce their veteran status for the purposes of receiving preferential treatment and prefer to utilize the self-reliance they were taught in the military (Livingston, Havice, Cawthon, & Fleming, 2011). These characteristics are in opposition to the self-identifying nature of support services in higher education. Based on this culture and their training, it is also extremely unrealistic to expect a student veteran with a disability to self-identify what they may fear will be considered a "weakness." As Burnett and Segoria (2009) state, "Service members have been trained to be warriors, ready at all times for duty. The term *disability* is imbued with a connotation of *not fit*, weak, unable to participate or perform" (p. 54, emphasis in

original). Taking this into consideration, it is not surprising that student veterans are reluctant to identify themselves as someone who would qualify or need to receive reasonable accommodations through a campus' disability program.

According to Section 504 of the Rehabilitation Act of 1973 (Bloomfield, 2007) and Title II of the Americans with Disabilities Act of 1990 (ADA, 1990), colleges and universities can provide reasonable accommodations for students with disabilities. In order to qualify for these services, the student must self-identify the disability and provide a verification of the disability with a diagnosing professional's certification and signature. This can be a daunting process for students, but is further complicated for student veterans. Often, the student veteran's medical records detailing evaluations, diagnoses, and documentation are tied-up in the tangled mess of the government's bureaucracy. Further, a veteran rarely sees the same doctor or mental health professional, which can result in conflicting or incomplete information.

Some student veterans have been processed through the Veterans Administration (VA) for their disabilities, have received a disability rating, and vocational rehabilitation is possibly funding their education instead of the Post-9/11 G.I. Bill. Despite this, many student veterans are still hesitant to inform the college of their disability status or request specialized services on campus (ACE, 2008).

Nondisclosure of limitations is a huge issue (Church, 2008) and obstacle for student veterans with disabilities. Student veterans typically prefer to blend in with other students immediately following their return to civilian life (Shackelford, 2009). According to Hoge et al. (2004) there is a history of underreporting symptomatology

in military populations for fear of decreased career opportunities and perceived stigma by peers and leaders. As Shackelford (2009) continues, this failure to self-identify can be traced back to the cultural norms of the military where they were quickly taught that "acknowledging, discussing, or reporting a personal problem or vulnerability would most likely prompt a negative reaction from superiors, as well as peers in their unit" (p. 37).

Burnett and Segoria (2009) stated that many veterans will utilize their educational benefits to start new careers in fields such as law enforcement, leveraging their military experience into a civilian career; these particular fields require background checks that would be unforgiving of any disability history. This fear also stems from veterans' experiences in the military where superiors have direct access to a service members military record or "jacket" which includes detailed information regarding their trainings, military service, and any medical treatments.

Service members returning to campus bring with them incredible assets and skill sets such as maturity, leadership, experience with diversity, and a mission-focused attention that exceeds that of the average college student (DiRamio, Ackerman, & Mitchell, 2008); these assets and skill sets were earned at a great personal expense and for some that may include combat-related injuries (Barnhart, 2011). While not all student veterans with TBI or PTSD may require accommodations to succeed in the academic environment and others may only require a few accommodations, it is important that such determinations are made on a case-by-case basis.

Shortfalls and Success in the Attention and Service to Student Veterans

Research supports the notion that veterans often feel unsupported on college

campuses and feel that the institutions do not understand them or their needs (Cook &

Kim, 2009; Griffin & Gilbert, 2015). There are many factors that make providing

services to veterans in higher education a complicated endeavor. This section will

address these factors along with promising and successful practices that have been

implemented in colleges.

Fragmented Services

Brown (2009) notes that despite the common goal to support student success,

academic student support services tend to fall victim to decreased collaboration.

Undergraduate students often struggle to seek help and services that are scattered

across campus (Brown, 2009). This experience is aggravated for student veterans

with disabilities. Typically, student veterans with disabilities are referred to a separate

department on campus where they must self-identify their disability in order to

receive assistance. This is a point of loss for many student veterans with disabilities

as they will not venture outside of their support network in their Veterans Center to

identify their disability, even though doing so would provide services necessary for

their success (Church, 2009). As Church (2009) explains,

> Colleges and universities that develop welcoming programs to meet the
>
> unique challenges of veterans with both visible and invisible injuries will need
>
> to take into account that many student veterans are not self-disclosing and

currently not utilizing service models existing on campuses for students with disabilities (p. 43).

The ambiguous access to student services across campus can have an impact on the student veterans' participation and success in college (Burnett & Segoria, 2009). Grossman (2009) states that the veteran population returning and enrolling in higher education can "either create multiple crises or motivate us to end 'silo-like' piecemeal approaches to what are clearly interdisciplinary and interagency responsibilities" (p. 6).

Comprehensive Services

Multiple studies on student veterans' experiences in higher education report some of the conditions and strategies that can facilitate the integration of veterans into the educational environment (Cook & Kim, 2009; DiRamio, Ackerman and Mitchell, 2008; Griffin & Gilbert, 2015).

One of the foremost recommendations is that institutions create veterans' offices which would assist the student veterans as they navigate campus systems, registration, financial aid, deployment, as well as transitioning and re-adjustment concerns (Ackerman, DiRamio, & Garza Mitchell, 2009; Griffin & Gilbert, 2015). Making systems manageable for returning veterans requires collaboration among campus offices and resources (Burnett & Segoria, 2009; McBain, McBain, Kim, Cook, & Snead, 2012; Griffin & Gilbert, 2015; Vance & Miller, 2009). Burnett and Segoria (2009) emphasize the necessity to implement intra-institutional collaboration

through committees, student groups, trainings for faculty and staff, and mentoring programs to provide student veterans with information and resources.

Within the Veteran's Office on campus, DiRamio, Ackerman, and Mitchell (2008) also suggest a holistic model, or "one-stop" approach to serve student veterans, which includes a conscious effort to permeate boundaries between college support services and collaboration with organizations outside of academia. Burnett and Segoria (2009) note that community and system-wide collaboration through state-level partnerships and working relationships with veterans' healthcare facilities can improve transition experiences for this student population.

The "one-stop" approach begins with the identification of each student-veteran and follow-up in order to provide ongoing services (DiRamio, Ackerman and Mitchell, 2008). This process can be accomplished through intake forms and applications for enrollment. This step is essential in providing the students with detailed and coordinated efforts of campus officials. In the early stages of an individual's transition from military into higher education, it is recommended that the institution provide a level of support that will increase the probability of academic and personal success for the student veteran (DiRamio and Jarvis, 2011).

The findings in the DiRamio et al. (2008) study also suggest having a mentor or "transition coach" to guide the student-veteran. The transition coach would help the veteran deal with institutional and "administrative hurdles, offer academic advice, and provide support for the emotional aspects of a transition to civilian life" (p. 94). Opportunities to engage with other veterans are important in that they can provide

students with access to those who understand their experiences and provide additional support (Ackerman, DiRamio & Garza Mitchell, 2009; Glasser, Powers, & Zywiak, 2009; Griffin & Gilbert, 2015); this can be accomplished through student veteran organizations (SVOs) which have the potential to provide student veterans support in a judgment-free zone (Cook & Kim, 2009; Elliott, Gonzalez & Larsen, 2011; Griffin & Gilbert, 2015; Summerlot, Green, & Parker, 2009; Vance & Miller, 2009).

The American Council of Education (2008, n.d.) recommends creating specific points of contact for veterans to help them navigate administrative processes and assist them through obstacles that might otherwise prevent degree completion (Griffin & Gilbert, 2015). Appointing an institutional point person to help with the reintegration process has also been identified as particularly important (Bauman, 2009; Griffin & Gilbert, 2015; Vance & Miller, 2009). It is recommended that there exist an academic counselor dedicated to veterans who is trained to support student veterans on the basis of confidentiality and sensitivity. Gilbert and Griffin (2015) suggest this academic counselor needs to know details such as the transfer of military credit, development of education plans, as well as the navigation of college policies. Ideally, this individual would be a veteran himself or herself or an individual who is familiar with military culture. This professional would also serve as a direct contact point with the Certifying Official on campus (typically in financial aid) who ensures that the student veterans have been certified every semester for their benefits in order to receive their benefits. It is also possible that this person could also be a Certifying Official under certain circumstances. This counselor would also need to be trained in

disability services to incorporate a "one-stop" approach for the student veterans with

disabilities. Further, this position would be able to provide professional development

opportunities for college instructors and campus staff that are necessary to provide

better understanding of the needs of this population of students as well as to provide

training regarding the specific needs of student veterans with disabilities (Griffin &

Gilbert, 2015).

Theoretical Framework

An understanding of the problem of interest will be achieved through the use

of a theoretical lens. According to Creswell (2007), human behaviors are understood

when interpreted through a social, political, historical, or cultural lens. Transitions for

student veterans with disabilities transition is explored using the theoretical lens of

Schlossberg's (1984) Adult Transition Theory, which is further analyzed by utilizing

Schlossberg's 4S System (Schlossberg, Waters, & Goodman, 1995; Goodman,

Schlossberg & Anderson, 2006).

Schlossberg's Adult Transition Theory

Schlossberg's (1984) theory explains the experiences of adults undergoing a

significant life transition. Her transition frameworks are used to understand how

veterans move through difficult transitions such as military service to civilian life and

begin to incorporate that transition into their lives. This theory is based on a three-

stage model (Schlossberg, Lynch, & Chickering, 1989; Schlossberg, 1984) Theory of

Adult Transitions, which can construct a theoretical basis for understanding. It is

important to note that student veterans have already experienced other transitions

moving into adulthood. For this reason, the phases of this theory will be evaluated within two contexts of the service member's transition: *into, through,* and *out* of the military and later, *into, through,* and *out* of the role of a community college student.

Moving in. According to Schlossberg (1984), the first phase involves the adult developing new identities. Service members experience this while going into the military and learning what is expected of them in their new role. This process can also be quite jarring as this usually takes place during basic training where the purpose is removing any previous individual identity. Later, when transitioning from military service member to an environment of civilian college students, the first stage, *moving in,* is experienced again and involves the student veteran becoming acquainted with what is expected and learning how to navigate civilian life as well as the new college environment. This typically can trigger an identity crisis, and the transition can prove to be very difficult.

Moving through. In the second stage, the adult begins to learn to balance their new roles. For those transitioning through the military, this includes initially learning to balance their roles in the military with their training, orders, and commanding officers. When later transitioning out of the military, the second stage, *moving through,* begins with understanding and readjusting to the civilian environment as well as the college environment. This is where the student veteran learns to balance their new role as well as the demands it places on their lives.

Moving out. The third and final stage, takes place when the transition cycle begins again because the cause of the transition itself has ended, the adult begins

looking forward to the future and new transitions. Wheeler (2012) further describes that the *moving out* phase occurs upon leaving military service, which actually begins their transition process again from solider to civilian and then becoming a college student as well. When transitioning out the community college the transition process will begin again when the student veteran either graduates, begins new employment, and/or transfers to a four-year institution.

Schlossberg's 4S System

According to Schlossberg, Waters, and Goodman (1995) and Goodman, Schlossberg and Anderson (2006), there are multiple factors that influence an individual's ability to manage a transition. The type of transition, the nature of the transition, and the context in which the transition takes place, combined with an individual's resources and assets influence the transition process. The 4S System is a component of Schlossberg's transition theory, which identifies a set of four factors that influence the ways in which an individual experiences a transition: situation, self, support, and strategies (Schlossberg, Waters, & Goodman, 1995; Goodman, Schlossberg & Anderson, 2006).. This framework is utilized to detail the assets and resources to which veterans have access and challenges as they transition out of the military and into higher education (Griffin & Gilbert, 2015).

Situation. The first of the four Ss, *situation,* describes how the individual perceives the transition as well as the sense of control over what is happening. Particular areas of concern within this factor include whether the change is seen as permanent or temporary, if the transition is perceived as good or bad, and whether

there are other stressors present which aggravate transitional challenges (Goodman, Schlossberg, & Anderson, 2006; Griffin & Gilbert, 2015; Schlossberg, Waters, & Goodman, 1995).

Self. The second S, *self,* refers to an individual's self-related factors that affect how internal resources and personal characteristics influence their ability to cope. This factor has two dimensions: personal characteristics and psychological resources (Evans et al., 2010; Griffin & Gilbert, 2015). Personal characteristics can include age, gender, and socio-economic status, which can shape the ways in which individuals manage change. Psychological resources refer to personality characteristics and internal states which can influence the ways in which individuals manage transitions (Goodman, Schlossberg & Anderson, 2006; Griffin & Gilbert, 2015; Schlossberg, Waters, & Goodman, 1995). Schlossberg and colleagues emphasize that explanatory style, optimism, self-efficacy, resilience, values, and commitments are factors that can create positive outcomes in the process of transition (Goodman, Schlossberg, & Anderson, 2006; Griffin & Gilbert, 2015; Schlossberg, Waters, & Goodman, 1995).

Ford, Northrup, and Wiley (2009) argue that mental and social struggles were possibly veterans' most pressing needs. Sachs (2008) noted that psychological disruptions have high potential to impact veterans' transitions. Therefore, it is important to note that many researchers have also detailed the important role that counseling plays in terms of managing the self and these particular areas of concern (Bechtold, & De Sawal, 2009; Griffin & Gilbert, 2015; Grossman, 2009; Ruh, Spicer, & Vaughn, 2009; Shackelford, 2009).

Support. The third S, *support,* is primarily a social component and addresses the ways in which caring, affirmative, and positive feedback can facilitate transitions (Evans et al., 2010; Goodman, Schlossberg, & Anderson, 2006; Griffin & Gilbert, 2015; Schlossberg, Waters, & Goodman, 1995). Age differences and gaps in maturity, when compared to other students, can create social distance, and veterans may become frustrated and feel that they do not fit in (Bauman, 2009; Elliott, Gonzalez, & Larsen, 2011; Griffin & Gilbert, 2015). Therefore, in addition to institutional structures, supportive campus peers can promote transitions (Griffin & Gilbert, 2015; Runmann & Hamrick, 2010).

Strategies. The fourth S, *strategies*, speaks to the abilities of the individual in managing transitions through one's own behaviors (Evans et al., 2010, Griffin & Gilbert, 2015). There are three categories of coping responses: modifying the situation, controlling the meaning of the problem, and managing stress after the transition. Individuals can implement four different coping modes as they engage in these responses: information seeking, direct action, inhibition of action, and intra-psychic behavior (Evans et al., 2010; Goodman, Schlossberg, & Anderson, 2006; Griffin & Gilbert, 2015; Schlossberg, Waters, & Goodman, 1995).

CHAPTER III

METHODOLOGY

The purpose of this study is to identify the ways in which student veterans with disabilities navigated the process of transition from their life as members of the military community to participants in community college life. The research questions that guided this study were:

1. How do veterans with disabilities perceive their transition experiences from the military to the community college?

2. What are the barriers, personal or structural, that student veterans with disabilities experience in self-identifying and accessing services related to their disabilities?

3. What types of structures and services do veterans with disabilities identify as factors that can facilitate their transition into college life?

A qualitative research design was used to answer the questions listed above. Qualitative research is based on a social constructivist paradigm. According to this paradigm, the researcher understands that reality is socially constructed with multiple truths that are complex and ever changing (Schwandt, 2007). The focus of this approach is to understand the meaning people attribute to their experiences (Merriam, 2009). This paradigm strives to learn from the participants in a setting or process the way *they* experience it, the meanings they put on it, and how they interpret what they experience (Morse & Richards, 2002). This design was

appropriate for this study, which sought to understand how student veterans with disabilities made sense of their transition from the military into the community college as well as to understand what supports they identified as valuable.

Second, qualitative research is concerned with understanding the context in which social phenomenon is constructed (Merriam, 2009). Social constructivism believes that individuals seek understanding of the world in which they live and work (Creswell, 2013). The study presents a holistic view of the transitional experiences of student veterans with disabilities. This approach was used to expose any complex interactions and multiple perspectives offered by participants in this study. Willis and Jost (2007) stresses the importance of the reflexive nature of qualitative research, as understanding rather than truth is sought. The setting occurred in the field, in a natural environment (Creswell, 2013), at a Veterans Resource Center within a California community college where the participants largely experienced the phenomenon being studied.

Another characteristic of the qualitative approach is that the researcher acts as an instrument for data collection (Leedy & Ormrod, 2005; Creswell, 2007). The qualitative paradigm is non-interventional in nature, which allowed the researcher to position herself as an observer as well as an analyst of the data collected in order to explore the research questions with student veterans with disabilities. The researcher was cognizant of the impact that her background, prior experiences, and relationships with the participants could potentially have on data interpretation. According to Creswell (2007), the researcher, participants, and readers of the study contribute to a

study's multiple perspectives. Qualitative inquiry affords interpretive flexibility that is sensitive to the researchers' lived experiences, and allows the researcher to describe and contemplate the findings within the context of the researcher's background (Creswell, 2007).

Further, this qualitative research study employs multiple data sources to enable triangulation. In addition to student questionnaires and interviews, a focus group was used in order to gather the student veterans with disabilities input to better understand their lived experiences. This information contributed to the knowledge about student veterans with disabilities and the potential services and support needed to assist this population through their military-civilian transition as well as into the community college.

Finally, qualitative design reveals itself as data is collected and analyzed. Creswell (2007) uses the term "emergent design" to describe the ability to modify a research plan as the study progresses. As open-ended interviews were reviewed, patterns became apparent to the researcher.

Method

A community-based participatory research (CBPR) approach was utilized as it recognizes that: knowledge is constructed socially and allows for social, group, or collective analysis of life experiences of power and knowledge (Hall, 1992). The CBPR process was determined to be an essential approach because it shifts the decision-making authority away from experts or those in power and embraces the experiential knowledge of the student veterans with disabilities. I was able to

determine through my prior experiences with the population that CBPR is a vital approach for a number of reasons: (1) veterans come from a culture in the military where they were trained to rely and depend heavily on one another for survival; (2) veterans tend to distrust those perceived as outsiders who demonstrate a lack of understanding or knowledge about the experiences of the military; and (3) veterans tend to resist decisions or actions made by those outsiders who impose power over them.

Community-based participatory research is defined as a systematic inquiry, with the participation of those affected by the issue being studied, for the purposes of education and taking action or affecting social change (Green & Mercer, 2001, p. 1927). According to Leung, Yen, and Minkler (2004), CBPR is a process in which research occurs *with*, rather than *on*, communities and affirms the value of communities' experiential knowledge. This collaborative process is a method in which community representatives participate in the definition of the research problem, interpretation of the data, and application of the findings (Leung et al., 2004). In this study the student veterans with disabilities were the members of the community incorporated as partners in the study.

Community-based participatory research has been touted as an effective vehicle to involve college students meaningfully in the research process (Jacobson & Goheen, 2006). CBPR activities are directly connected to the community where data are collected, analyzed, and interpreted with the goals of promoting action and social change (Higgins & Metzler, 2001). This process provides a context for program

development and service delivery that is responsive to client and community needs and builds on the strengths and resources in the community (Higgins & Metzler, 2001). The promotion of empowerment and social change— as well as the acknowledgement that communities are the experts on their own strengths, needs, challenges, and capacities— resonates well with the mission, values, and ethics of the Veteran's Resource Center and the veteran community itself.

According to Israel, Schulz, Parker and Becker (1998) the fundamental characteristics of CBPR is a process that is: (1) participatory; (2) co-operative, engaging community members and researchers in a joint process to which each contribute equally; (3) a co-learning process; (4) involves system development and local capacity building; (5) an empowering process through which participants can increase control over their lives; and, (6) achieves a balance between research and action.

CBPR is composed of three major and overlapping components: participatory research, education, and social action. (Leung et al., 2004). Including the student veterans with disabilities in the process of selecting the issues to be addressed employed student veterans' experiential knowledge and respected the cultural context of the community (Isreal et al., 1998). This approach created a dialogical process between the researcher and the student veterans with disabilities in order to ensure that the issues addressed were relevant for both. With the student veterans with disabilities playing a key role, the researcher acknowledged that she may have to negotiate her interests and strategies so that the community can provide insightful

suggestions (Hall, 1992).

Mosavel et al. (2005) note that research question development is particularly critical in the context of CBPR; questions formulated without the input and involvement of community stakeholders could undermine the research and the chances of success. It is also through this access to the community that the researcher was able to include the participants in the development of the research topic, research questions, and the interview questions. This interaction occurred during regular and typical interactions during meetings, appointments, and conversations on campus. It is through the process of participation that the student veterans with disabilities were also able to take ownership of the research process and develop new knowledge relevant to their experiences. As a result, the research outcomes were accessible, understandable, and relevant to the student veteran with disabilities' specific interests and needs.

The second component in the CBPR process, education, involved participants engaging in dialogue to develop a critical awareness, which in turn enabled them to see the relationships between their own community-level experiences and the larger social structure (Yeich, & Levine, 1992).

The third component of CBPR, action, is perhaps the area that most strongly distinguishes this approach from conventional research and is viewed as an integral component of the research process itself. The specific course of action to be taken in CBPR and in this study depended on the outcomes and on collaborative decision-making by the community of student veterans with disabilities and the researcher

(Leung et al., 2004).

Research Site and Selection of Participants

This study was set at a community college situated in California, south of San Jose. The college offers a two-year lower division college program that prepares students for transfer to a four-year university. The college also offers a variety of one- and two-year technical, occupational, and pre-professional courses of study that lead to employment. Currently, students can choose among 26 associate degree programs and 13 certificate and career programs. As of 2013-2104, there were 10,713 students enrolled; of those, just over 5,200 were full-time equivalent students.

According to the college's 2013-2014 Student Equity Plan, the veteran population was numbered at 162 students, with an average age of 34-35 years old. Approximately 83% of the student veteran population was male; 38% was reported to be white; and 32% was reported to be Hispanic. There was not a current, approximate number of student veterans with disabilities on campus to report as this information was (1) confidential, therefore not reported; and (2) a resistance exists within in the veteran population to self-identify as having a disability.

On campus, there is a newly developed Veteran's Resource Center (VRC), which is central for Veteran's services on campus. The VRC had been run by student veterans enrolled at the college, serving as VA "work-studies." The work-studies' primary goal was to provide support to fellow veterans navigating the transition from military service into the academic setting. The VRC provides a setting for veterans to connect with one another, learn about available campus services, and enjoy a

welcoming and familiar environment for incoming veteran students. The VRC strives

to provide access to financial aid information, VA benefit and certification assistance,

mentoring and academic tutoring, readjustment counseling, scholarship information,

peer-to-peer student support, mental health counseling, Veterans Club information,

and coordination with outside agencies to bring in additional services.

The veteran population also started a Student Veterans Club in 2011, for those

interested in helping other veterans succeed and adapt to academic life at the

community college. The club's goals include improving veteran services at the

college, peer-mentoring student veterans, raising awareness of veteran issues,

promoting understanding on campus, and working with the college's extended

community to foster veteran success.

The participants were current students enrolled at the college who held the

status of United States military veteran having served in the active duty branches of

the Army, Marine Corps, Air Force, Navy, or Coast Guard. The participants had also

been provided a disability rating through the office of Veterans Affairs (VA),

categorizing them as a veteran with a disability. A portion of the participants had

requested services from the disability services office on campus, while others were

resistant to self-identify. Participants were advised that their participation in the study

was voluntary, and they would not be compensated for their involvement. Participants

were selected by purposeful sampling.

Role of the Researcher

The researcher had worked directly with student veterans and student veterans

with disabilities as a counselor in the Disability Resource Center on campus. The established rapport and relationship with the target population provided insider access and an established trust within the community. Building and maintaining trust is another important aspect of CBPR. Based on the experience of the researcher with the student veteran population, it was apparent that any program changes decided upon and implemented by outsiders would not be welcomed or utilized as outsiders do not necessarily understand the unique needs of this population. For this reason, the researcher worked to develop rapport with the population during the year prior to the research study as to increase the participants' level of comfort and trust. It was the researcher's role to serve as a conduit to report the participants' responses, experiences, and impressions as stated.

Data Collection

Prior to the gathering of any data, the IRB process was completed to ensure respectful, non-threatening treatment of participants. This process was accomplished by gaining informed consent, protecting the participants' privacy, maintaining confidentiality, and ensuring safeguards for the protection of the research subjects.

The seven participants in this study completed informed consents and a Participant Questionnaire (see Appendix C) prior to the individual interviews and the focus group. The questionnaire provided demographic information identifying the participants' role in the program, sex, ethnicity, major, year in college, years of activity with the Veteran's Resource Center, the participants' service-related disability, disability rating through the Veteran's Administration, and whether or not

the participant was receiving services on campus for their disability. The questionnaire also documented the demographic make-up of the student veterans with disabilities participating in the interviews and focus group.

Six individuals participated in one-on-one, semi-structured interviews, lasting approximately 60-90 minutes were conducted over the summer 2016 session. The open-ended research questions were selected in a collaborative effort between the researcher and one participant who assisted in identifying meaningful questions. This particular participant was an important person to ask advice as he, himself, was a student veteran with a disability and was aware of the research topic and was supportive in making improvements to the existing Veterans Resource Center, as is consistent with the CBPR process. The CBPR model encourages student empowerment in decision-making, group interaction, and application of research principles and techniques (Anderson, 2002). The use of semi-structured, individual interviews allowed for consistent investigation of the topic with the participants but also afforded the flexibility to engage in natural conversation, which provided greater insight. It was important that the interviews were held prior to the focus group as the preliminary individual interviews assisted in generating the guiding questions for the focus group. Morgan (1996) states that hearing about individual informants' experiences in detail can provide a basis for asking questions that can allow the focus group participants to share the full range of their experiences.

A focus group is defined as an interview on a topic with a group of people who have knowledge of the topic (Krueger & Casey, 2008). Since the data obtained

from a focus group is socially constructed within the interaction of the group, a constructivist perspective motivates this data collection process (Merriam, 2009). The CBPR model also encourages student group interaction and application of research principles and techniques (Anderson, 2002). The use of a focus group provided this opportunity for the participants. One, two-hour focus group with four student veterans with disabilities was conducted. The number of the focus participants was based on student availability and information obtained during the interview process. The data obtained from the individual interviews was also utilized to guide the questions for the student veterans with disabilities' focus group. This information provided valuable insight into the transition experience for student veterans with disabilities as well as potentially identifying any areas of need for this population of students. The one-on-one, semi-structured interviews and focus group session were audio-recorded in order to capture participants' responses to the community-selected interview questions. During the focus group, seating was arranged around a large rectangular table with a laptop microphone utilized to record when participants spoke. In order to reduce multiple responses and enhance voices for transcription, group members were encouraged to speak one at a time.

Data Analysis

Once the audio-recordings of the interviews were transcribed and reviewed for accuracy and clarity with the participants, coding began. The coding process is defined as the systematic mechanism by which data are interpreted and brought together, resulting in themes, concepts, ideas, and interpretations (Creswell, 2007).

Use of qualitative software can assist the researcher in storing, sorting, and retrieving qualitative data (Creswell, 2007; Merriam, 2009; Saldaña, 2013). Therefore, the data analysis process began by transferring verbatim transcripts of the interviews into the ATLAS.ti™ qualitative data analysis software program.

Open and axial coding was utilized to determine how student veterans with disabilities navigated the process of transition from their life as members of the military community to participants in community college life. Additionally, support structures and services that could help this population to navigate their academic experiences effectively were identified.

The coding process began by dividing the text into segments and labeling these segments or units with codes. The codes were then evaluated for overlap and redundancy these codes were condensed into broader themes (Creswell, 2013). The creation of themes was accomplished by grouping similar codes (Creswell, 2013; Merriam, 2002). With the participant responses coded, these themes were analyzed under the theoretical frame of Schlossberg's Adult Transition Theory (Schlossberg, Lynch, & Chickering, 1989; Schlossberg, 1984), as well as Schlossberg's 4S System (Schlossberg, Waters, & Goodman, 1995; Goodman, Schlossberg & Anderson, 2006) to better understand the transition experience for student veterans with disabilities. Creswell (2013) describes saturation as the point where no new information can add to the list of themes. When saturation was reached, the development of themes was concluded.

The codes and themes that developed were shared with the participants, as this

sharing of information is a crucial step in the CBPR process and ensured the

participants had the opportunity to become more critically conscious of their situation

and ultimately to confront the problems that were uncovered (Leung et al., 2004).

Due to the nature of the information obtained and the collaboration with the

participants, suggestions for program improvement and implementation of potential

services were also discussed.

Trustworthiness

There are three key components of a qualitative study that can form the

study's trustworthiness: credibility, consistency/dependability, and transferability

(Lincoln & Guba, 1985; Saldaña, 2013). These concepts have been re-packaged by

Merriam (2009) as internal validity, reliability, and external validity.

Internal validity inquires as to how the research findings match reality

(Merriam, 2009). However, the interconnectedness of the researcher and the study

explains how trust is the foundation of internal validity and indicates its importance

(Merriam, 1988; Merriam & Simpson, 2000). For this qualitative study, Merriam's

(1988) view of validity was applied: "What is being observed are people's

constructions of reality, how they understand the world" (p. 167).

Reliability emphasizes the extent to which the research findings can be

duplicated (Lincoln & Guba, 1985) and the process by which responses are coded to

multiple data sets (Merriam, 2009). Since the purpose of qualitative research is to

describe and explain a phenomenon, reliability in the sense of reproducibility is

problematic due the unpredictable nature of human behavior (Merriam, 1988).

Therefore, the best approach is to design the study in a way that clearly delineates the research process. Yin (1994) aptly states, "Conduct research as if someone were always looking over your shoulder. . . . so that an auditor could repeat the procedures" (p. 37).

External validity applies to the degree that the results of one study can be transferred to other situations, leaving the range of a study's findings up to the individuals in those situations (Merriam, 2009). In order for knowledge to be transferable, the context in which the study's results were acquired, as well as the context of the setting to which the results will be applied, requires a reflective lens (Denzin & Lincoln, 2005). Therefore, external validity or transferability was supported in this study by applying Merriam's (1988) technique of writing "rich, thick descriptions" (p. 177), because it is the reader who will determine whether findings and recommendations can be transferred to their institution or situation.

Merriam (2009) identifies strategies for promoting trustworthiness to include triangulation; member checks; adequate engagement in data collection; researcher's reflexivity; audit trails; rich, thick descriptions; and maximum variation. In order to portray an accurate account of a participant's story, Creswell (2007) also suggests using multiple validation strategies including data triangulation and peer review. For this study, data triangulation was utilized by confirming similar coding across multiple sources to include the questionnaire, interviews, focus group, field notes, and reflexive journaling. Member checks strengthened the study's reliability through

participants confirming the authenticity of the audio-recorded transcripts. Data was saturated when no new themes emerged from the data analysis (Creswell, 2007).

Reflexive journaling is defined as a process of critical self-reflection of one's biases, theoretical predispositions, preferences, and so on (Schwandt, 2007). In addition to the methods of triangulation mentioned above, the investigator kept a journal to record thoughts, conceptual connections, feedback from colleagues, and research stumbling blocks. This practice also allowed the researcher to reflect on interactions with the participants, how the interaction was sustained, as well as how it evolved. This information was used for reflection and to document process decisions over time. This activity added to and justified the analysis process and potential action steps in response to information obtained from research (Kleinsasser, 2000).

Throughout the analysis process, the researcher noted her own personal biases and experiences when possible and the researcher wrote memos explaining her preconceived biases. Reflexivity allowed the researcher to critically reflect on the researcher's role as the human instrument through which the data was being collected (Lincoln & Guba, 1985; Merriam, 2009). This included the researcher's internal dispositions, biases, and assumptions about the research.

ATLAS.ti™ qualitative software assisted with the ability to perform an audit trail for code changes and merges. Accurate and thorough descriptions of the study were maintained to allow the researcher to understand the extent to which "their situations match the research context, and hence, whether findings can be transferred" (Merriam, 2009, p. 229).

In summary, useful qualitative research requires (a) spending enough time in the field and employing rigorous data collection techniques (Creswell, 2007); (b) ensuring that all steps in the research process are operational (Yin, 1994); and (c) ensuring consistency in the results from data collected (Merriam & Simpson, 2000). Triangulation strengthened the trustworthiness and reliability of the study and provided rich, thick description, which will assist with transferability.

CHAPTER IV

RESULTS

The purpose of this study was to describe the transition experience of military students with service-related disabilities as their environment, roles, and relationships changed. Schlossberg's (1981, 1984) Adult Transition Theory was utilized as the initial frame and lens to evaluate the emerging data. An absence of research specifically related to disabled veteran students drove the purpose of this study. This research utilized a community-based participatory research approach to learn with, and from, the student veterans with disabilities to understand what their experience was like and how to better serve their educational and transitional needs at the community college. The goal of community-based participatory research is to include the participants in the research process from the formulation of questions to the construction and understanding the data produced throughout the research process.

The findings presented in this chapter answer the following research questions:

1. How do veterans with disabilities perceive their transition experiences from the military to the community college?

2. What are the barriers, personal or structural, that student veterans with disabilities experience in self-identifying and accessing services related to their disabilities?

3. What types of structures and services do veterans with disabilities identify

as factors that can facilitate their transition into college?

This chapter begins with a description of the seven participants followed by a description of the themes developed from an in-depth analysis of the individual interview and focus group data. The first theme describes the participants' general experiences from their journey into the military, returning to the role of civilian, and then into the role of college student. This theme specifically explored the participants' varying levels of identity crises related to understanding and managing their new disabilities as well as their shared experiences of feeling stigmatized. Next, the discussion shifts to how the participants learned to adapt to their transition and learned to manage their new disability in order to develop the assets necessary to carry on and persevere. Finally, the discussion focuses on the individual nature of how participants defined their new identity and how the experience has shaped them as they move forward. The outline of the findings follows Schlossberg's (1981, 1984) Adult Transition Theory model of "moving in," "moving through," and "moving out" while also incorporating Schlossberg's 4S System.

Schlossberg, Waters, and Goodman (1995) defined transition as "any event, or nonevent, that results in changed relationships, routines, assumptions, and roles" (p. 27). Schlossberg and her colleagues' contributions provide a "framework that would facilitate an understanding of adults in transition" (Evans, Forney, & Guido-DiBrito, 1998, p. 108). Whereas other transition models explore change as it relates to age and life stage, Schlossberg's (1981) transition model considers transitions triggered by anticipated or unforeseen *events* or *non-events*, although they can be associated with

cultural or age-related factors (Pellegrino & Hoggan, 2015). Schlossberg's framework has been classified as a psychosocial theory of adult development, which focuses on the significant transitional issues individuals face, while recognizing that not all of life's challenges are of equal importance. Additional contributions by Schlossberg, Lynch, and Chickering (1989) provided a useful framework for thinking about transition. The "Moving In, Moving Through, Moving Out" model identifies factors that influence how individuals cope with transitions (DiRamio, Ackerman, & Mitchell, 2008). Schlossberg's research suggests transitions are a progressive, step-by-step change, where people respond to events over a period of time, requiring adjustment across several of life's facets. This research indicates that with understanding, a transition can be managed and the individual in transition can be supported as he or she navigates the process (DiRamio, Ackerman, & Mitchell, 2008). As Schlossberg (2004) suggests:

> It is not the transition *per se* that is critical, but how much it changes one's roles, relationships, routines, and assumptions. The bigger the change, the greater the potential impact and the longer it may take to incorporate the transition and move on (pp. 3–4).

According to Schlossberg, Goodman, and their colleagues (1984), in addition to the type of transition, the nature of the transition process and the context in which it takes place, as well as the specific resources and assets, can all bear an influence over the transition (Gilbert & Griffin, 2015). A component of Transition Theory, the 4S System (Schlossberg et al., 1989), outlines a set of factors that play a significant role

in every transition. These factors are vital to understanding how veterans manage their transition, becoming more significant than the individual stages of the transition (Wheeler, 2012). When progressing through the three transition phases, individuals also undergo a self-evaluative process. This process includes attempts to determine the likely negative or positive effects of the transition as well as conducting an inventory of available resources necessary to managing the change. This self-analysis includes a consideration of strengths and weaknesses based on personal and psychological factors, the social supports available, and coping strategies the individual could use to modify the situation, control the meaning of the transition, and manage the stress it causes (DiRamio, Ackerman, & Mitchell, 2008; Schlossberg et al., 1989). Some people are able to quickly adapt to a new set of roles, routines, relationships, and assumptions, whereas others may hesitate and grapple with the uncertainties of what lies ahead (Schlossberg, 2011; Pellegrino & Hoggan, 2015). Schlossberg's (1981) transition model presents four fundamental coping factors, these resources and assets are grouped and referred to as "the 4S System," and identify the key factors influencing one's ability to cope: situation, self, support, and strategies (Gilbert & Griffin, 2015). The 4S System provide a frame to analyze how adults experience transitions.

Participant Profiles

All seven participants were male student veterans with a service-related disability or disabilities recognized by the Veterans Administration with an assigned disability rating. Of the seven participants, all but one had identified with the

college's Disability Resource Center (DRC) for services. Of those six who identified

to the DRC, only one actually utilized the accommodations provided to him. Table 1

includes each participant's pseudonym, age range, branch served in the military,

ethnicity, disability, disability rating, and major in college.

Table 1

Description of Participants

Participant	Age Range	Branch Served	Ethnicity	Disability	Disability Rating	Major in College
Clark	25-30	Marine Corps	Hispanic	Physical Injury; Tinnitus; Sleep Apnea	60%	Nursing
Dave	31-35	Marine Corps	White, Non-Hispanic	PTSD; TBI; Shrapnel Injury; Hearing Loss	90%	Communication/ Pre-Law
Dierk	25-30	Army	White, Non-Hispanic	Chronic Back and Shoulder Pain; Loss of Feeling in Both Arms; Tinnitus; Hearing Loss; PTSD	90%	Allied Health – Physicians' Assistant
Giovanni	31-35	Navy	Hispanic	PTSD; Tinnitus; Depression	70%	Nursing
Kyle	31-35	Marine Corps	Native American Alaskan	PTSD	100%	Business
Russell	36-40	Marine Corps	Hispanic	Injury to Back, Shoulder, Knees, Ankles and Neck; PTSD	90%	Nursing

Steven	25-30	Navy	Hispanic	Left and Right Shoulder	20%	Pre-Med

Clark always struggled in school, largely due to an unknown learning disability at the time. While all of his friends were enrolling in college, after graduating high school in 2008, he felt pressure to also do something and decided to enlist in the Marine Corps. He was enlisted as a warehouse clerk for four years of active duty service. During his enlistment, he was deployed to the Helmand Province in Afghanistan for seven months in 2010. Clark is not married and has no children. Clark has been enrolled at the college for 10 terms, 7 of which he has been involved with the Veterans Club and the Veterans Resource Center on campus. He identified his disability to the Disability Resource Center on campus, where he was also assessed for any learning disabilities.

Dave decided to enlist in the Marine Corps immediately following high school. As a child, he looked up to his grandfather who had served during World War II and the Korean War and "always looked up to service members in action movies." He enlisted as a rifleman, a machine gunner, and an assault-man for four years of active duty service. During his enlistment, he was deployed to Iraq for eight months in 2003 and for another eight months in 2004-2005. Dave enrolled in another community college in California immediately following his discharge from active duty where he struggled immensely with his transition and eventually dropped out to work as a truck driver. Dave returned to college at the research site, where he has

been enrolled for seven terms. He has been a Veteran's Affairs (VA) work-study for seven terms, where the VA funded his employment in the Veterans Resource Center so he could assist other veterans. He was also a part of the Veteran's Club, a student organization on campus, for six terms. Dave has identified with the Disability Resource Center on campus but does not use any of the academic accommodations provided to him, such as extended time on tests, distraction-reduced testing, or the use of a note-taker or digital recorder in his classes. He is married with 2 children and another on the way.

Dierk's enlistment in the Army after high school was inspired by a desire to get out of his hometown, combined with a feeling of patriotism and a desire to serve his country after seeing the attack on the Twin Towers as a high school freshman in 2001. The educational benefits earned through military service were another large draw for Dierk as he wanted to go to college, but his family was not able to provide that for him. He was enlisted for nine years as a Health Care Specialist/Combat Medic and was deployed to Afghanistan for just under a year in 2010-2011 and again in 2012-2013 for ten months. Prior to attending the research site, he attended three other colleges, has been enrolled for four terms and is preparing to transfer to a local four-year institution. Dierk has identified with the Disability Resource Center at the college, but does not use any of the services. Dierk is not married and has no children.

Giovanni was enlisted as a Field Medical Service Technician in the Navy for five years. His decision to enlist was driven by a lack of motivation he had felt in high school. While he had a partial scholarship to attend a four-year college for running

track, his parents convinced him to consider the military because of the structure it would provide him. Giovanni's stepfather had also served in the Army and provided him with guidance and information about the different branches of the military. Giovanni was deployed to Okinawa, Japan in 2001-2002; to Iraq for eight months in 2003 and again in 2004 for seven months. He decided to end his enlistment after he began to feel betrayed by the government and the broken promises that he had witnessed. Giovanni has been enrolled at the community college for a total of 16 terms and has been involved with the Veterans Resource Center for four terms. He has identified his disabilities to the Disability Resource Center, but does not use the services. He is married and has two children.

Kyle enlisted in the Marine Corps as a warehouse clerk. He decided to enlist after struggling in school before graduating from a continuation high school. He wanted to attend college or culinary school, but financially could not afford to attend. He and two friends decided to enlist together after speaking with a friend's uncle, who was also in the Marine Corps. Kyle was deployed to Iraq in 2004-2005 and again in 2005-2006 and decided to end his enlistment after four years to pursue a career in real estate. He has been enrolled at numerous community colleges for a total of 32 terms and has been enrolled at the research site for the last 4 terms. He participated in the Veterans Resource Center for only one month and chooses not to use the VRC services or be a part of the program. He has identified to the Disability Resource Center at the college and utilizes those services. Kyle is engaged and has two children.

Russell enlisted in the Marine Corps in 1996 after graduating high school and served for 11 years as an Aviation Ordnance man. Russell was deployed to the Persian Gulf, Africa, and the Suez Canal for seven months in 2002 on the USS Wasp; Al Asad in Iraq in the Ramadi Province and Fallujah for eight months in 2004; and to Al Asad, Iraq in Al Rutbah and the Ramadi Province for eight months in 2006. He likely would have stayed in the military for a full career of 20 years, but was "forced out for misconduct" in his personal life. He attempted employment immediately following his discharge, and after much frustration, he decided to enroll at the community college and utilize his educational benefits. He has been enrolled at the college for a total four terms all of which he has been actively involved with the Veterans Resource Center and the Veterans Club. He has self-identified to the Disability Resource Center, but only utilizes the counseling services provided and none of his accommodations, such as extended time and distraction reduced testing, note taking, or the use of a recording device. He is married with four children.

Steven was enlisted in the Navy as a Corpsman for a total of six years. During that time, he was deployed to Iraq for a total of seven months during Operation Iraqi Freedom in 2009 and to the South Pacific (Japan) for seven months in 2010-2011. He decided to enlist to receive military educational benefits and because of a desire to serve his country. He has been enrolled at the college for a total of five terms, has participated in the Veterans Resource Center for a total of four terms and has been a member of the Veterans Club for three terms. While he has a service-

related disability, he has not identified to the Disability Resource Center to receive any services. Steven is not married and has no children.

Theme I. Moving In: The Personal Journey into New Roles and Identities

Participants in the study described their transition from the military into civilian and college life as a personal journey that involved re-learning who they were as individuals and how to navigate life. After their combat-related experiences, they returned home with the challenge of adapting to civilian life with a new disability that they did not have prior to their enlistment. Additionally, they returned home with an urgency to develop a new life direction and purpose as many of their military-related job skills and experiences were not transferable into their new role as a civilian. This group of individuals had to learn to adapt and modify their perceptions of themselves in new ways while also adapting to life with new psychological and physical limitations. The section below includes descriptions of how the participants lived the process of acclimating to life as a disabled individual while adapting to life as a college student. It was through this process where the participants had to learn to understand, embrace, and enact a new identity or identities. The first stage of Schlossberg's Adult Transition Theory, *moving in,* is applied to understand the ways in which student veterans with disabilities experienced their transition from military service to that of a community college student with disabilities.

The *moving in* phase of Schlossberg's Transition Theory is associated with individuals developing new identities. If the transition proves to be particularly difficult, an identity crisis can result (Schlossberg, Waters & Goodman, 1995). The

participants were faced with numerous challenges that resulted in identity conflicts regarding their veteran status. Challenges included attempting to fit in as a college student, dealing with the stigmas associated with having PTSD and with being a veteran, the assumption that all veterans struggle with PTSD, and struggling to adapt to a new disability that presented limitations in the learning environment.

Multiple forces can influence an individual's ability to manage transition (Anderson, Goodman, & Schlossberg, 2012; Goodman, Schlossberg, & Anderson, 2006; Schlossberg, Waters, & Goodman, 1995). In addition to the type of transition, the nature of the transition process, and the context within which it takes place, specific resources and assets can influence transitions. These resources and assets are grouped and referred to as "the 4 Ss," identified as key factors influencing one's ability to cope: situation, self, support, and strategies. In Schlossberg's Adult Transition Theory, the concept of *situation* describes how the individual perceives the transition, as well as their sense of control over what is happening (Evans et al., 2010). The characteristics of the *situation* include trigger, timing, source, role change, duration, previous experience, and concurrent stress (Schiavone & Gentry, 2014; DiRamio & Jarvis, 2011; Wheeler, 2012). Particular areas of concern within this factor include whether the change is seen as permanent or temporary; if the transition is perceived as good or bad; and whether there are other stressors present, such as limitations associated with their disabilities, which can further aggravate transitional challenges (Anderson, Goodman, & Schlossberg, 2012; Gilbert & Griffin, 2015; Goodman, Schlossberg, & Anderson, 2006; Schlossberg, Waters, & Goodman, 1995).

Situation asks, what type of transition is occurring? Did the person have a say in how, when, or why this transition occurred (Pellegrino & Hoggan, 2015)?

The concept of *self* refers to an individual's personal factors that affect their ability to cope and is distinguished with two dimensions: personal characteristics and psychological resources. Personal characteristics and traits reflect the manner through which an individual internalizes characteristics such as self-efficacy, motivation, optimism, strengths, and weaknesses (Pellegrino & Hoggan, 2015; Ryan, Carlstrom, Harris, & Hughey, 2011; Sargent & Schlossberg, 1988; Wheeler, 2012). Factors such as socioeconomic status, sex, age, and health all shape the ways in which individuals manage change. The psychological resources refer to personality characteristics and internal states, such as ego development, personality, outlook, and values, which can influence the ways in which veterans with disabilities manage their transitions (Evans et al., 2010; Gilbert & Griffin, 2015; Schiavone & Gentry, 2014). *Self* asks questions related closely to expectation and motivation. What past experiences influence the transition? What individual strengths and weakness factor into the transition (Pellegrino & Hoggan, 2015)?

When evaluating and attempting to understand the transition experiences of exiting the military and becoming a civilian, it was important to also evaluate the prior transitional experiences of the veterans. This provided a foundation of understanding prior experiences and the opportunity to compare and contrast the experiences, contributing factors and resulting outcomes.

All the veterans had prior experiences with transition as civilians becoming service members. According to Cantrell and Dean (2005), the first thing new civilians-to-soldiers give up is their freedom. This was followed by becoming a part of a giant machine where individuality is not a part of the equation. According to Cantrell and Dean (2007) and Hoge (2010) the purpose of the military's basic training is to strip the individual of all previous self-definition, vest each participant with a clear notion of what it means to be a service member (Herbert, 1998), and finally, build a new, strictly-adhered-to identity as a service member. In order to adapt to this new role in the military and its unfamiliar conditions, young service members must develop mechanisms to assist in the adjustment and manage the challenges of this new environment. One of the integral aforementioned mechanisms is the development of a community with others who share the experience and provide a consolation of surviving the transition (Cantrell & Dean, 2005).

While this transition is a large adjustment for an individual, five of the seven participants felt that it was not particularly difficult and that they had looked forward to and enjoyed this particular transition. An example of this sentiment included Giovanni's experience:

> It was an awesome experience. I was scared, excited, and nervous. That was the first time that I was really on my own, but I got strength knowing that everybody else there with me…was going through the same experience I was. That gave me a little bit of courage and strength and it made it a lot easier.

The impression of basic training that the general population is familiar with is what is witnessed in movies like Full Metal Jacket and on television. Media portrays this transition as being a jarring and almost excruciating adjustment. However, the excitement and anticipation Giovanni felt going through this initial transition was eased with feelings of camaraderie with the others who were sharing the experience in basic training. This community provided him with a sense of strength he was able to draw upon and resulted in him recalling the experience fondly. For Dierk, and three other participants, the highly organized, hierarchical structure of basic training and the military environment also eased the transition into the military. The initiation into the team and the sense of camaraderie was viewed as a necessity to survival and success.

> I think for me it was pretty easy. Everything's so formatted, everything's scripted really, really well…You take people, or individuals, and then you force them to be part of the group and part of the team in order to survive in general. (Dierk)

According to Cantrell and Dean (2005), military relationships are unique because they demand a sense of community with everyone involved. As a team, they learned to live through extraordinary hardships; they cared that everyone made it through based on the most basic human need—the need to survive. "In the most primal of ways you came to know another soldier's character. You did this through shared hardships of the gravest of natures" (Cantrell & Dean, 2005). Evaluating this experience under the lens of Schlossberg's *moving in* phase, the participants did not

find the experience to be particularly difficult based on the *situational* factors of a supportive community with others sharing the same experiences combined with the high level of structure to which they were exposed. It is also possible the participants felt a certain level of perceived control in their situation, as they would have a choice to re-enlist after fulfilling their current enlistment, perceiving the situation as temporary. Under the lens of the *self*, the participants were at a stage where they were young and eager to begin the new journey into the military, which may have also provided them with the necessary assets to successfully manage the transition.

The Downside of Structure and Unity: The Battle with New Found Independence

The structure and solidarity upon which the military is founded and heavily reliant resulted in an enormous dependence that was deep-rooted in the service members. The structure and support of this survival community resulted in one of the most painful aspects of coming home from war and transitioning into becoming a civilian—leaving the units in which they served. The communities they were forced to create for themselves with blood, sweat, and tears were suddenly abandoned (Cantrell & Dean, 2005). The result was a transitional experience reported to be much more difficult and stressful than when becoming a service member.

This concept of dependency on the structure and support of the military was a major development under Theme I, which triggering feelings of loneliness for the participants. The participants did not perceive the military-civilian transition to be a positive experience as they transitioned out of their enlistment and began to *move in*

to becoming a civilian again. The choice to leave active duty and become a college student was a complicated endeavor for most of the participants. According to Hoge (2010) the transition from military service to civilian life can be one of the most challenging encountered by any individual. For these participants, this transformative process was compounded by the realization of acquired service-related disabilities. This realization presented the participants with challenges, successes, a new identity, and self-awareness.

The experience of transitioning out of the military into the role of civilian college student caused the student veterans to undergo a process of continual self-redefinition. This was the initiation point of the transition cycle for the participants. Throughout this process, they were constantly forced into situations where they had to adopt new identities. The self-redefinition process was triggered when the student veterans left a highly-structured environment with clearly defined hierarchical jobs, delineated by a distinct ranking system. In this system, they were surrounded by fellow service members who were trained to rely and support one another for survival. Upon exiting the military, this highly structured, hierarchical support system was removed. This abruptly left the student veterans struggling to redefine who they were as they attempted to survive and adapt back into a life and role they had long-since evolved from. This process resulted in the participants being forced to improvise how to survive on their own, how to support themselves or their families, how to structure their time, or how to function as adults in a world they were no longer programmed to fit into.

Simultaneously, the student veterans were also learning how to adapt and function with new limitations and imposed social stigmas focused around being a service member or having PTSD. The impact of social stigmas compounded with the experienced transition was enough to create an identity crisis for the participants. The resulting identities developed during this process varied from being "the isolated guy," "the depressed guy," or "the socially awkward individual," to the "asshole," or "hermit".

For Dierk, the idea of going through the military to civilian transition was more difficult than anything he had experienced.

> That transition is probably so much more difficult than the initial training of going to Basic [training], or going to AIT [Advanced Individual Training], or going to war. Honestly, I would rather go back to Afghanistan and do a 2 or 3-year deployment than transition out of the military again. That's how rough and strange, that's how bad it was.

The preference to return to a war-zone over transitioning out of the military was a response echoed by over half of the participants. Kyle similarly felt that the idea of going back into a combat-zone, even though he had family that depended upon him, was more appealing than the struggle to transition to civilian life.

> Both times, I chose to go to Iraq. I liked it. I know I have kids, but if I could go back, I would.

Russell described his personal struggle during the process of adapting to the civilian life and his disability.

That was probably one of the hardest things I have ever gone through

personally. That was tough, and I didn't expect it to happen the way it did…

The military was all I knew, I went in at 18 years old…I don't consider myself

an adult when I went in. I was still a kid…You needed a home, they gave you

a home. You needed food, they gave you food. They even told you what to

do…I was pounded with structure and discipline. I loved the military and that

was it. I was a marine and that's all I ever wanted to be… All of a sudden, in a

blink of an eye, you've got to be a civilian. You've got to get a job and go into

real life. Now, after going from disciplined, structured…11 years of life of

knowing nothing but that as an adult…I had to do things on my own and then

I was now responsible for me and nobody else was going to help me out.

(Russell)

For Russell, he also felt that his development into adulthood was limited by his

experience in the military because he was not able to function as an independent adult

outside of the military's structure he had become accustomed to. Russell had entered

the military at 18 years old when peers his age were looking to gain their

independence striking out as adults, learning to function and navigate in society while

continuing their education or beginning their lives. Instead, Russell's training in the

military focused on removing that independence to create a highly functioning

member of an intricate team where all needs were cared for by the military. As a 30-

year-old man, he was left feeling less developed, in a functional aspect, than others

his age that had never been in the military. Additionally, the camaraderie that was

engrained as a necessity for survival became a massive chasm in his life stifling his ability to function.

The experience transitioning from the role of a service member to that of a civilian was reported as being extremely difficult. The participants had been trained to rely upon the high level of structure and support from one another in order to survive, but this support and structure was not available when transitioning back into the civilian role. The outcome was a huge void of support and community resulting in feelings of insecurity and a questioning of one's ability to function and survive.

Cantrell and Dean (2005) poetically summarized the impact of leaving a unit and community behind so abruptly: "What you had just seen and done with your comrades for those many long months could never be replaced in one's heart. When you leave it, it is like a tearing in your soul." Each participant reported the same struggle with the impact the lack of camaraderie and support had left behind. Dave echoed those feelings of being alone and paralyzed by the lack of peer support as a civilian, compared to that which he had grown accustomed to in the military.

> The biggest part was that I went from having 40 of my best friends, four or five doors down from my barracks room, to scattered all across the country…For four years, I had never been alone anywhere I went…for the most part I almost had my whole platoon with me everywhere…it was kind of like separation anxiety, I didn't know anybody. I was alone. That wasn't easy.

Giovanni had a unique transitional experience that demonstrated the contrasting results of making the civilian transition with the support of others who understood

and related to him to the experience of going through the transition entirely alone. His example demonstrates how the collaborative and supportive structures were critical to his successful transition out of the military.

> The transition from military to civilian life for me was actually very good, and it's only because I had ... a couple of guys that I had gone to Iraq with the first time, they had [already] gotten out…they had already done all the work. They showed me how to fill out my [paperwork] to get my MGI (Montgomery GI Bill educational benefits). When I got out, I had friends waiting for me and we moved in together. On the weekends we'd go out and hang out. It was actually a really good experience…having my buddies there with me, doing the same thing together just like in the military; it really helped. I realized over the years when I started losing myself was when I didn't have that support, when I came back home, I didn't have my buddies anymore. I didn't have anybody else that could understand me. (Giovanni)

As Schlossberg, Waters and Goodman (1995) stated, during the *moving in* phase, an identity crisis can result if the transition proves to be difficult. According to the participants' experiences, this was the case. The participants had adapted and transitioned successfully into their role as a service member based on the camaraderie, support, high levels of structure, and a necessity for survival that is engrained in the military. When these same elements were abruptly withdrawn during their civilian transition, the participants struggled significantly.

Becoming "Disabled" and Battling Negative Self-Perception

The identity crisis the participants experienced during their transition out of the military was further compounded as the participants learned of their various disability diagnoses and struggled with related limitations. According to Schlossberg's *situation* component, the veterans were not only left without the structure and support they have been trained to rely upon, they also were left with a sense of a lack control over their personal situation. Their disability was a new condition that was viewed as permanent, negative, and a monumental stressor that would only continue to aggravate the transitional challenges. This recognition was the point that each participant experienced their identity crisis to varying degrees. Dierk's statement exemplifies the point during the *moving in* stage where his identity crisis began.

> I found out a couple months into my transition that I was disabled…When you initially hear that you're rated 90% disabled, it's a crushing blow to your self-esteem…You feel like, "That's it. I'm at 90% disabled. That means I'm 90% disabled for life," or "That's going to be my quality of life from here on out." It took a huge toll on my self-esteem.

Dave's statement highlights how his self-identity shifted due to the struggles he experienced due to post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI). He began to identify as feeling socially awkward and began acting hostile towards others.

> [I'm] constantly socially awkward, I take most public situations with a tactical outlook on how I assess crowds, buildings, people. Then, coupled with

traumatic brain injury, my memory is far less than what it used to be. Then

both of them together, I don't have a filter so I kind of stand out when I talk

because I don't hold anything back. Whatever is on my mind, it comes out of

my mouth before I even have a chance to catch it. So I come across as an

asshole or angry a lot of the time…I'm not really hostile towards people, but it

doesn't take me much to get there. (Dave)

Dave later indicated that feeling socially awkward was not productive and left him

feeling as though he had low self-worth. He attributed the readjustment counseling he

had received through the Veterans Centers as being an integral step in learning to

manage the feelings that were negatively impacting his self-esteem and self-worth.

Giovanni experienced similar reactions when struggling with PTSD as a

civilian, which resulted in developing depression and isolating himself from others.

Fortunately, with the support of family, he was never completely alone or in isolation.

I became a hermit for a little while. I didn't want to go anywhere or do

anything. I didn't like being around crowded areas or having people towards

my back. I felt unsafe. I didn't think anything was going to happen but I was

just so used to just watching my back all the time that I just felt awkward. I

guess I got pretty depressed...There was about a year where I just stayed

home, I didn't go anywhere, I didn't do anything, and I gained weight. I

literally was just a blob, and it was pretty sad. It was pretty depressing. Lucky

for me, I have an awesome family, and they helped me get through it. They

pretty much forced me to do this, or do that, and they'd always call to check

on me.

Giovanni's statement also clearly demonstrates his struggle as he constructed a new identity that was a result of his new disability. In his experience, he developed the identity of a "hermit", which resulted in him gaining weight where he identified as a "blob" while he struggled to manage the ways his PTSD impacted him.

Kyle also noted the extent that his life was emotionally impacted by his diagnosis of PTSD. He further explained how he developed an identity of a "runner" to escape situations where he struggled to manage his PTSD.

Things are a lot more serious now. I get really angry. Sometimes it hurts to smile. Before, I was more carefree. Now, everything's so much more serious…and I feel like there's always an ulterior motive going on somewhere, somehow… Like I have a backup plan for a backup plan. Even walking out of the house, every move.

The realization of having a disability had a profound negative impact on the participants' psychological resources.

Basically, I'm broken goods. I'm busted up. Not what I was when I entered the service or while I was at my peak when I was a section leader and doing what an infantryman is supposed to do. (Dave).

Russell emphasized his difficulty to identify himself as a disabled veteran. He emphasized how learning about his disability was extremely damaging to his self-perception.

My pride was built because of everything I had done before, when I was able

to, now I'm hurting. That definitely does eat at your pride. Just simple things

like not being able to sleep well at night. Let alone to not do everything else as

good as I used to—working, doing chores, being active and doing things that I

like to do. Now, it takes me three days to finish an eight-hour job. I just don't

want people to know that I have a disability. I don't want people to know that

I'm broken, that I'm half the man I used to be. (Russell)

Being a disabled person led the student veterans to feel that they were not self-

sufficient, independent individuals anymore, which damaged their sense of pride. For

Dierk, it was critical to persevere through his individual challenges in order to

maintain his individuality.

If I'm mentally and physically capable to do something on my own, there's no

need for me to go and seek help. Help isn't there just so you can constantly use

it. It's one of those things, like crying wolf. It's there if I need it, but I don't feel

like I need it, so I'm not going to use it.

Dierk elaborated on why he resisted asking others for help if he needed it and

indicated that asking for help was not a characteristic he possessed and was,

therefore, not considered an option.

That was never my role in the military. If you're going to be successful in the

military, you learn to cope or turn it around. Our training doesn't allow for it

(asking for help)…You rely on yourself and the people next to you, so you

have to adapt and overcome. There are so many lessons and values we learned

of selfless service and personal courage. It's all about maintaining and

upholding your own end…it's almost like asking for help is devaluing all those

values that you learned in the military.

The student veterans with disabilities also struggled with employment prospects as

their emerging new self-identities began to develop. The negative self-identities of

the "asshole," the "hermit," the "angry-guy," or the "runner" were viewed as a

liability when attempting to start a new life endeavor. Russell shared the identity

crisis he experienced just after learning his disability diagnosis as he struggled with

his employment search.

What job am I going to have and what's it going to require? Am I going to be

able to do it to the fullest extent because of these disabilities that I'm working

through now? Which we all know, they are only going to get worse with age.

How is it going to affect me? I want to work, I want to be a productive

member [of society]…That plays a big game with your head…To [not] be

able to do something that you used to do, that beats you down mentally...In

my mind, it breaks me down a little bit more every. The fact that one day I'm

going to have to realize that I cannot do the things that I used to do.

Russell's statement demonstrates how his perception regarding the *situation* and *self-*

aggravated his transitional challenges. These obstacles were viewed as being

permanent and negatively impacted his personal and psychological resources to

manage his disability and transition. This process expended a huge emotional toll as

the participants adapted to a newly-acquired disability.

Interestingly, some of the most primary PTSD responses veterans can exhibit were also indicated in the participant's description of their transition experiences, including depression, cynicism and distrust of government and authority, anger, alienation, isolation, sleep disturbances, poor concentration, tendency to react under stress with survival tactics, psychic or emotional numbing, negative self-image, memory impairment, and emotional constriction (Cantrell & Dean, 2005; Jelinek & Williams, 1987). Any of the aforementioned experiences could be cause for an identity crisis to develop while in the midst of a transition as described in the *moving in* phase of Schlossberg's Adult Transition Theory.

The Newly Disabled Self Navigating the College Classroom

Upon realizing and acknowledging their newly acquired disabilities, the student veterans began the next stage in the process of their transition where they were challenged to also learn how to be a college student. For student veterans with disabilities, the military-college transition was further compounded by struggling to adapt to a new disability. Five of the seven participants reported struggles adapting to their new disabilities as a significant obstacle in the educational environment. Kyle struggled with PTSD-related barriers that had a significantly negative impact on his ability to come to campus or even sit in class. It is common for veterans diagnosed with PTSD to find that even the thought of being in a crowded or tightly-confined area can a trigger high levels of anxiety.

When I first started [college] I would go touch the door handle and then leave.

[Other times] I would go get my parking ticket, have it printed and put in my

window, and before I'd even get out of the truck, I'd start it, back up, see

   somebody and just give it to them and leave. [I'd] go to the beach, or go clear

   my head somewhere. (Kyle)

Russell also emphasized his deep frustration and struggle to adjust to the college

classroom, which he perceived as a place with no structure or order, surrounded by

immature classmates.

   I'm in a setting where there's no structure, or at least not what I thought there

   would be, because I'm so used to the military lifestyle. I'm seeing the kids

   talking, doing what they want, coming in when they want and leaving when

   they want…Being rude, interrupting, acting a fool, playing with their phones

   and stuff like that. It affects me because that takes away from my learning

   experience. Because…of that hyper vigilance I'm always paying attention to

   everything around me. I hear you click, click, click, click, click over here and I

   hear, "Psss, psss, psss," over here, it's enough to get me a little bit riled up, to

   get the blood pumping…Then because of that [distraction], I have to go back

   and read again… I have to ask more questions…and I have to do all that extra

   work just because they're distracting me for a couple of minutes.

Kyle viewed his disability as the reason he was delayed in progressing through

college as quickly as he would like to. Interestingly, he is also the participant who

still remained at the *moving in* stage of his transition.

   Like I said, I've been in community colleges for eight years now with no

   degree. I'm about halfway through at this point. I have another year and a

semester to go. I can show up, but sometimes, I'm not mentally here, and

sometimes, I physically can't show up. I can't walk through the door. I can't sit

in that classroom because there's something inside of me saying "get out, just

don't do it, don't give in"…I just can't sit down in that chair and pay attention

to someone, especially if I'm not feeling that professor. It makes it really hard.

(Kyle)

Giovanni, who had progressed to the stage of *moving through* in his own transition,

summarized his experience struggling with his disabilities in the educational setting

and how he had come to understand what his particular limitations were. Further, he

discussed how he learned to control and manage those challenges.

When I sit in the classroom, I sit away from the door. I sit as far from doors as

possible, at the very end or at the very back because I don't like people on my

six [behind him]. I know why I do it now; it's being hyper vigilant. I'm always

thinking: if somebody comes into that door and starts shooting people or

whatever, this is what I can do. It's weird. It's automatic. It just happens. Also,

when I read and study, my mind wanders and I have to read every sentence

like two or three times, which doesn't seem like a big deal but reading a forty-

page chapter, that's a lot of time… I'm also pretty stressed out and…I get

palpitations. I get panic attacks. I feel like I get shortness of breath sometimes.

When you add that to test anxiety and all those other things…it gets very

stressful.

In spite of the struggle to navigate the new college environment, the student veterans with disabilities found their educational benefits as an instrument for self-redefinition and personal growth. Dierk noted that attending college ultimately led him to the realization that education was his opportunity to gain more skills and opportunities.

> After getting out and realizing how much of a failure I was in high school…I wanted to go back and do that again and I found out I actually really, really enjoyed it. So I wanted to get back and try to finish, or do something with my education.

Dierk's experience demonstrates how education became a turning point in the transition and identity development of the student veterans with disabilities. The majority of participants (six out of seven) conveyed this same opinion. Education became a tool for the participants' self-redefinition, and they viewed the pursuit of their college education as a pathway to find employment opportunities.

> I know that I'm way more valuable than what I was experiencing. That's what made me want to come back to school, because I'm going to make myself even more valuable and show everybody what I'm worth. The way I'm going to do that is by getting a great education…I want to be as good as I can be in the civilian world, as I was in the military world. (Russell)

For Russell, his educational benefits provided him with the opportunities that shifted his *situation* away from being perceived as a negative and permanent one. The result eased his impending identity crisis resulting in a progression through his transition experience.

Dave learned to adapt and apply the skills and the "mission" mindset taught in the military to his new role as a student in order to persist in college.

> There's no room for failure in the Marine Corps, especially infantry. So there really should be no room for failure here. I've made it through harder, more demanding situations with minimal resources and a hellish environment. There's no reason that I can't complete a mission here, given all the resources in a comfortable, relaxed environment. If I fail here, I fail because I failed, not because somebody else set me up for failure. I did not come back to school to fail. (Dave)

Dave's statement also features his pride and desire for continued resilience that began to demonstrate an additional area of concern.

Disability Disclosure and Social Stigma as Part of College Life

The opportunity to receive services from the Disability Resource Center on campus could potentially assist the participants with their educational pursuits. However, when it came to disclosing their disability status in order to receive services, the veterans had a variety of experiences that contributed to their decision to disclose or not disclose.

> To me, it was like I don't want people to know that I have a disability. I don't want people to know that I'm broken, that I'm half the man I used to be…and if I go and identify with them, then everybody knows I'm disabled. Nobody wants to identify for services…I wanted that sense of independence…I didn't want to have to rely on anybody else's help or something like that. But at the

same time…you just realize, I may need this some time. So I identified in case

I ever need to use it for any reason, then I'll use it. (Russell)

Russell's experience demonstrates a consistent sentiment among participants. The

issue of pride and confidentiality was an important, central consideration for not

wanting to disclose their disability. This pride factor could also be considered a

hindrance in the area of the *self* as the participant may neglect the receipt of services

that could assist in both disability and transition management.

Dierk expressed a similar resistance to self-identify with the Disability

Resource Center out of a desire to be more resilient.

I'm listed as disabled but I do not want to use that as a crutch...I don't want to

lean on that too much…because I don't want it to be a permanent thing.

The resistance to self-identify was also a limitation in seeking services from the

Veterans Resource Center.

The VRC seems to have a stigma to new veterans. Maybe veterans had a bad

experience with…the military…and they think they might be stepping back

into that when they're coming in here. (Dave)

Russell further elaborated on how trust, was a factor that all participants cited as a

factor in feeling comfortable to disclose his disability.

When it comes to the surrounding school and the people around us…I don't

know them. They were never in the military…It's going to take me a long time

to build that trust…As hard as it is for us to talk to people, it's even harder to

talk to somebody that doesn't know or hasn't been through what we've been

through.

Dierk, who was determined by the researcher to be located at the very initiation of the *moving through* stage, agreed with this sentiment and elaborated further.

> Veteran culture is very picky about who we're going to let help us. There's a lot of pride there and getting help in general is a hit to the ego and self-esteem. I don't know how to overcome that except to have somebody that actually has been there and done that, is using it, and can actually vouch for it on the veterans' side. (Dierk)

For Dave, his experiences and survival in combat had created a sense of self-preservation and pride. This, however, was in contrast to his role as a veteran with a disability who may have to ask for help or rely on the assistance of others to survive as a civilian. His statement highlights the struggle and shame recited by six of the seven participants and experienced while struggling to find self-acceptance.

> I had this stupid, "I've been to Iraq," kind of war mentality. I'm ten-foot tall, bulletproof, and I don't need help. I made it there and made it back, twice. I made it through a lot of really shitty situations…Even though I was out (of the military), I didn't want to acknowledge that I was broken goods. I was busted up.

The veteran students' difficulty to embrace their disability and self-identify at the DRC was also directly tied to stigmas around PTSD. This was another consistent theme that had a limiting impact on the *situation*. The experience with PTSD stigmas developed into a severe stressor that exasperated the already difficult transition

experiences for every one of the participants.

> People start automatically assuming that I have PTSD when I mention I was
> in the military and that I deployed … and then they'll ask you, "Are you all
> right up there?" pointing to their heads. (Dierk)

Giovanni had a similar experience with social stigma and rejection as others treated him differently because of his PTSD.

> When you tell somebody ... you're a veteran, it's fine. But when it comes up
> that I have PTSD, I can sense a little, "take-a-step-back-real-quick" reaction.

Dave experienced similar stigmas when others learned he had served in the military and had served in Iraq.

> Some people just know me as "the guy that went to Iraq"… People who don't
> have any understanding of PTSD, TBI, or my experiences seem to think I'm
> ready to pop at any time, so they kind of take that "kid glove" approach.

Russell acknowledged his PTSD and also commented on the stigma attached to the PTSD label.

> PTSD is such a vague thing. People think PTSD, "Oh, he's going to snap." Or,
> "He's having a flashback."

Cantrell and Dean (2005) agreed with the participants' in their statement that the very first aspect of PTSD that requires understanding is that it is a normal reaction to the extreme stress encountered during wartime experiences. PTSD occurs when a person has experienced, witnessed, or has been confronted with a traumatic event which involved actual or threatened death or serious physical injury to themselves or others.

Veterans are not the only people who experience PTSD, yet the social perception and stigma surrounding PTSD in veterans was a significant barrier for the student veterans with disabilities. This negative social reaction and lack of understanding further reinforced the participants' negative self-perceptions experienced on their personal journey. For some of the veterans, the PTSD stigma also originated from their families who expected the veterans to quickly revert back to their pre-military-service selves and blamed the PTSD diagnosis when this did not occur. This lack of PTSD awareness also impacted the veterans' choice to not seeking help from others, widening the gap of isolation for the veterans with disabilities.

> The thing that really stood out… while I was going through all the stereotypical [reintegration] things, was that everybody around me expected it. They either, A. just backed off or, B. kind of threw it my face. It sucks when you come home and …everybody thinks you're the same, but knows you're different and then to have it thrown into your face… and just get told, "You're fucked up." (Dierk)

Dierk went on to further discuss his frustration with the contradiction of responses and support received from others.

> Right off the bat they hear you're a veteran, they say "thank you"…and then [when you] mention that you have a disability then you have to fight back against those stereotypes…It's either we're these glorious heroes one second, or we're these PTSD-riddled, suicidal, gun-loving monsters.

Dave rationalized the veteran and PTSD stereotype originates with an image that is

projected in the media.

> I think people have a Hollywood image of us in their head…We're not what
> Hollywood portrays, like the burned-out Nam vet. We don't stand around and
> have flashbacks all day long. (Dave)

Dave also provided some candid insight into the realities of PTSD in an attempt to
dispel the stereotypical image of the veteran "snapping" and becoming violent.

> Someone with PTSD is far more likely to hurt themselves than they are those
> around them. Just having PTSD doesn't make you violent…We may be dented
> and banged up a bit, but we're not broken…Only in some ways does it make
> me different than you. (Dave)

Russell shared that it was this same PTSD stigma that was a contributing factor in
hesitating to disclose his disability at the college for services.

> It's the fear of everybody finding out. I don't want people to look at me weird.
> I don't want people to look at me and, "Oh, watch out. Be careful." Because
> that's the stigma. That's the whole conversation that has come about within a
> lot of us vets is, "The Stigma". That, "Oh, they're here. They're crazy"…
> Yeah, I may have PTSD, but that doesn't mean I'm going to snap. I don't want
> people to think that.

After experiencing their own internal struggles, the veterans realized the importance
of being proactive in their responses to the PTSD stigma they have been labeled with.

> I think being open about it and forthcoming with it helps give people a better
> understanding…people that don't understand PTSD tend to look at us… as

damaged goods. Or that we're a ticking time bomb, ready to blow up. Or we're

going to go shoot up the school or whatever. So let them see what people with

PTSD, students with PTSD, are actually like. (Dave)

In summary of the first theme, the student veterans with disabilities underwent a

significant and disruptive personal journey. The participants experienced the

development of new roles and identities while simultaneously struggling to manage

their newly disabled-self. Compounding the situation, they also grappled with a

negative self-perception that was further reinforced and perpetuated by interactions

with fearful others.

As the participants entered the military and underwent their first identity

transition, their identities were reconstructed to that of a service member who was

dependent upon their fellow service members while functioning in a high order of

discipline and extremely structured environments. As their service ended and the

participants re-entered civilian life, they struggled to leave their military-oriented

identity. During this process, each participant underwent a negative self-perception

developed from viewing themselves as a disabled, non-functional, inadequate person

in society. The negative self-perception resulted in a tremendous internal conflict

causing depression, isolation, lack of life purpose or focus, and strained interpersonal

relationships. This progression eventually led the participants to the recognition and

understanding that education was the vehicle that could dispel this negative self-

perception and create the opportunity to re-create their identity.

Theme II. Moving Through: Building Communities and Overcoming Adversities

As the participants began to adjust to their new roles and identities as civilians and college students with disabilities, a new phase emerged presenting the strength and resiliency of this population. In order to continue on their educational and personal journeys, the participants were forced to develop and forge new systems and strategies essential to carry on.

The second stage of Schlossberg's Adult Transition Theory, *moving through*, and the remaining two Ss of the 4S System, *support* and *strategies,* were utilized to understand Theme II. *Support* encompasses the personal relationships and systems (e.g., family, friends, institutions) and options (which can be actual, perceived, utilized, or created) available in the individual's environment (Schiavone & Gentry, 2014). These factors can assist an individual navigate a transition (Wheeler, 2012). In regards to areas of *support*, questions include: are the supportive relationships positive or negative, helpful, or obstructionist (Pellegrino & Hoggan, 2015)?

Strategies refer to the coping mechanisms an individual may access to traverse a transition (Schlossberg et al., 1989) these mechanisms can include decision making skills, self-advocacy, and stress management (Wheeler, 2012). Coping strategies are a critical component which can facilitate change, reassessment, or reduced anxiety during transition (Schlossberg, 2011). Schlossberg describes *strategies* as the final factor, taken after the individual assesses the transition and gains control over the process (Wheeler, 2012). This step relates closely to motivation as it involves a plan for coping with and accepting the transition (Schlossberg, 2011).

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Because transitions can upset the balance of one's entire life and require new patterns of behavior (Schlossberg, 1984), understanding where veterans are in their transitions and what coping factors they have will help community colleges best serve this population (Wheeler, 2012). What strategy(s) has the individual developed? How are they being implemented (Schlossberg, 2011; Pellegrino & Hoggan, 2015; Wheeler, 2012)?

Goodman et al. (1997) suggested, "moving through a transition requires letting go of aspects of self, letting go of former roles, and learning new roles" (p. 23). *Moving through* begins when the new environment is understood and the person making the transition has learned to balance the demands of the new environment with his or her life (Wheeler, 2012). Critical to the participants' *moving through* stage was the development of strategies to navigate their new reality and new identities. These strategies included 1) creating and participating in a new community at the college through which they could build a sense of trust and support; 2) expanding their communities to include others; and 3) finding a way to continue their service to others. The components of *strategies* and *support* were essential to the participants' successful transition and necessary adaptation required to overcome their obstacles and challenges. The insight provided by the participants highlights the critical nature and indispensable value of community support and continued service that aided this process.

The VRC as a Trusting Community: Recovering Trust and Self-Value

The Veterans Resource Center (VRC) provided the student veterans with a variety of services that assisted them in being successful in their educational pursuits while also providing additional support for their medical and veteran-related service needs. The campus support services included access to priority registration on campus, peer tutoring, a quiet place to study, free printing services, peer support, a relaxation room, computer stations, laptops, and graphing calculators that could be checked-out for the veterans' use. Additionally, the college collaborated and connected with outside veterans' services such as the VA mobile unit, VA health care practitioners, readjustment counselors, and the local Veterans Service Officer who visited the campus monthly. This collaboration assisted the student veterans in processing their various medical requests, evaluations, and claims; provided immediate access to trained counselors; assistance in setting doctor appointments and refilling necessary prescriptions; and provided assistance in processing the veterans' educational benefits.

Outside of the services provided, the necessity for a community was paramount. Upon entering the military, an individual was molded and shaped to work as part of a team in order to achieve a mission, which the participants commonly referred to as being "mission forward". Cantrell and Dean (2005) recognized how a familiar community on the home front taps into a basic survival tactic that was forged in the military. This community is one that can be beneficial and crucial to a veteran finding the strength to persevere through the transition struggle and to survive as a

civilian and a college student.

> When one spends months or years with fellow combatants engaging in wartime activities we inherently become part of a working community. Not merely a "group"—but a community made up of tried and true partners of survival who have the best interests of the other members in mind…The responsibility for survival of self, and the welfare of those he is fighting with, contributes most to a soldier's motivation to continue in the fight (Cantrell & Dean, 2005, p. 115).

During the interviews, the participants spoke poignantly about the bonds that were constructed in the military as they worked "mission forward" together. This interdependency was suddenly stripped when the individual exited the military and enrolled at the college, discovering that their success and survival was in their hands alone. Participants stated that the VRC provided shelter from the chaos experienced during their transition with others who innately understood, providing support as they developed their new identities. A resounding number of the participants expressed they felt more comfortable and at ease around fellow veterans. For this reason, the camaraderie achieved in the VRC was essential in easing the transition and identity development of the veterans.

> I work at the VRC as a work-study…[beyond that] I'm not very socially active on campus, we [veterans] kind of stick to ourselves. The most participation I have on campus is group projects that are required for any classes. Other than that, I come here to get my education, and I go home. (Dave)

For Giovanni, this feeling of camaraderie was central to the Veterans Resource

Center support, a notion that was repeated among six of the seven participants.

> That's the only thing that actually made [the transition] easier…Immediately, I
>
> just felt like this weight was off my shoulders…It just feels like family. Even
>
> if we don't really know each other…We could talk and not worry about
>
> insulting anybody. It feels good. (Giovanni)

Giovanni likened the new VRC community to that of a family where he felt safe and

comfortable enough to relax and be himself. Dierk also elaborated on the value he

placed on his experience at the Veterans Resource Center and what it meant to him.

> I just needed that place. I needed that place probably more than that place
>
> needed me because that was essentially my living room. That was where I got
>
> all my social activities and I'd go hang out with my friends and socialize with
>
> them.

For both Giovanni and Dierk, the VRC represented a place where they could safely

be social with others who related and inherently understood their experience. The

veterans had created and established a sub-community at the college with a familiar

culture similar to that found in the military. This sub-community was also a place

where new experiences with fellow veterans could be created and supported.

> According to DiRamio and Jarvis (2011), "Upon returning to civilian life and
>
> for many, a college campus, the interdependency and cohesiveness created and
>
> nurtured in the military unit remains key for student veterans" (p. 20). For this reason,
>
> the social involvement and interaction with their veteran-peers in the VRC, was

central for survival and in assisting the student veterans with disabilities to begin to recover their self-value. Without this cohesion, the transition experience was further complicated and difficult for the service members, in turn increasing the identity conflict already experienced. Cantrell and Dean (2005) assert that a support group of peers provides an indispensable opportunity to share their experiences and reactions with each other. This support group assists veterans in realizing that many people would have done the same thing and/or felt the same emotions in similar circumstances. This ultimately, "helps the individual realize that he is not uniquely unworthy or guilty—and he or she is not alone. This can give an individual the opportunity to re-frame many things and possibly gain a more positive sense about themselves" (p. 55).

Trust as a tool for survival. When evaluating the specific conditions that were crucial to the foundation of peer support, a number of factors emerged to clarify the significance of this support during their transition. One of the essential components of the VRC cited by each participant was trust. Cantrell and Dean (2005) summarized the degree of trust veterans experience with one another as relationships formed on the commitment that one would be willing to lay down their life for another, resulting in the shared emotions of terror, vulnerability, hope, love and despair. Dierk's statement regarding the importance of trust within the military community reiterates this same notion.

Socially, I define PTSD as not being able to relate to anybody outside of the veterans' circle because they can't relate to anything you've gone through. It's

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a really hard thing to trust people and actually let people in…The support

group…your brothers-in-arms, your sisters-in-arms…You have to give them

absolute trust because your life depends on it; their life depends on it, and if

you mess up or they mess up…the consequences are catastrophic.

Russell echoed this notion on the strength of the trust he felt with the other veterans

outweighing the trust he felt with some members of his own family.

When it comes to trust...There's family members I wouldn't say anything to. I

speak more to my brethren here. They know more personal things about me

than some of my own family…it's so much easier for veterans to go into

something like, "Where are you at? What did you do? Where did you deploy

to? Oh cool"…You are already building trust, because you already know what

they've been through and you know what they'll do for you.

Russell elaborated further on how trust was the integral factor facilitating the sense of

community with fellow veterans.

Our trust factor doesn't come from, "Oh, we grew up [and spent] our whole

lives together." Our trust comes from, "I put my life in your hands and you put

yours in mine." We've done that. We've been there. We literally would have

died for each other. That's the trust level that we're at.

This factor of trust with their peer-veterans contributed to the foundation of support

and community the veterans struggled to reestablish. The result was a comforting

familiarity that guided the participants back to the confidence and strength necessary

vital to function and survive in a civilian environment.

Peer Support. "No man left behind" is a value that is strictly abided by throughout the United States military. It summarizes the military's unity and dedication to ensuring each individual will return home at all costs. This value spans across all the branches of service and is ingrained during basic training. It is a trust and a confidence that those who were in the military seemed to innately understand and continue to carry forward. The student veterans with disabilities were adamant that the Veterans Resource Center and the camaraderie established there was a fundamental aspect of their successful transition into the college as well as their success experienced at the college.

> It gave me a place to study, [I could] go to the library and be left alone but as far as having a social life, which was non-existent up to that point, it gave me that. Just being able to hang out there with the guys [and] bullshit, I needed that. Having a place that's available where you can actually hang out with people of a like-mind is awesome. (Dierk)

When Clark, who was only able to participate in the interview, was asked what his biggest sources of support were at the college, he stated it was his fellow veterans. The first day Clark arrived on campus, he experienced a great deal of frustration when attempting to locate services and assistance to enroll and access his educational benefits. He was introduced to a VA work-study, Sam, who assisted him with finding services on campus and introduced him to the VRC. From that day forward, Clark continued to seek assistance at the VRC which ultimately helped to evolve him into the *moving through* stage which assisted him to persist at the college.

If I didn't get the help from Sam that first day, and the Veteran's Resource

Center, I think I would've gave [*sic.*] up. I think I would've just been out of

here.

This theme of social involvement and peer assistance amongst the student veterans

was central to the core success of the Veterans Resource Center. The purpose and

value of this peer support was a sharing and remembering of the military culture that

were embedded into who these individuals still are. Dave explained the camaraderie

of being rooted in a similar life view was an engrained understanding that regardless

of the branch of military, the duty station, or occupation, a shared military and

worldly experience had deeply impacted the veterans.

I'm around people who understand me. We have the same humor…It's a place

of open debate and open conversation…We share and relate to each other's

experiences. Not just combat military experiences, but the way we look at life

is pretty similar. Having the Veterans Resource Center gives us a place to

express ourselves without fear of offending other people…It definitely builds

camaraderie. (Dave)

This matured, world-wise understanding was something the majority of civilians had

never experienced and could not relate to or fully comprehend. The VRC became a

location where a veteran culture, complete with a common language and perspective,

was utilized and understood without offending others. This was a place where an

inherent, unspoken comprehension of the experiences and wounds left behind, united

and created a therapeutic group setting for nearly every participant. Only one

participant, Kyle, who was still struggling in the *moving in* stage of his transition, preferred not to participate in the VRC.

Outside Support: Beyond the Veterans' Community

For the student veterans with disabilities the component of *support* was critical for a successful transition experience. For the purposes of this study, *support* is defined as the strength found within their communities. As the participants settled into their new roles and began to stabilize, they began to find additional areas of support. These extended communities are further broken down into subcategories of college, family, and veteran communities.

At the college, the support the veterans received from instructors and staff was another integral factor in building a broader sense of community for the veterans. Jan (a pseudonym), the administrator who was integral in developing the Veterans Resource Center at the college, was also the administrator over the Disability Resource Center. Her role as a champion for the veterans and her genuine regard for their well-being was mentioned by the participants in almost every interview.

> When I was enrolled here, I was introduced to Jan. She welcomed me with open arms, took me around, introduced me to the students that were here at the time... and told me about the services offered and available through the VRC, as well as the Disability Resource Center… Jan asked me if I was comfortable talking about my disability…and I explained to her what was going on. She made me aware of the services and once it was documented, I was a student with the DRC… I've been there ever since. (Dave)

The veterans who had chosen to identify with the Disability Resource Center all cited this administrator, Jan, as being the champion and driving force behind the support and their decision to self-identify for disability services.

> I ended up meeting Jan, our Dean for the DRC, who was deeply rooted into veteran life and making the transition easier for veteran students…She was super happy to meet me, which was a beautiful thing because she made me feel more comfortable…I instantly had that feeling of a sense of belonging…She made that transition so much easier for me... In a place where I was lost and confused, and the fear of the unknown was still lingering, she took that away. (Russell)

Giovanni also shared the impact Jan had by simply taking the time to understand him. His statement demonstrates how this person rose to the occasion in handling a situation in a timely and efficient manner. Similar to operations and handlings in the military, someone was there to have "their six" without delay. The result was a level of trust that was essential to Giovanni feeling supported at the college.

> Besides the VRC, it was Jan who helped me out. A few years ago, I came to her with a problem and she just took charge and handled it. I wasn't used to that [at the college]. When she did that, I knew that there were people out there that cared and weren't just like, "Oh, this guy's got PTSD or whatever." It was genuine. She wasn't get [*sic.*] anything out of it, she just was doing that out of the goodness of her heart. Aside from VRC, one of the most positive things was the support I got from Jan. (Giovanni)

The veterans also cited instructors who were available, approachable, and supportive of the unique experiences and insight the veterans brought to the classroom. These characteristics led the participants to feel valued and had a significant influence on creating a veteran-friendly atmosphere at the college. Support from their instructors also assisted in easing the transitional experience and fostered a more positive self-identity for the student veterans with disabilities.

> I would say 90% of the instructors I've had here have been phenomenal…Having instructors that are approachable, motivated, want to help and see their students succeed… by going above and beyond for them…Not just me, but any of their students…it made that transition super smooth…They all seemed to have special places in their hearts for vets. (Dave)

For the student veterans with disabilities, the support they received from their families was also instrumental to persevering through their obstacles.

> Even though my mom wasn't the most financially [able] person, she helped me out by just believing in me. I would say my sister and my mother are the two that had been the absolute biggest supporters of me transitioning. (Dierk)

Giovanni described his difficult time transitioning and the support his family provided during a critical stage of his transition.

> They pretty much forced me to do this or do that and they'd always call me and check on me. My then-girlfriend, my wife now, she never gave up on me. I look back and that is why I love her so much, because if she can stick with

me through that when I was not making any money, not doing anything,

stagnant, I was just a horrible waste of space…if she could help me through

that and understand me, then that's all I need.

The support and realization that there were civilians and family who could fill the

vacant role of someone "having their six" fostered a deep connection and bond

reminiscent of those experienced in the military. These bonds were essential for the

participants' continued success on the military-college transition.

As the student veterans transitioned into their new roles as a civilian and a

college student, they found ways to balance their new roles and identities. This

balance aided the participants' capacities and resources to effectively traverse the

expectations placed on them as college students. As the student veterans with

disabilities found the support in the VRC and DRC, they began to re-establish their

unit and grow their community. This growth in their communities incorporated ways

to assist previous and future generations of veterans, civilian college students, and

their community at large.

Carving Out Their New Units: Growing Their Communities

This study discovered that as the veterans progressed through their transition

and identity re-development, a comfort with and acceptance of civilians gradually

increased. As this gradual ease of self-awareness and increased capacity of co-

existence with civilians began to expand, the veterans also began to expand their

"mission forward" mindset to include a broadened team-perspective that included

civilians.

Along with this expanded unit mentality, a new development occurred: a desire for continued service within their new communities. When Russell realized his desire for continued service he found himself at his local Veterans of Foreign Wars (VFW) chapter, as did three of the other participants. This led him to discover a powerful and therapeutic method of managing the stress of his transition and provided him with an ability to control the problems he was experiencing.

> To help people, it's an innate thing inside of veterans. We want to help…We joined the service to do our duty for our country. I still feel the same way, just in a different form now… The VFW, that's my therapy, helping out with the community. (Russell)

The VFW provided Russell with opportunities to serve in his local neighborhood and broadened community in a way that permitted him to be productive, utilize his wealth of skills and knowledge, and feel the familiarity of camaraderie again. This realization provided him with the evidence that he continued to possess personal value and was able to still be of service to others; both of which were reminiscent of the values constructed in the military. All participants, who had advanced past the *moving in* stage of transition, echoed these ideals of continued selfless service as a source of healing. Russell's statements and suggestions summarized the participants' desires to give back to those who surround them in their communities.

The civilian-peer connection. Peer tutoring was viewed as another facet of community building and camaraderie beyond the boundaries of the student veteran community. As the veterans developed their new identities and felt stabilized in their

transition, the civilian students began to notice their dedication, leadership, and success in their shared courses. This success also gained recognition from some of their civilian-peers who gravitated to the participants as sources or examples to emulate—students who were successful, reliable and knowledgeable.

> I've had plenty of students that I still collaborate with from time to time. They call me up because they realize the veterans are the guys you want to go to. I've been told, "Whenever I need something, I go to you guys."…If they have a question, they come to us. I'm the go-to guy in both my chemistry class and my math class. They always ask me, "do you have this?"…"Yeah, I can help you out. I understand this." (Russell)

This recognition from civilian-peers also inspired a dormant value remaining from military service, that "no one is left behind". Participants suggested that they would like to serve other college students through scholarship workshops. The participants' military training had trained the service members to pay attention to detail and follow rules and orders explicitly. When the campus' scholarship application period was open, the veterans in the VRC met to review the criteria and worked together to complete the necessary application materials as a group. This attention to detail resulted in the veterans taking home more in scholarships that any other students on campus. Their desire to serve in their communities also developed into a desire to hold campus-wide scholarship workshops to assist all students in the process in applying for scholarships.

> After we swept up at the scholarships this guy called me "the Broom". Once I

figured out how to do it, I was like "I want to share this with the world. I want

to share this with everybody."…A scholarship is an investment in education…

we can do a workshop for any student to say "hey, let's get you some money

for your education, help you with your books, and your tuition." (Russell)

The participants experienced an ease in their transition as they discovered ways to

grow their communities and uncovered new ways to be of service to others. As a

result, they were able to experience the camaraderie and self-value within their new,

growing communities that had been absent since their departure from the military.

The Healing Power of Helping Others: Altruism as a Source of Self-

Reconstruction

When the participants were asked about the social impact of the Veterans

Resource Center and Veterans Club, another social theme began to emerge for the six

participants who were in the *moving through* or the *moving out* stage of their

transition. In the semester prior to the research interviews, the participants had been

involved with a local community fundraising event that raised money for the local

women's shelter within the community. The value and impact the veterans

experienced while giving back to their community was quite profound and

highlighted the expansion and adaptation of their service to others. For Russell, the

Walk a Mile in Her Shoes fundraising event was also an opportunity to spread

awareness about veterans and dispel any stigmas that may exist.

That [fundraiser] showed a lot of people, not only veterans, not only the

school community, but the community as a whole… "These guys, they're just

hanging out. They're just doing their own thing and helping somebody out.

That's what they do. Maybe they're not all as crazy as we thought they were." Schlossberg's 4S System includes the use of *strategies* to manage transitions through one's own behaviors. There are three categories of coping responses: modifying the situation, controlling the meaning of the problem, and managing stress after the transition (Evans et al., 2010; Griffin & Gilbert, 2015). The social stigmas surrounding mental health concerns were a strong and reoccurring barrier for the participants, which resulted in their attempt to modify the situation by controlling the meaning of the problem. Specifically, the participants demonstrated a strong motivation to disprove the social stigmas surrounding PTSD or what it means to be a veteran and establish a new definition of what it means to be a disabled veteran by providing concrete situations and demonstrations that could disprove the social stigmas.

The concrete demonstrations manifested in a community service event which provided the student veterans with another opportunity to serve and help others in need—others whose very survival could depend on the assistance received through the fundraiser. Steven clarified this as a merging and melding of the military and civilian worlds.

The first thing you learn, from day one … you never leave anyone behind.

You always go back for them. Our battlefield has just shifted.

Steven, who was only rated at 20% disabled, did not struggle as significantly as he progressed to the *moving out* stage, but he still cited the same struggles as the other

participants, Steven compared the camaraderie experienced in the VRC to the training and fundamental code of "no man left behind." He interpreted and expanded this code to incorporate his desire of continued service to his broadening community of other students and the community at large.

Participation in the event evolved into a significant opportunity for the student veterans with disabilities to demonstrate they were not dangerous people to fear and instead, provided evidence and proof they are compassionate and smart leaders and servants in their communities. When the veterans were asked about the importance of spreading this awareness, it was resoundingly viewed as a fundamental step in fighting the social stigmas attached to what it means to be a veteran or to have PTSD. Spreading awareness became the opportunity to prove their disabilities did not define or constrict their value within their communities.

> In my nursing class, we did a presentation on the twenty-two veterans that commit suicide every day. In that presentation, we disclosed that we both had PTSD, and we're dealing with it, just to let everybody know where we're coming from. It was a little stressful but…I felt better once I told everybody. I think they actually look up to us more now, like "if he and Mike are doing it, we can do it too"…People need to realize and understand that just because we've been through [combat and] have PTSD, doesn't mean that we're handicapped or less of a person. It just means that we've gone through a lot. (Giovanni)

For the student veterans with disabilities, there was a sense of responsibility to inform

others and dispel the PTSD/veteran stigma.

> People just assume that you're fucked in the head. I think it's important…to try to advocate and give [our] small community a voice that says, "You're all full of shit and it's not like this," …The biggest and most effective change is going to come from within the veteran community. There's people out there setting the example and it's motivating me and encouraging me to stand up and do these little speeches and volunteer to speak with you and help out with this research. (Dierk)

According to Schlossberg's 4S System, Dierk's statement is congruent with the attempt to modify the situation as well as a way to control the meaning of the problem. For Steven, the desire to give back to others was his motivation for being a participant in this study. The draw to participate in the study stemmed from the opportunity for altruistic healing in the form of reaching out to the new, incoming members of their community. The prospect of building better services for veterans following his path to the community college provided an opportunity to, once again, serve their fellow service members.

> Our feedback, it's…paying it forward. Our little brothers, our soon-to-be veterans, maybe even older veterans are going to come into the world of academia in the near future…That's why it was a privilege to be a part of this…thank you for considering me.

This feedback provided an opening for the veterans to self-reflect on their involvement in the research experience and the lessons and experiences gained.

This is actually something that's going to help us in the long run…Hopefully this will show decision makers all over the state what is needed and required to get our veterans out of college to [become] successes in the civilian world. I took so much joy in this for that simple fact…It's going to help somebody later on down the road. (Russell)

Russell's statement shows his ability to reflect back and evaluate the lessons he's learned during the journey of his transition, an indicator of the *moving out* stage that will be discussed more in the third and final theme. The veterans were asked to elaborate about their desire to take care of the future generations of veterans who would be coming to the community college and would experience the same transition and challenges they had. Giovanni discussed from where the desire to serve others originates and how it is instilled in the military community.

The military instills in us a sense of selflessness. If you look around most veterans, it becomes a part of your DNA to be selfless, and you want to help people. It makes you feel good. That's one of the reasons we wanted to give back to the younger generation [of] veterans and [other] students…I want the best for them. I don't want them to go through those struggles that you went through.

For Giovanni, the military value of never leaving a fellow service member behind on the battlefield was transferable to the desire to also provide assistance to younger generations by improving services and awareness of the new battlefield that faces them as they struggle to adapt and re-integrate into civilian life.

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The participants' experiences and statements aligned with a Civic Enterprises study by Yonkman and Bridgeland (2009) focusing on the civic engagement of our OIF (Operation Iraqi Freedom) and OEF (Operation Enduring Freedom) veterans. The study focused on civic engagement as an essential factor for successful re-integration into civilian communities following military service. The service commitment that veterans possess which led them to the military initially, does not simply end on the battlefield, but continues when they return home (2009). Volunteering provides veterans with opportunities to network, find paid employment, hone or develop new skills, and also provides increased opportunities to experience camaraderie and kinship, all of which contribute to their identity development (Yonkman & Bridgeland, 2009; Matthieu et al., 2011). Neuroscience has also confirmed that improving a person's civic health can improve the person's physical and mental health (Pavlovich & Krahnke, 2012), which could also be of benefit to ease the struggles associated with the student veterans' disabilities.

Theme III. Moving Out: The Reflective Veteran

Schlossberg's *moving out* stage occurs when a transition cycle comes to an end because the cause of the transition, itself, has ended. As part of the final stage of Schlossberg's Adult Transition theory, *moving out,* the participants of this study engaged in a process of self-reflection. According to Schlossberg et al., (1989, p. 56) the goal for veterans, is to move from a primary concentration on the transition to an assimilation of the changes so that the transition experience becomes only ''one dimension'' of the veteran's life.

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Self-reflection is considered a learning tool, which emphasizes purposeful critical analysis of knowledge and experience so as to achieve deeper meaning and understanding (Lew & Schmidt, 2011). This process places the focus more on one's personal experience leading to new understanding and appreciation (Boud et al., 1985). From this self-reflection process, three issues emerged among the student veterans:

1) a realization of their resiliency to survive and continue on;

2) the embracing of their own self-value and ability to assist others; and

3) their plans and goals for the future.

Through self-reflection, many participants realized how far they had progressed through this transition. Russell sat in awe while exploring his own progress through the transition experience and realized how this cycle had evolved throughout his life, providing assets that were utilized later. Russell compared his transition experience to a life-cycle where he likened starting the transition to being a newborn learning to survive with a new set of challenges.

> It comes in a full circle. I was the bad (high school) senior, then I was the
>
> peon recruit—I graduated [basic training], and I was the bad marine, then I
>
> got to my first unit and I was the newbie—Then, I progressed through my
>
> career and I was the super knowledgeable Staff NCO, and I had all these
>
> awards and stuff—Then I got out, and I was a stinky civilian, I was in the
>
> workforce for a bit, and I worked, and I progressed. It got to the point where it

was not for me anymore, and now I came back as a student. Guess what? I'm

back and I'm a newborn again.

Upon deeper self-reflection, Dave compared his transition experience and identity to

that of a carpenter who was gradually building a house with every step in the process.

For me it's going back to…being a carpenter. You start off with framing. It's

all crude and rough. Now you're laying tile and finishing the fine cuts on the

baseboards. For me, I'm [transferring] to the university, and I'm thinking I'm

going to start back at the next baseline. By the time I'm done, I'm finishing the

house. (Dave)

Giovanni expressed some of the lessons he had learned along his journey and how he

can use those to ease any future transitions he may experience.

For me…the hardest part was just getting started. Once you start, you're good.

Getting out of bed and getting to work, starting your day, once you're there at

work, it's just going to fly by. It's just getting started. (Giovanni)

Self-reflection helped Giovanni realize where his greatest challenges throughout the

transition were and assisted him in identifying the assets and skills necessary to

overcome those obstacles in future situations.

From Self-Reflection to the Resilient Self

The experience and process of self-reflection led the student veterans with

disabilities into an awareness of the resiliency they possessed and had developed

throughout the process of the military-civilian transition. This process led to insights

of how to continue their successful transition and achieve their educational goals.

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Dierk summarized what it meant to him to be a resilient veteran.

> To me it means overcoming a stereotype and being just as successful outside
> the military as I was in…learning how to ask for help and where to get it.
> Using the resources to take care of myself.

Dierk tied his resiliency directly to overcoming the significant obstacles he faced as a veteran with a disability, combining his new identity and the valuable lessons he has learned along the way. For Dave, self-reflection also led him to discover the tools that will continue to serve him on his journey beyond his experience at the community college, as he sat poised in the *moving out* stage of his transition cycle.

> I guess I take those hard knock lessons that I learned from day one when I first
> got out. I reflect back on them, and remember how I made it through. It all
> goes back into everything we learned in boot camp and every training day
> forward from day one: Mission forward, focused, dedication, discipline, it's all
> there. If we're sitting here as veterans, we've all been given the tools. We just
> have to find them.

Russell similarly discovered skills he had developed on his journey when reflecting back on his transition experience at the community college.

> I've learned how to deal with certain people and I've learned how to adjust to
> certain teaching techniques. I take something from each semester and I start
> the next one.

The process of self-reflection developed an insight and self-awareness in the student veterans of their own assets and inner strength they possessed. This led to the

realization that their military training had, in fact, provided them with the tools and strength they needed to survive. All that was missing was learning how to re-direct the strength, skills, and assets to their new mission.

The Veteran as an Asset: Embracing Self-Value

As the participants learned to value their personal journeys and identify their resilient selves, they started to develop a positive self-perception and began to identify their capacity to pass useful knowledge to others. The student veterans began to view themselves as an asset in their community. Giovanni expressed his opinion on why colleges would be excited and value the veteran presence on campus.

I think veterans' grades speak for themselves... I think colleges … realize that having a veteran (enrolled) is a good thing. We can hold our own.

A conversation between Russell, Giovanni, and Steven during the focus group demonstrated how their instructors began to notice the veterans as an authority and an asset in class.

In my summer class, microbiology for eight weeks, the teacher would ask a question, nobody would really have an answer. Nobody wanted to answer. So I'd answer the question even if I was right or wrong. Because of the prior shit I have experience as a medic, I had some knowledge. She'd ask "How do you know that?" I was like "the military, I was a medic." She says "oh, so you have an idea of what diseases and what medications and vaccines to give?" I was like "yeah, I do." (Giovanni)

They look at us as a wealth and knowledge and wisdom, we [didn't] get that

out of a book…Most of the kids here are fresh out of school. (Russell)

We're like a bridge. (Steven)

When the veterans had a conversation about how to improve involvement in the

Veterans Club on campus, the "mission focus" was also viewed as an essential

component for success.

When it was just a stand-alone club with no mission other than coming

together as a club, there was limited involvement or minimal involvement.

Once we were mission-forward with Walk a Mile in Her Shoes, we actually

functioned as a group. (Steven)

As a unit, as a working unit. (Dave)

If we really want to continue with this veteran's club, and get it off the ground,

and keep it mission-forward, we need to start or finish every semester with a

mission. When all of us came in to summer, we should have the mission for

the fall. That way we hit the ground running. Being mission-forward, may

increase or help with the draw. (Steven)

The student veterans felt the responsibility of being an asset in their newly formed

community included being able to pass the knowledge and guidance on to others. The

opportunity to assist others in this capacity further enhanced the process of self-

reflection and growth of their own resiliency.

The participants of the focus group were asked what piece of information or

wisdom they learned and would like to pass to other veterans with disabilities who are

just beginning the process. Interestingly, their comments and perceptions provided

valuable insight into the lessons they took away from their own journeys.

"Don't let the stigma grab a hold of you". Participants emphasized as student veterans, it was important to not let their disability prevent them from finding success.

> Don't let the stigma grab a hold of you. It's like a stereotype, just like not "all ladies are bad drivers". Don't believe what you hear. We all have the same or similar struggles. Some worse, some on the same level, some not quite as bad, but we've all done it, and there are success stories on every level…All the assets are here and growing…utilize what's here for you. (Steven)

The participants felt it was important for student veterans to know that they shouldn't be afraid or feel shame in seeking help and support due to societal stigmas associated with mental health disorders and disabilities.

"**You can do it.**" Russell's recommendations to veterans who were following his footsteps into higher education, were to draw on the strength, skills and assets developed from going through another difficult transition, basic training.

> Boot camp or basic training is hell in itself. If you made it through that...You can do anything for three months, and that is what the semester is……this is a piece of cake…It takes some adjustment but if you've been [there] and you've done all that, you can do this. Not only can you do this, you can be the best at it…You can do it. You will do it. That's the bottom line because that's the people we are. (Russell)

The student veterans realized not only did the training acquired in the military

provide them with the tools necessary to handle the demands of college. In addition, it had provided them with the foundation of strength and perseverance to conquer their educational missions as well, not as a survivalist but as a victor.

"**Don't be afraid to reach out…Give back and help other people.**" Russell shared the importance of giving back and helping others as a source of healing strength on one's own journey.

> Don't be afraid to open up and to reach out to other vets, and don't be afraid to reach out to the students here because those are just as much resources as anything. Use them and let them use you. Give back and help other people. It'll help you out…you'll learn something as well. (Russell)

For the student veterans, the initial challenge of trusting others while simultaneously finding a way to give back was a mutually beneficial opportunity for growth. As new veterans came into the college, it provided the existing student veterans with opportunities for self-awareness and growth while also providing the guidance and support for those taking the first steps of their transition journey.

Being a role model. Giovanni expressed a similar motivation in the expectation of excellence by the example that he was setting for his children.

> My biggest thing is just being an example for my kids…As a parent you want your kids to be successful. I want to be their role model…being a veteran and being resilient, having a disability and fighting through it, getting through the struggle. That's what life's all about. It's not about where you start or where you finish, it's the whole thing in between. …[that's] the thing I'm most proud

of right now…and that's my example for my kids.

Just as valued and important as representing past, present, and future veterans, Giovanni also applied this expectation to his role of being a father and setting an example for his children.

A standard of excellence and honoring the military culture. The participants' advice for incoming student veterans evolved into a desire to "pass the torch" and ensure an upholding of standards that would protect the community they were striving to build. The magnitude and responsibility of wearing a military uniform was viewed as an on-going responsibility to carry on the duty and honorable representation of a service member. This duty included paying respect to those who wore the uniform before them and those who will wear it after. Additionally, there was an expectation for future veterans to maintain their service to others, while respecting their reputation of being model students and citizens on campus.

> The bar's been set for us [veterans]. The instructors have a certain expectation of what veterans are going to bring to their classroom; we can't let our instructors down. We also have the responsibility for carrying the torch that has now been passed to us…and the responsibility of not making us all look like asses. (Dave)

Russell also identified with Dave's sentiment of setting the bar for each other as a standard of expectation and excellence.

> There's somewhat of a standard. I'm not saying we're better than any other students, but we expect certain things. I'm going into the nursing program, and

the first thing I was told "If you're anything like Mike and Giovanni, you're

going to do great." I'm going "oh shit. I've got a bar to reach, now." Not only

that, but I'm going to pass it. When they told me that, I realized the instructors,

the staff, the students, they really look at you when they know you're a vet.

Russell also felt that it was important to inform incoming student veterans of the level

of expectation the student veterans' community chose to place on themselves as a

motivation to maintain a high standard level of performance. This standard of

achievement and expectations that student veterans set for themselves can be traced

back to their military training to persevere and survive. As Russell stated, "failure

was not an option." The remnants of this belief transcended the role of being a

civilian and became a powerful motivator within the student veteran community.

A lot of times, I feel like "I don't want to do this thing", but I'm a vet. I need to

represent my vets and represent myself, so I open up that book and do another

hour of reading. (Giovanni)

The standard of excellence and achievement experienced in the military created a

pressure, competitive drive, and a motivator within the student veteran community.

This drive was rooted in a continuance and transformation of the honor, pride, and

representation of one another that was inherited from their military service.

The Future Self: Expectations and Career Goals of the Student Veterans with

Disabilities

The student veterans with disabilities successfully navigated the civilian

transition and developed new identities while learning to manage their new

disabilities. This process ultimately led to their personal and academic success. They found themselves looking forward to starting their next transitions.

> Mine's easy…After I graduate here with the RN, I want to start working at the VA as an RN…[then] get my bachelor's at the university the following year. From there, either a nurse practitioner or anesthetist. (Giovanni)

Dierk had already begun his next transition, as a transfer student to the university, when he replied to the question of what was next for him.

> I'm going to finish my BS in Health Science. I'm also working on getting back into shape, since I managed to gain about 30 pounds since transitioning out. That should also help ease some of the daily pains I deal with as well. I also have a bunch of adventures planned in the near future, climbing in Yosemite, diving with Great White Sharks, and my annual running of the bulls in Spain. Also, I received an invitation to go to Haiti to do an assessment on an Orphanage in November, so that's exciting. Overall life is looking good.

Dierk's response demonstrated how his desire to continue to serve others and the therapeutic assets acquired from his service were a lesson he was going to continue carrying on. Dave was also poised to transfer to a four-year institution. His reply demonstrates his desire to continue to serve other veterans as well as his community on into the future.

> Transfer, and then law school. After that, I've got a couple different avenues of law I want to explore. One is either getting involved from the public defender side and working through the Vet Court that's been developed

statewide. Right now it's in its very, very infancy. I'm hoping that it isn't fully

developed, and I can play somewhat of a developmental role in it, five years

from now… Or just go a different avenue and do a little pro bono work for

veterans as the need arises within my community. (Dave)

Russell had just graduated the prior semester with a certificate of achievement in

communications and had been accepted into the Licensed Vocational Nursing

program that would start the next semester. His plans for the future included

continuing to be of service to others as a source of healing and peace.

I want to get an AS [associate's degree] and LVN license. Then I will follow

the path of transferring to the university after the RN year. There are a lot of

benefits out there for us veterans, especially the upper echelon schools. I

wouldn't mind seeing what's out there for us. In the long run, ultimately, I

don't care where I work…Really, as long as I'm helping somebody out …

That's the biggest thing for me, I want to be helping somebody, and trying to

make a difference. I think all of us already have, but continue to do it

because… it's a process, and it makes me feel good.

Steven also shared a desire to continue helping others in his future endeavors

demonstrating the importance of the therapeutic aspect of finding altruistic ways to

move forward.

I transfer out in 2016. In 2017, spring, I'll be going to the university.

Hopefully in Sacramento… it's another two years, maybe three for my

bachelor's, depending on how many science classes I have left. From there, it's

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probably med schools out east. I'll apply anywhere, but I'd prefer an east coast

one. An Ivy League school. I have the GPA for it. It's sitting at a 3.9, so I

think I could be able to get in. It doesn't matter as long as I end up working in

the ER. That's my ultimate goal, helping people. (Steven)

The participants were asked how they felt about their involvement with the

community-based participatory research process and what they had learned about

themselves.

I think the process is really cool…This is actually something that's going to be

helping us in the long run. It's a great beginning to something that's going to

blossom later on. We may not see it immediately, and it's going to take time,

as everything does. The fact that you drug all this information out of us…It's

going to help somebody later on down the road, including ourselves. (Russell)

Given the prior statements from the participants on the altruistic and personal

fulfillment value found in being able to serve a purpose, it is not surprising that they

found value in taking an active role in this community-based participatory research

project.

In summary, the student veterans with disabilities began their military-college

transition by learning to navigate their new identities and roles as a college student

while simultaneously negotiating the management of their new disabilities. As the

participants settled into their new roles they began to rebuild the absent camaraderie

and community necessary to provide the support to successfully continue their

educational pursuits. As the student veterans with disabilities became more secure

within their new identities and newfound veteran community, they began to integrate

and branch into areas of the civilian community at the college and community at

large. This integration led to the rekindled desire to continue their service to others

resulting in the discovery of the altruistic and therapeutic value of helping others. The

student veterans with disabilities concluded the community-based participatory

research experience by employing a process of self-reflection. This process resulted

in the assessment of their life journey, a new self-awareness of the assets and skills

they had acquired, and the new goals needed as they move forward to future

endeavors and subsequent transitions. Notably, this self-reflection process resulted in

an additional opportunity for healing for the student veterans with disabilities as well

as an inspiration and desire to reach out to assist other veterans through the process of

shared experiences.

CHAPTER V

CONCLUSIONS

The purpose of this qualitative community-based participatory research study was to identify the ways in which veterans with disabilities navigate the process of transition from their lives as members of the military community to participants in the community college. This study analyzed a subset of veterans with disabilities in a community college to identify the support structures and services that can help this population to navigate their academic experiences effectively.

This study is significant for four reasons. First, it presents a holistic account of the community college experience for student veterans with disabilities by examining their journey as they exit the military, become a civilian, and matriculate into the community college. The study then evaluated the challenges and assets they discovered along the way to contribute to their success in the community college, as well as suggestions for program and support improvement for this population of wounded warrior students. Second, it contributes to the literature by (a) filling a void in research on the support of student veterans with disabilities, (b) operationalizing a framework to examine these students' concerns and experiences as they attempt reentry into the civilian world via education, and (c) providing an interpretive approach based on the analysis of thick, rich, descriptive data not found in the current literature on the education and needs of student veterans with disabilities. Third, the research captures the voice of the student veterans with disabilities. Finally, this study

provides community colleges with insights that may enable them to improve their

programs, services, and practices to support the growing population of student

veterans who also are adapting to their new service-related disabilities.

Three main themes developed during this investigation. Schlossberg's Adult

Transition Theory, as well as the subcomponents of Schlossberg's 4S System, guided

the interpretation of the data. First, the data results found that the student veterans

with disabilities described their transition from the military into civilian and college

life as a personal journey that included managing an identity crisis while

simultaneously learning to respond to their new disabilities. Second, the study

discovered ways student veterans with disabilities learned to adapt to their transition

through peer support, community building, and altruistic-healing. The study also

showcased ways the student veterans learned to manage their new disabilities and the

skills they developed to allow them to carry on. Third, and lastly, the study shows that

self-reflection and building a resilient self were important and valuable mechanisms

that allowed participants to survive, adapt, and find future goals.

From Veteran to Civilian to Student: Navigating an Identity Crisis

The solidarity of the military community often becomes central to the service

members' identities and essential to the veterans' survival. However, upon exiting the

military, this solidarity left a void in the veterans' capacity to navigate their military-

civilian transition, creating an intense personal struggle for the veterans. The

participants' journeys then shifted to discovering ways to adapt to their new civilian

roles while simultaneously navigating the impact their new, service-related

disabilities had on their lives. The availability of educational benefits provided the participants with an opportunity to acquire an education necessary to develop new skills, a new direction, and a new identity.

DiRamio and Jarvis (2011) state that "college attendance can be a constructive and affirming element in the transition process" (p. 8), but, for the participants, becoming a college student initiated another difficult transition. Schlossberg's *moving in* phase is characterized by individuals developing new identities and learning new roles, expectations, and infrastructures. During this initial phase, there is also the possibility of an identity crisis developing if the transition appears to be unmanageable or if the individual has a perceived lack of control over their situation. The struggle to manage a new disability and its impact within the educational environment and the participants' lives created an identity crisis for the student veterans with disabilities.

According to Burke and Stets (2009), identity defines who one is based on individual experiences, what role one holds in society, which group one belongs to, or which characteristics make one unique. The identity of a newly-disabled self, caused the participants to feel unemployable, question their role in society, and resulted in self-perceptions of being "less than a man" and unable to physically do the activities they had previously identified with. The transition created feelings of uncertainty as to which group the participants would now identify with and were resistant to identify with the group of students who were considered "disabled", stating, "that's not me."

The impending identity crisis left the participants struggling to understand

their new positions, expectations, and roles. This struggle prevented the participants from adapting to their new identities, seeking help, developing the necessary skills that would allow them to continue on their journey, or learning to manage their new psychological and physical limitations. This identity crisis was further magnified by the encounters they had with societal PTSD/veteran stigmas, which increased the barriers of seeking help and resulted the participants being driven to adopt the identities of the "hermit", the "blob," the "loner," the "asshole," or feeling like "half a man".

The implications of the severity and the duration of the identity crisis have a direct impact on the veterans' transitions and disability management. Without support, the student veterans with disabilities struggled academically and socially, failed to persist, and continued to struggle as a civilian. Therefore, it is imperative to student veterans with disabilities' success that proactive measures be taken to reduce the severity and duration of the identity crisis in order to progress to the next phase of identity development.

Strategies of Resistance and Survival: Community Building and Altruistic Healing

As the transition experience progressed, the student veterans with disabilities began attempts to adapt to their transition and manage their new disabilities in ways that allowed them to carry on. This process involved the participants striving to strike a balance in their new roles and identities, which was consistent with Schlossberg's Adult Transition Theory's second phase of *moving through*.

Critical to the *moving through* stage and the 4S System, was the development of strategies to assist in the navigation of their new realities and new identities. The students emphasized the role community played in this process as they sought to overcome their obstacles by creating a new military unit within their new environment. The Veterans Resource Center fulfilled this role for the participants by providing belonging, affiliation, and camaraderie, similar to that found in the military. This support contributed to the participants' need to satisfy achievement and self-esteem. This experience of belonging and connectedness in the college environment was essential for the student veterans to persist and move into the role of a fulfilled civilian self (DiRamio & Jarvis, 2011) and resulted in opportunities to adapt the skills and assets that were a source of strength and survival while in the military.

As identity development progressed and stability within the participants' new roles was achieved, the student veterans began to recognize supportive civilian-others within the college community. Interestingly, the veterans did not view these other areas of support to be external to their new community at the college. Instead, the veterans adopted the supportive civilian-peers, supportive and trusted staff and instructors at the college, and the community at large into a broadened community and unit mentality. The veterans had been trained to rely upon the unit for survival and successful completion of the mission. The development of the broadened community began to awake dormant values and codes learned from the veterans' training. These values included a "mission-forward" determination towards goal completion and a "no one left behind" desire to aid their civilian-peers to be

successful and assist others in need.

Additionally, a well-timed community service opportunity (Walk a Mile in Her Shoes) served as an awakening for the student veterans with disabilities as they reconnected with a familiar desire of selfless service to others, a value that was engrained within them during their military service. This continued service and value to others provided a source of therapeutic and altruistic healing that aided identity re-construction, transition, and disability management. This action is congruent with Schlossberg's 4S System as an attempt *strategy* to attempt to modify the situation and control the meaning of the problem. The result was increased self-value, a revitalized sense of purpose, and new ways to transition the skills and values learned in the military into their new role as a civilian college student. An additional benefit of the veterans' service to their communities was the opportunity to spread awareness and dispel the stereotypes and stigmas associated with being a veteran or having PTSD.

In summary, critical to the *moving through* stage was the development of strategies to navigate their new realities and new identities. This process involved three steps: 1) creating and participating in a sub-community at the college with other veterans where a sense of trust and community could be established, 2) expanding their communities to include others; and 3) finding a way to continue their service to others. Sources of support involved the caring behavior of college personnel and the veterans' families. The notions of *strategies* and *support* detail how the student veterans with disabilities have learned to navigate their transition process and overcome challenges. The aspect of continued service as a method of altruism-based

healing was a surprising development, resulting in an exciting new direction of potential research and benefits for student veterans with disabilities.

Personal Reconstruction: The Role of Reflection and Resilience in Defining the Future-Self

The third and final theme of the data focused on the process of self-construction among the veterans. Self-reflection and resilience became the basis for the redefinition of a new-self, which was essential in overcoming stigma, role adaptation, and identifying future goals. This finding is related to Schlossberg's third phase of *moving out*. The participants found themselves in a position of self-reflection and ultimately, self-redefinition that provided proof to the student veterans with disabilities they were capable of recovering their power and authority within the institutional environment at the college.

The process of self-reflection assisted student veterans with disabilities in building their resilience. The service-members' military training is a possible source of the self-reflective approach utilized to analyze a situation and strategize the steps or tools to continue and accomplish the mission. Reflection is generally understood to be a process in which an individual contemplates his or her experiences, perceptions of reality, and roles in the world (Ash & Clayton, 2004; Dewey, 1933; Hatcher & Bringle, 1997; Park & Millora, 2012; Simpson, Jackson, & Aycock, 2005). These same criteria also align with Schlossberg's Adult Transition Theory, proving to be a valuable component of their transition experience.

Dewey's (1933) conceptualization of reflection is that it can help individuals

make connections between their experiences and others' and, over time, help communities advance social progress (Park & Millora, 2012; Rodgers, 2002), which was a value the participants identified with. Through critical self-reflection, individuals may identify and resolve differences between their values and experiences including conflicts between assets and challenges when establishing their new role and identity (Park & Millora, 2012; Morton, 1993). Additionally, the student may also mentally wrestle with social problems (Park & Millora, 2012; Schön, 1987). For the participants, this challenge was evident in their struggles to manage their new disabilities as well as the social stigmatization of PTSD and their veteran status. The participants' concern regarding stigmatization was also influenced by an awareness of how injustice is created and their own power to create social change (Park & Millora, 2012; Freire, 1970).

The phase of *moving out* also coincides with the next step of self-authorship as the veterans began to adapt to their new identities and began to look forward to their next transitions. Self-authorship has been defined as the internal capacity to define one's beliefs, identity, and social relations, and is a developmental capacity that helps people meet the challenges of adult life (Baxter Magolda, 2008). Kegan (1995) coined the term, self-authorship, in describing a shift of the meaning-making capacity to take the values, beliefs, convictions, generalizations, ideals, abstractions, interpersonal loyalties, and intrapersonal states from external authorities and form those elements internally. This process first occurred for the participants when they entered the military where the military culture shaped the service members and their

beliefs. Later, the participants encountered this same experience again as they transitioned out of the military and into civilian life, as the civilian culture began to reshape their beliefs. The process of self-authorship begins to evolve when a challenge is presented and is accompanied by sufficient support to help an individual make the shift to internal meaning making (Baxter Magolda, 2001; Kegan, 1995). For the participants, the challenge presented was their transition and its related identity crisis, while the support was in the form of the Veterans Resource Center, the new community of veteran support, and the experience of altruistic healing. Further, this step of self-authorship allowed student veterans to move from development of skills to an integration of their identity development with their cognitive skills. Therefore, this process helped them to better prepare and cope with the added demands and challenges placed on them with the management of their disabilities within the learning environment (Baxter Magolda, 2001).

Resiliency was an additional factor which contributed to the student veterans' successful transition. Resiliency is defined as the ability of an individual to bounce back from life's adversity, cope with stresses, and deal with these stresses in healthy ways (Markel, Trujillo, Callahan, & Marks, 2010). Resilience has also been conceptualized as both an inherited trait that remains relatively stable despite life circumstance (White, Driver, & Warren, 2010) as well as a state-like variable compromised of behaviors, thoughts, and actions that can be taught and enhanced (Luthar, Cicchetti, & Becker, 2000). The culture and camaraderie experienced in the military is believed to be an example of these taught forms of behaviors, thoughts,

and actions (Hoge, 2010) and a central source for the veterans' resiliency. It is because of this culture and camaraderie that increased contact and support from other veterans can also serve as a social characteristic of resilience (Bonanno, 2004).

The participants' resiliency developed as a result of central skills that were fundamental in their transitional success. First, they learned to value themselves again and, in the process, began to recover their personal voice and independence. As they began to recover their voice as individuals, they became authors of their own lives, which contributed to the development of new stories and identities. Second, the participants felt accomplished and productive by being in college as they acquired new knowledge in their courses. Next, they developed new goals for themselves. Finally, they recreated a new veteran community that was defined by their capacity to achieve, persist, and help others.

The student veterans with disabilities interviewed experienced multiple challenges and frustrations. However, the participants found ways to persevere through their transitions, their identity crises, social stigmas, and disability-related limitations in order to continue with their educational goals. These wounded warriors utilized self-reflection to adapt the skills and training acquired in the military as tools they could rely upon for survival during what most referred to as the most difficult experience they had ever endured. This self-reflection process also aided in the development of their new identities outside the structure and life experienced in the military.

The table below illustrates the incorporation of Schlossberg's Adult Transition Theory, the 4S System, and the transition themes for student veterans with disabilities.

Table 2

Schlossberg's Adult Transition Themes and 4S System for Student-Veterans with Disabilities

Moving In: Development of the Identity Crisis		*Moving Through:* Building Communities and Overcoming Adversities		*Moving Out:* Lessons Learned from Military Service
• Removal from the military community • Removal of the solidarity, structure and support associated with lessons of survival and successful completion of the mission. • Learning of new disability diagnoses.		• Camaraderie of VRC as a tool to recover trust and value • Realization of supportive others • Growing a new community/unit • Altruistic healing as a tool for self-reconstruction		• Self-reflection: The next step of self-authorship • Evolution of self-reflection into the resilient self • Embracing Self-Value
Self	*Situation*	*Support*	*Strategies*	
• Pride • Desire to remain resilient • Concerns of confidentiality • Lack of trust with outsiders	• Struggle to adapt to learning environment • Struggle with limitations related to new disabilities • Social stigmas	VRC • Location of a community similar to one left behind • Triggered survival tactic of reliance upon the unit/community • Shelter from the transition chaos with understanding others • Socially free, away from fearful others • Supported identity development Supportive Others • College • Family • Fellow-veteran communities (i.e. local VFW chapters)	• Education utilized as a tool of self-redefinition • Gradual increased capacity of co-existence with civilian-others • Incorporation of civilian-others into broadened unit/community • Awakening of dormant military values • Altruism as a healing source of self-reconstruction	

The Military Culture as a Threat and a Resource: A Journey of Resignification

The military culture served as a double-edged sword for the veterans. This culture, with its set of norms and codes, served a very specific function and purpose within the military which was essential for survival and completing the mission. These values, which were drilled into the service members during training and reinforced during combat, included being an integral member of a team and being brave, persistent, resilient, determined, disciplined, and motivated. These are deeply imbedded traits that cannot be changed or simply switched off when exiting the military and entering the civilian world. As Hoge (2010) stated, "Society believes that a warrior should be able to transition home and lead a "normal life," but the reality is that most of society has no clue what it means to be a warrior" (p. xii).

The other side of that double-edged sword proved that these skill-sets and characteristics that were once essential to survival in the military have the potential to become massive barriers and can contribute to repressed feelings, not asking for help, isolation and depression, and pushing themselves to the brink of breaking down. The veterans who also faced the struggle of a new, service-related disability had additional challenges of re-learning and adapting skill-sets around their new limitations, while simultaneously redefining their identities. It became evident that if the veterans did not proactively seek ways to leverage their military training and skills to their benefit, the transition proved to be more difficult and prolonged, they struggled academically and failed to persist, and continued to struggle as civilians.

Interestingly, it was simultaneously the military culture and experience which

provided the assets and tools that the veterans were able to access in order to persevere in the new, academic landscape. This new information provides insight into the need to access the previous strength and skills learned via military training and redirect these to ease the transition experience for this population of student veterans with disabilities.

Therefore, a proposed alternative is to provide assistance and support to student veterans with disabilities by harnessing the assets and strengths developed through their military training and channel and redirect these skills into a foundation of survival skills with which veterans are familiar. This support combined with opportunities of continued service and teamwork can provide personal and social structures for the transition, identity redefinition, employable skill development, and educational experiences of student veterans with disabilities. This process would allow these wounded warriors to transition successfully, obtain their educational goals, and continue on as contributing, productive members of society. The table below outlines the potential outcomes of military training and culture being leveraged or unleveraged for student veteran with disabilities.

Table 3

Potential Outcomes of Military Training and Culture Being Leveraged or Unleveraged for Student Veterans with Disabilities

Military Training and Culture	Unleveraged	Potential barriers	Repression of feelings
			Resistence to request help
			Isolation and depression
			Pushing themselves to brink of breaking down
			Difficult and prolonged transition
			Academic struggles
			Failure to persist
			Continued to struggle as civilians
	Leveraged	Potential assets and tools	Recovered their power and authority within new roles the college
			Eased the acceptance of asking for help
			Became the basis for self-redefinition
			Overcoming stigmas
			Role adaptation
			Identifying future goals
			An insight and self-awareness of assets and inner strength
			Positive self-perception
			Began to identify their capacity to pass useful knowledge to others.

Implications for Policy and Practice

This study presented research that shows the need to evolve and grow our veteran services at community colleges. Services that are more comprehensive and supportive help veterans fulfill educational goals while situating veterans in an environment that can do more to ease and support their military-civilian transition. Volunteering to assist and serve others in their communities is also a valuable

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opportunity for the student veterans with disabilities to hone skills, develop new skills, and provide networking opportunities that can assist in future employment opportunities (Yonkman & Bridgeland, 2009). Volunteering can also provide the student veterans with disabilities with the camaraderie and kinship that comes from belonging to a team—an experience that many veterans desire. Beyond the well-documented benefits of service to the community, connecting veterans to these opportunities can help them successfully transition back to civilian life as well as give veterans the time and the freedom to explore career paths while considering their next step in life (Mattheiu et al., 2011).

The veteran suicide rate is estimated to be approximately two to four times the national average, age ranges of 22 to 24 being of highest risk. Interestingly, this is also the average age of veterans returning to higher education. In 2005, an average of 120 veterans committed suicide each week (Keteyian, 2007). Therefore, it is imperative that we strive to find ways to assist and serve this population of students. These statistics cry out for increased services for our veterans and proven interventions such as meaningful service opportunities that increase happiness and well-being, hopefulness, and purpose (Goldstein, 2008; Yonkman & Bridgeland, 2009). With many veterans transitioning out of the military and coming directly to the community college, it is a missed opportunity to not assist this deserving population of students with additional supports.

Implications for Program

This study informs the practice of professionals serving student veterans with disabilities as well as policy makers and instructors at the community college. The implications listed below are recommendations either drawn from the data or from the participants themselves.

Strength-based approach to veterans' services on campus. The basic training experience utilized by the military is designed to develop resilience and a sense of common purpose and teamwork towards the successful completion of a mission. For the individual service-member, his or her self-esteem is attached to the unit and the military tradition and reputation. The unit's success and solidarity acts as a shield that protects the individual members who rely on each other and the team for safety (ACE, 2010; Ritchie, 2008). Veterans can reapply their efforts of self-development and training to the classroom and campus environment as they transfer these skill sets established through military discipline to the civilian world (ACE, 2010). Military cultural strengths should be incorporated into veterans' programs to ease the transition from the military into civilian and college life. Below is a table illustrating some of the strength-based assets that service-members have acquired through military training aligned with areas of civilian and college life to illustrate areas that should be acknowledged and utilized as a foundational tool set to ease the transition experience for the student veterans.

Table 4

Suggestions for Strength-based Approaches based on Military Training (adapted from Cantrell & Dean, 2007)

Military strength	Strength Matched to Civilian and College Life
Camaraderie – unit cohesion and teamwork	Veterans are trained how to work with various people in stressful situations, this skill set can be operationalized within the Veterans Resource Center model, encouraging peer support and counseling.
Tactical Alertness – vigilant and watchful	Instilled alertness can be redirected and utilized to foresee and identify situations and areas of potential trouble to self, family, groups, or work. The veteran can utilize this skill to predict and anticipate what others may not be able to see and use this as a tool to advance his or her position as well as to feel secure in their environment
Armed for Combat – experience with dangerous, lethal weapons and maintained safety.	This training has provided veterans with a special ability to pay attention to situations of which civilians may not be aware. This awareness of harmful possibilities can enhance the predictability mentioned above to assist the veteran in feeling secure.
Emotional Control Under Pressure	A calm, cool, collected individual. Veterans have been trained to maintain control when others are out of control. This contributes to the veterans' natural leadership abilities to stay calm and handle situations effectively.
Disciplined and Commanding Presence – ability to take charge and lead	The veterans' training has prepared them to present themselves as orderly, properly dressed and groomed, prepared, and knowledgeable of their duties and affairs. Additionally, they have learned how to effectively communicate with their superiors in a concise and effective manner.

Attention to Detail and Ability to Follow Orders	Veterans have been trained to follow explicit orders and follow through with detailed instructions and rules where their peers may have a tendency to overlook important steps. This is an asset in the classroom and at work as they are able to follow directives and complete detailed tasks thoroughly and in a timely fashion.

Adopt mindful language surrounding disabilities and disability services.

Within disability services, the utilization of mindful language is a paramount component in the delivery of services. A "person-first" approach should be adopted when referring to an individual with a disability. For example, instead of referring to a student veteran as a "disabled student veteran" an appropriate alternative would be "student veteran with a disability". This approach of mindful language recognizes the individual first who also happens to have a disability.

The aforementioned approach should also be considered when evaluating an appropriate title for Disability Services on campus. Due to the stigma surrounding disability labels, many students, student veterans in particular, do not want to be associated with the services out of fear of further stigmatization. Therefore, it is also recommended that Disability Services on campus consider changing the department name to focus on the services, access, and assistance being provided. For example, "Accessible Education Center" could be an appropriate alternative.

Finally, it is recommended that when initiating a dialogue with a student veteran regarding their disability, staff and faculty should refrain from asking if they "have a disability". Directing the question in this manner personalizes a condition and identity which this study has found to be a source of significant identity conflict. This

approach can potentially stall dialogue, is less likely to encourage service utilization, and can serve as a barrier to much needed services that can aide the student veterans' academic success. Instead, asking the student veteran if they have a disability rating through the VA removes the imposed personal label of a disability and initiates conversation of diagnoses and related areas of limitations experienced for the student veteran.

"One-stop shop". Veterans are accustomed to high levels of structure and clarity in roles and responsibilities. A lack of collaboration between college services that could benefit veterans, such as counseling, admissions, benefit certification, disability services, etc., creates an immense barricade for student veterans, in particular those with disabilities. This confusing and scattered approach to services results in barriers to persistence and achievement. At the participants' community college, the VRC provided assistance via the use of VA work-studies on how to access VA educational benefits and how to initiate the process entering the college. There was not a designated counselor for the student veterans on campus; they would either see a general counselor or a Disability Resource Center counselor, depending on their needs and preference. These counselors were located in various locations across campus. The VA Certifying Official was also in a separate location in the Financial Aid office, meaning that a student veteran may have approximately three different locations, possibly more, that they would need to locate on their own. Repeatedly, the participants cited the need for all of their services to be located in one central location. This would provide an ease of access and immediate assistance for

the transition needs and various supports necessary for persistence in their educational pursuits.

> That "one-stop shop"…is awesome. Because a lot of times, veterans…with PTSD don't like being around crowds. Just getting from home to school is a big deal…if there's a break in the chain there, somewhere, then they're going to miss something. If they just have to come here (VRC)…where they don't feel awkward or anything like that, they feel secure. They can get all their information then, they're a lot more likely to get the help they need so they can be successful. (Giovanni)

Giovanni reiterated that the "one-stop shop" service method would provide the student veterans with disabilities with the essential access to necessary services within a familiar and trusted environment. Currently, the veterans have access to peer support within the VRC and the VA work-study students provide information to new, incoming student veterans. Under this model, the student veterans have to locate individual offices across campus to satisfy their financial aid and benefit certification, academic counseling, Joint Service Transcript evaluation, and disability accommodation needs.

Unfortunately, few colleges are prepared or set up to adequately address student veterans' physical and mental disabilities, making it challenging for veterans to access the resources they need (Ackerman, DiRamio & Garza Mitchell, 2009; Cook & Kim, 2009; Griffin & Gilbert, 2015). Further, Elliott, Gonzalez and Larsen (2011) state that counseling services need to be staffed by individuals who are trained

specifically to work with veterans and assist with their specific needs and should try to integrate these services with their local veterans' services as much as possible. Therefore, it is recommended that disability support services and accommodations be included in the counseling services provided within the VRC. Having these services readily available and in a familiar environment will help eliminate the barrier to seeking assistance.

Veteran Resource Center professional staff. Another area of high need and demand was the need for a designated and specific counselor who would be centrally located in the Veterans Resource Center. This individual would need familiarity with military life and would preferably be a veteran themselves, a military family member, or have a substantive understanding of the military. This individual would also have to meet the necessary minimum qualifications to be hired as a disability services counselor in order to serve the student veterans with disabilities and provide necessary academic adjustments and auxiliary aids for veterans who have a disability rating.

A veteran-specific counselor is essential to provide the level of specific services necessary to assist in the successful transition, identity development, and academic success of student veterans. The expectation of this position would include a thorough understanding of the transition challenges and the stressors and strains experienced by student veterans with disabilities, financial setbacks, unique educational benefits, outreach and referral connections, the certification process, and an understanding of transferability of joint service transcripts and would be able to

provide accommodations and disability services in one centralized location. This unique level of service is beyond what general counselors can provide on campus. DiRamio and Jarvis (2011) argue that "as more students with military experience enroll in college, the role of a helping professional on campus can be of special significance in assisting in this transition" (2011).

Additionally, due to the significant levels of trust and rapport necessary for serving student veterans, it is recommended these counselors be centralized and accessible to meet the unique needs of this population of students. An additional benefit of having a central counselor in the VRC is they can be the point person to coordinate outreach with other veteran services, spread awareness on campus, advocate for veterans and their unique situations, and supervise the VRC and its VA work-study students.

The certifying official on campus is typically a financial aid professional who ensures that the courses in which student veterans are enrolled are consistent with the student veterans' educational plans and degree objectives. This individual approves the students' enrollment which initiates the approval of their educational benefits and financial support. This is a critical step for student veterans as this financial support typically constitutes the student veterans' entire livelihood. The certifying official is another critical individual to house within the Veterans Resource Center. At the research location, the certifying official was located in the Financial Aid Office across campus. The certifying official at the research location also had many other financial aid responsibilities, which kept the veterans' benefits from being processed

in a timely manner. The process of certifying a veteran's enrollment to Veterans

Affairs in an efficient and timely manner is essential for the veterans' overall success

and acclimation to the higher educational learning environment. This process is the

key to student veterans receiving their monthly educational benefits in a timely

manner as any delay greatly endangers their continued enrollment. Failure to receive

monthly benefits could result in a point of loss for the veteran if they were forced to

seek income elsewhere. In the very least, it would create an immense obstacle in the

transition experience that could create an additional crisis for the veteran. Including

this certifying professional as part of the "one-stop shop", with only this

responsibility, would provide the veterans with expedited access in processing their

benefits immediately after meeting with their counselor.

Currently, there are numerous outside agencies that offer support for veterans.

The VRC should also serve as a central location for collaboration between these

services and supports. Collaborating with local veteran services as a central location

for information and access to those services also increases the odds that student

veterans are receiving the support they need to successfully navigate the military-

civilian transition.

> The very first day I was (at the college) was the opening day for the Veteran
>
> Resource Center and they had the mobile Vet Center there. I got a lot of
>
> information just by chance, just showing up at on the right day. (Dierk)

Dierk's comment demonstrates how centralized access to services resulted in

improved access for him. The mobile Vet Center that visits the campus brings

Veterans Service Officers, medical staff, etc. to veterans. The Vet Center brings

support systems to student veterans in their own element and helps them complete

benefit and medical paperwork, get prescriptions filled, and seek advice from a

medical professional without the required trip to the VA hospital.

Academic services, auxiliary aids, and accommodations for disabilities.

Currently, the students who were able to identify with the Disability Resource Center

received accommodations and academic adjustments; others who struggled to self-

identify did not receive this support. The DRC is separate from the VRC; under the

use of a "one-stop shop" approach, these services would be also available within the

VRC.

The Office of Civil Rights (OCR) has released important information related

to wounded warriors. OCR announced its "Wounded Warrior Initiative" in a "dear

colleague" letter (Monroe, 2008). In this letter, the OCR acknowledged that many

veterans with disabilities struggle with seeking out services related to their disabilities

and that many colleges lack the necessary experience to accommodate these students.

The "dear colleague" letter goes on to state, "traditional means of support may not

work" for these disabled student veterans and "individualized accommodations

should be selected through an interactive process between the institution and the

student" (Monroe, 2008, p. 2). The OCR also offered continued support to disabled

student veterans, and "encouraged institutions to adopt 'innovative approaches' to

serve this important population" (p. 3). The "one-stop shop" approach could meet this

need.

The professionals providing the "one-stop shop" services to veterans also need

to be aware that the Americans with Disabilities Amendment Act of 2008 (ADAAA)

now imposes less restrictive requirements for an individual seeking to establish that

he or she has a disability. This and other changes in the ADAAA bear particular

importance to student veterans with disabilities who may be delayed by the VA in the

cumbersome process of receiving a disability rating. It is highly advised that the

professionals providing accommodations for the student veterans with disabilities be

particularly trained and knowledgeable of accommodations specific to Post Traumatic

Stress Disorder (PTSD) or Traumatic Brain Injury (TBI) as these are some of the

most common disabilities facing this population of students.

There are several important strategies that can be useful in working with

veterans with TBI. These strategies include coaching, strategic course scheduling,

alarm clocks, planners, scheduling breaks to prevent fatigue, checklists, memory aids

including tape recorders, supportive phone calls, adaptive technology, and utilizing

GPS. Instruction in skill sets such as developing memory strategies, anger

management, and programs that incorporate mentoring and peer support can also

assist with education and vocational issues (Grossman, 2009; NASHIA, 2007).

It is important to remember that individuals with combat-related TBI and

PTSD will see themselves as veterans and service members and *not* as individuals

with disabilities (ACE, 2010; Church, 2009; Madaus, Miller & Vance, 2009). The

table below lists some suggestions for academic accommodations and adjustments

that although not comprehensive, could be beneficial in the assistance of student

veterans with disabilities. It is important to mention that none of the mentioned

accommodations or adjustments should lead to reduced academic performance

expectations (ACE, 2010).

Table 5

Suggestions for Academic Accommodations or Adjustments (ACE, 2010)

Difficulty in Learning Environment	Suggestions
Concentration/Memory Tips	Permit in-class use of laptop computers for note taking Use of a smart pen Use of a note taker in class Use of a recording device Use of FM microphones or other improved listening devices Use of assistive software: • reading software such as KURZWEIL • text to speech software such as DRAGON Provide class handouts prior to class, so those needing to convert documents to an electronic format have time to do so Ensure that required texts are available in an accessible electronic format Plan ahead to ensure all audio clips, videos, and movies are captioned, as many veterans have experienced hearing loss Utilize electronic platforms to store lecture notes, so that students may access the information through alternative electronic formats as needed Use of preferential seating in class either in the front of the class, close to the door, or with their back to a wall Extra time on individual assignments/homework Refer to tutoring resources
Test-Taking Tips	Eliminate timed tests or utilize extended time on tests Test in a distraction-reduced environment Administer tests on the computer Allow the use of notecards with faculty-approved notes Allow students to use index cards, blank paper, or a ruler to assist in keeping their place on exams
Tips for Alleviating	Allow students to ability to take a short break (5-10

Panic Attacks/Stress	minutes) during class sessions or during testing when stressful situations arise
	Permit flexibility in class session attendance schedules, as long as absences do not conflict with the core requirements of the class
	Use of preferential seating in class either in the front of the class, close to the door, or with their back to a wall
	Service/companion animal
Physical Problems (motor skills, endurance, fatigue, speech, headaches and seizures)	Transportation service to and from classes
	Ability to stand and move around during tests and classes
	Use of assistive technology to complete assignments and exams
	Extended time and distraction-reduced environment for testing

Increased awareness on campus. While attempting to understand the disabilities and struggles veterans face, campus staff, faculty, and students may fall victim to the stigma that veterans are all "ticking time bombs". These wounded warriors are highly trained and bring incredible assets and skill sets such as maturity, leadership, experience with diversity, and a mission-focused attention that exceeds that of the average civilian (DiRamio, Ackerman, & Mitchell, 2008). They are a prized commodity in today's workforce, leaders in our communities, and valued citizens. For these reasons, additional awareness training and information should be provided to college staff and students by the professionals within the VRC "one-stop shop." This training could help the campus community better understand military veterans as well as those who may have PTSD. At the participants' institution, there were no efforts towards increased awareness for college faculty and staff.

Increased awareness can also manifest itself in the level of support the participants reported feeling from the majority of their instructors. The instructors

that were considered advantageous for veterans were those who demonstrated high structure and clear expectations in their courses and strictly adhered to their own rules and syllabi. This preference is largely due to veterans being accustomed to structure and organization that is followed explicitly in the military. The participants reported greater success and learning in courses where the instructor was strict and stuck to their own rules outlined in the syllabus. Therefore, it is recommended that college faculty and staff be provided with awareness training that addresses specific instructional methods that can assist student veterans and student veterans with disabilities in the learning environment. A campus-wide initiative with instructors could also serve to ease the transition experience of the student veteran population.

Further, to assist this population in a successful post-military transition, as well as on their educational pursuit, it would be beneficial for faculty and staff to recognize the potential learning challenges associated with these invisible injuries and make adjustments to ensure their students' academic success (ACE, 2010; Church, 2009; Madaus, Miller & Vance, 2009).

Joint Service Transcripts. A designated and trained individual evaluating joint service transcripts (JSTs) can be an integral first step to access and completion. At the research location, the general counselors on campus completed all transcript evaluations for students, although the majority of institutions have one specific person who completes this task. JSTs are complicated when trying to match and award credit for college-level courses as there is rarely a seamless equivalent between the military and college courses. This disjoint requires that the professional awarding credit to

outside transcripts has an added level of experience and training in understanding and evaluating JSTs. This is a crucial step, as it will determine the remaining number of courses a service member will need to complete, either reducing or extending their time at the college and determining how far their educational benefits will extend. At the research institution, this individual could be the specific veteran's counselor. Regardless, this service should be provided in a timely manner for the veterans to ensure accurate advising and educational planning for the student veteran.

Peer Support/Counseling. The participants spoke repeatedly about the support they received from their peers and how influential that camaraderie and peer support was in their overall transitional and academic success. A peer counseling approach has also proven to be an effective methodology for providing a low-cost option for services to veterans, and funding is available through the VA with work-study programs (ACE 2010). This strategy has proven to be a successful model because veterans may be distrustful or alienated from institutions or bureaucracies. Peer counseling and support programs utilize the camaraderie and trust that veterans experience with their peers built on the military traditions of shared values and experiences (ACE, 2010). This component of the VRC is critical for the development of the camaraderie experienced as a way to mirror the unit support found and experienced the military. Further, peer support can have a dual meaning in the campus community. As the participants progressed through the research, it was uncovered how valuable and therapeutic it was for them to provide support and service to others.

Peer support in the form of learning communities or cohorts for specific

programs of interest would be ideal within this particular population. The value of

never leaving another behind aligns with benefits of the cohort model. Additionally,

this would replicate the unit and team mindset in which veterans were trained and

indoctrinated. This model could potentially provide the support necessary for

successful course and degree completion as well as a successful transition experience.

The participants also expressed a desire to increase the activity and

participation with the veterans' student organization, the Veterans Club. The

approach to increase the appeal to other veterans revolved around providing a familiar

environment for the veterans. An approach that is "mission forward" in its activities

and incorporates ways to provide a service to their surrounding community is

advised. The "mission-forward" appeal spoke to the high need for structure and

leadership, and an aspiration to be a part of a unit again was considered to be a strong

attraction for the veterans while also filling a void during their transition.

Veteran-specific orientation. The participants were strong advocates for an

orientation that was specific to veterans' needs and services. While a veteran-specific

orientation to the college was always planned at the research institution, it had yet to

be implemented. The veterans shared their input on how to demonstrate the success of

current VRC students and advertise those services to incoming veterans. Some of

these suggestions included 1) incorporating current members of the Veterans

Resource Center to establish familiar faces and a network of resources to approach

for assistance, 2) attracting participation with resistant student veterans with a free

parking permit for the semester with attendance, and 3) incorporating a video orientation on the VRC website where incoming student veterans could access the information remotely and be introduced to successful veterans from the college.

The suggestion of having previous student veterans with disabilities identify themselves to incoming veterans and highlighting their successes could also be a successful tool in breaking down the stigmas attached to identifying and seeking support on campus. Additionally, an orientation video could also serve as an opportunity to recruit other student veterans as well as in building more community activities with those involved with the VRC.

Advertising veteran's services on campus. The participants were very supportive and interested in advertising the VRC services more throughout campus. There was a distinct desire to be more active and visible on campus to attract other veterans who were outliers at the college. This approach would also serve as method of improving awareness and fighting the stigma of PTSD student veterans encountered so frequently. One suggestion was to add a statement regarding veteran services and the Veterans Resource Center campus-wide on all syllabi. Another suggestion was to have additional literature that could be handed out or given to incoming student veterans.

Serving fellow non-veteran students. The participants discovered an altruistic and healing quality from providing a service within their college and local communities. Due to this overwhelming response, it is highly recommended that colleges adopt a service-learning model embedded within course curriculum or

community service opportunities as part of the Veterans Resource Center. Some

suggestions include working with Toys for Tots during the holidays, running a coat

and blanket drive for local homeless veterans, or the Walk a Mile in Her Shoes

fundraising event. Collaboration with local VFW and/or local service organizations

(Rotatry, Kiwanis, etc.) could provide additional funding or supplies for need-based

projects. The connection with veterans of other generations can also serve as a

powerful therapeutic tool during periods of military to civilian transition. Beyond the

benefit for the student veterans, these service opportunities are another way to

provide increased awareness of veterans, dispelling potential stigmas associated with

PTSD or veterans in general.

According to Yonkman and Bridgeland (2009), veterans have volunteered at a

higher rate and greater intensity than Americans as a whole. Those veterans surveyed

explained that volunteer opportunities provided them with a sense of purpose. The top

reported issues that veterans desire to volunteer and serve were serving wounded

veterans at 95% and serving other veterans and military families at 90%. Additional

areas included volunteering for disaster relief, working with at-risk youth education,

and helping other Americans. This data is aligned with the study participants' desires

for continued service. The same survey suggested that veterans are more prone to

serve when recruited by a fellow veteran. Seventy-eight percent of those surveyed

reported that the most powerful requests to serve their community came from fellow

veterans. One such veteran explained the appeal of serving with other veterans,

"Although there are many programs out there, I wish it was easier to meet other

veterans and find organizations to do things, such as serving the community, together as veterans." The same study reported that the greatest time to approach the veterans to request volunteer service was after the veteran had been home for the first year, with many providing community service by year two of their transition home (Yonkman & Bridgeland, 2009).

The timeline of approaching veterans to volunteer in their communities is another important factor to consider. Yonkman and Bridgeland's (2009) research also indicated that veterans who volunteer have more success during the critical transition home. Fifty-five percent of veterans reported their transition back to civilian life was going well compared to 47% of non-volunteers; while 48% of veterans reported their family's needs were being met versus 38% of non-volunteers. College-age veterans, averaging around 29 years old, reported a more difficult time transitioning. This difficulty could also be attributed to their reports of having a difficult time finding opportunities to serve but retaining motivation to serve with a respected veteran (Yonkman & Bridgeland, 2009). Further, volunteer community service is an opportunity to provide student veterans with disabilities with a sense of purpose and service similar to that found in the military (Yonkman & Bridgeland, 2009). Additionally, one of the most important objectives for individuals diagnosed with traumatic brain injury is to maximize the level of reintegration into the community and return to productive activity (Rosenthal & Ricker, 2000); it is possible that community service may serve as a potential area to benefit veterans also diagnosed with traumatic brain injury.

Implications for Policy

From the research, several implications for policy concerning the student veterans with disabilities in higher education are evident. First, categorical funding is necessary to grow and support Veterans Resource Centers. This study indicated the value of the "one-stop shop" service approach for student veterans and student veterans with disabilities. This approach would provide all student veterans with direct and immediate access to the various services necessary for their success grouped together within one location. On-going funding would provide for on-going support and consistency of program standards across the community college system.

Second, adopting a "universal design" approach to developing student veteran program policy and design can ensure the needs of all student veterans, including those with disabilities, are met within the "one-stop shop" model. A "universal design" approach to program development is rooted in Universal Design for Learning (UDL) and Universal Design for Instruction (UDI). UDL and UDI focus on incorporating practices that utilize various modalities in order to enhance learning (CAST, 2013; Madaus, Scott, & McGuire, 2003). Developing a program that is flexible and able to support variability of needs can enhance learning and engagement (Bevan, 1995; Sapp, 2007). This study indicated that student veterans and student veterans with disabilities vary in their advancement through the military-community college transition and in their level of need during this transition. Therefore, designing a program that is designed to be flexible in order to meet the varying needs of all student veterans can increase access to services and provide sustained support.

Third, policies must support veteran/veteran, college/veteran and community/veteran partnerships. The research emphasized the role camaraderie and community partnerships had in reducing the severity and duration of the military-civilian transition and related identity crises. Additionally, these partnerships resulted in an increased capacity to seek help, aided transition and disability management, and fostered identity development. Further, these areas contribute to greater academic success and persistence and successful reintegration into civilian life. Policies can support these veteran/veteran, college/veteran, and community/veteran partnerships through clear definitions, regulations, and guidance; provide support for activities at the school level; and provide information and resources.

Finally, policies must support the reduction of the "silos of services" and integrate disability services into Veterans' Programs. The flaw with many current models of student veterans' programs lies in that there is no direct support provided for student veterans with disabilities. For this population of students, who find it difficult to accept their new identities, roles, disabilities and associated limitations, expecting them to innately know and seek out assistance on their own is extremely unlikely. Therefore, it could be convincingly argued that student veterans with disabilities would, or could, claim a place in the list of those not typically served well in postsecondary institutions (Branker, 2009). For this reason, as well as to support a Universal Program Design, policy support is necessary to insure access to disability services by embedding these services within the veteran program.

Future Research

Areas identified for future research included expanding the study to multiple institutions to better understand potential differences in regional, transitional needs and other service area needs. Additionally, this study focused specifically on male student veterans with disabilities. This sampling decision was both convenient and purposeful as the institution had fewer identified female veterans and the female student veteran experience has its own unique characteristics. Therefore, this research only focused on male veterans to avoid generalizing or diluting of the female veterans' experience. An area indicated for future research is to identify the needs of female student veterans with disabilities and examine their perceptions of their transition experiences, the barriers experienced in self-identifying and accessing services related to their disabilities, and the structures and services female student veterans with disabilities identify as factors that can facilitate their transition to college

Based on the participants' feedback, there is in indication that future research focused on a social justice perspective is needed to identify the prevalence of social stigmas towards PTSD and veteran-status. Further research should investigate the potential impact and limitations these social stigmas have for student veterans within their college communities and the impact this has on their success.

Additionally, the discovery of the therapeutic benefit community service provides for student veterans with disabilities indicates a need to implement and study the outcomes of a community service or service learning model. These opportunities

could be provided through the student veterans' club or veteran-specific courses. Specific areas of research in this area could identify best practices, appropriate timing during the military-community college transition, student veteran experience and outcomes, and the impact these opportunities have on transition, identity development, disability management, and persistence for student veterans. Particular proponents of the service-learning model of courses would benefit from also looking into the benefits for veteran students as well as other students undergoing a major life transition that includes the community college.

Further, the implementation of a first-year cohort model for student veterans to assist in the development of camaraderie and support could prove valuable. According to Saltiel and Russo's (2001) research, this type of learning model uses the power of the interpersonal relationships to enhance the learning process and provide additional support to the cohort members as they move toward program completion. Nimer (2009) confirms that adult learners juggling multiple priorities experienced an ease in stress and anxiety related to registration issues when engaged in a planned course of study. Further research on the outcomes and implications of the cohort model on the military-civilian transition for student veterans and student veterans with disabilities is recommended.

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APPENDICES

APPENDIX A

CONSENT TO ASSIST IN THE DEVELOPMENT OF

PARTICIPANT INTERVIEW QUESTIONS

You are being asked to participate in this study because you are a student veteran who at South County Community College who participates in the Veterans Resource Center and has identified as having a disability that may or may not be receiving services on campus through the Disability Resource Center. Participation in this research study is completely voluntary and you may withdraw your participation at any time. Please read the information below and ask questions about anything that you do not understand before deciding if you want to participate.

RESEARCHER
Brooke S. Boeding, a doctoral student at California State University, Stanislaus located in Turlock, California.

PURPOSE OF STUDY
The study is entitled: *Supporting the Camouflaged in Transition: Serving Student Veterans with Disabilities*. The purpose of this study is to identify the ways in which veterans with disabilities navigate the process of transition from their lives as members of the military community to participants of the community college. This study will analyze the subset of veterans with disabilities in a community college to identify the support structures and services that can help this population to navigate their academic experiences effectively.

PROCEDURES
The researcher will meet with you to develop interview questions that will support the study's purpose. You will be assured conditions of confidentiality. Topics discussed during the interview will include: (1) How do veterans with disabilities perceive their transition experiences from the military to the community college? (2) What are the barriers, personal or structural, that student veterans with disabilities experience in self-identifying and accessing services related to their disabilities? (3) What types of structures and services do veterans with disabilities identify as factors that can facilitate their transition into college?

Note taking - With your permission, the developed interview questions will written down and reviewed with you for clarity.
Total Time Involved:
You will be involved in this study during one day to participate in developing the interview questions. This process should be approximately an hour long.

RISKS

Participation in this study would entail three potential risks. The first risk refers to a break in confidentiality/anonymity, with possible consequences of a social, financial, legal, or political nature. Researchers will minimize this risk by assigning pseudonyms to all participants, not using exact department names or titles (except for the Veterans Resource Center and/or Disability Resource Center as applicable), and keeping all study records, including digital audio files and transcripts in a secure, password-protected computer. The researcher will be the only ones with access to said records. The second risk involves experiencing some degree of emotional distress before, during, or immediately after the interview. However, previous studies and research experiences suggest that semi-structured interviews with this kind of population will not cause long-term emotional harm or distress for participants. The third risk refers to the eventuality that the research-participant relationship could potentially influence administrative judgments if, in the future, the researcher accepts an administrative role and consequently have administrative authority over former participants.

BENEFITS

To the Participant

You may benefit directly from this study because you may find an opportunity to reflect on your academic experience and to develop a more comprehensive understanding of yourself, your involvement in The Veterans Resource Center Program and on campus.

To Others or Society

The questions developed will provide an opportunity for other student veterans with disabilities to share their experiences. This investigation will provide elements to make sense of the ways in which community colleges can improve services to student veterans with disabilities and potentially assist student veterasn with disaiblties in receiving services and attaining academic success. This information can guide the formulation of policies and academic programs that improve the participation of student veterans with disabilities in the achievement of their higher educational goals.

WITHDRAWAL OR TERMINATION FROM STUDY

You are free to withdraw from the study at any time. If you choose to withdraw from the study, you can communicate your decision immediately to the researcher without any negative consequences or interruption to campus services or programs. If you stop your participation in the study, the researchers will destroy any data received from you, including audiotapes and transcripts.

CONFIDENTIALITY

Data Storage

All research records, documents, and computer-based data will be stored in a locked cabinet and in a password protected computer.

Data Access

The researcher will be the only person who will have access to the study records to protect your safety and welfare.

IF I HAVE QUESTIONS?

If you have any comments or questions regarding the conduct of this research or your rights as a research subject, please contact the researcher: Brooke S. Boeding, 5055 Santa Teresa Blvd, Gilroy, CA 95020, (408) 848-4865 or email bboeding@gavilan.edu.

If you have any concerns or questions before or during participation that you feel have not been addressed by the researcher, you may contact my Primary Advisor and Dissertation Chair: Dr. Virginia Montero-Hernandez, California State University, Stanislaus, One University Circle, Turlock, CA 95382, (209) 664-6564 or email: vmonterohernandez@csustan.edu

IF I SHOULD NEED ADDITIONAL ASSISTANCE?

Following the study, should you feel you need additional assistance, please contact:

San Jose Vet Center	*Veterans Crisis Line*
278 N. 2nd St.	*1-800-273-8255, press 1*
San Jose, CA 95112	*Confidential chat at:*
Phone: (408) 993-0729	*VeteransCrisisLine.net*
Fax: (408) 993-0829	*Or Text to: 838255*

VOLUNTARY PARTICIPATION STATEMENT

I understand that participation in the development of this study's interview questions is voluntary. I may refuse to answer any question or discontinue my involvement at any time without penalty or loss of programs, services, or benefits to which I might otherwise be entitled. My decision will not affect my future relationship with South County Community College. My signature below indicates that I have read the information in this consent form and I consent to participate.

_____   _____
  Signature of the student participant   Date

APPENDIX B

SAMPLE OF SEMI-STRUCTURED STUDENT INTERVIEW QUESTIONS

1. Military Life
   a. What motivated you to join the military service?
   b. What were some of your duty stations?
   c. How did you decide to leave active duty?

2. Disability meaning and experiences (in life as a whole)
   a. Let's focus on your disability status and rating.
      i. Do you have a disability rating?
      ii. What is it?
      iii. What is your rating for?
      iv. Is PTSD calculated into your rating?
   b. How has your disability changed your life?
      i. What type of challenges does the disability involve?
      ii. How do you experience everyday life with your disability?
      iii. How do people interact with you? How do they treat you?
   c. What does having a disability rating mean to you?

3. Transition into civilian life
   a. What was the experience like transitioning out of the military?
   b. What was the most difficult part of the transition?
   c. What was the easiest part of the transition?
   d. How did your service related disability impact your transition?

4. Transition into the community college –
   a. Now let's focus on the transition to becoming a community college student.
      i. What made you decide to come to the community college after your military service?
      ii. What are you studying in college?
         1. How did you decide on this direction?
   b. Describe for me what the experience was for you being back at school (transition)
      i. What was the easiest part of the transition?
      ii. What has been the most challenging part of the transition?
      iii. Were there any people who were helpful in the process of becoming a community college student?

5. The college experience
   a. What are your biggest sources of support?
   b. Are you involved socially at the college?
   c. Can you tell me how has your experiences as a community college student since you started?
   d. What difficulties have you encountered when:
      i. Applying/Enrolling
      ii. Planning/Advising
      iii. Registering
   e. What has the community college done to assist with your academic success?
   f. What programs and services at the community college have been most helpful to you?

6. Disability and College
   a. How has your disability shaped your experience as a community college student?
   b. Have you identified your disability rating to the college to establish services?
      i. How does your military training or experience influences your decision to identify having a disability?
         1. What other influences impact your decision to identify having a disability?
      ii. Was this a difficult decision for you?
         1. Why or why not
      iii. Are you or were you hesitant to inform the college of your disability?
         1. What were the reasons you are hesitant?
   c. How did you learn about disability services on campus?
      i. What is your perception of the DRC office and services?
   d. What would have made it easier for you to utilize disability services on campus?
   e. How would you prefer your service related disability be addressed, referred to, or acknowledged?
   f. How important is confidentiality regarding your disability to you?

7. Closing
   a. What would you recommendations would you give to colleges to provide better services for veterans with disabilities?

       i.   What do you think is important for veterans

      ii.   What do you want colleges/instructors/others to know about student veterans with disabilities?

b.   Academically? Or in the learning environment?

APPENDIX C

DEMOGRAPHIC QUESTIONS FOR STUDENT PARTICIPANTS

- Your choice to participate or not participate in this study will in no way affect the services that you receive on campus or the programs that you participate in.
- Please answer the questions as thoroughly as you are comfortable and skip any questions that you do not feel comfortable sharing.
- Thank you for completing this brief questionnaire for this study. Your time and effort are very much appreciated.

Participant Name: _____

Date: _____

1. Sex:
   ___ Female
   ___ Male

2. Please check all that apply:
   ____Former military
   ____Reservist
   ____National Guard
   ____Student

3. Branch of the military:
   ____Air Force
   ____Army
   ____Coast Guard
   ____Marine Corps
   ____Navy

4. What was your military occupation (MOS, AFEC or NEC)?
   _____
   _____

5. Age Group:
   _____20 –24 years
   _____25 – 30 years
   _____31 – 35 years

_____36 – 40 years
_____41 – 45 years
_____41 – 45 years
_____46 – 50 years
_____51 – 55 years
_____56 – 60 years
_____Over 60 years

6. Ethnicity:
   ____Asian or Pacific Islander
   ____Native American or Alaskan
   ____Black, non-Hispanic
   ____Hispanic
   ____White, non-Hispanic

7. Do you have children?
   ____Yes   How many? _____   Ages: _____
   ____No

8. Do you have a service related disability or a disability rating with the VA?
   ____Yes
   ____No

9. What is your disability rating:
   _____%

10. If you feel comfortable sharing, what is your disability or disabilities that the VA gave you a disability rating for?

    _____
    _____
    _____
    _____

11. Do you have any other disabilities (learning or otherwise) that are not service related?

    _____
    _____
    _____
    _____

12. Have you identified your disability with the Disability Resource Center for assistance?
    ____Yes
    ____No

13. Please list the last two locations of employment other than the military:

Employer's Name: _____
Job/Position Title: _____
City /State/Country: _____
Dates employed: _____
Brief Job Description: _____
_____

Employer's Name: _____
Job/Position Title: _____
City /State/Country: _____
Dates employed: _____
Brief Job Description: _____
_____

14. Please choose your enrollment and program participation in the community college?

As a <u>present</u> student in a community college:
Total Number of Semesters _____

As a <u>former</u> student in a community college:
Total Number of Semesters _____

As a participant in the Veterans Resource Center at a community college:
Total Number of Semesters _____

As a member of the Student Veterans Organization at a community college:
Total Number of Semesters _____

Other positions in a community college (please specify): _____

Total Number of Semesters or Years _____

15. Have you ever been deployed? _____ Yes _____ No

If yes, please list all the countries and timeframes, which you have been deployed.

Location   Dates

_____

_____

_____

16. Please list your highest degree obtained, year and place:

	Year	Major	School Location
High School Diploma			
Trade School			
Associate			
Bachelor			
Master			
Doctoral			
Other			

17. Average hours worked at job per semester:
Part-time   _____ hours
Full-time   _____ hours

18. Average credit hours enrolled per semester:
1-12 credits   _____
13-20 credits   _____
>20 credits   _____

Thank you for taking time from your busy schedule to complete this form. The thoughtful sharing of your experiences is appreciated and is of great benefit to my research.

APPENDIX D

CONSENT TO ACT AS A HUMAN RESEARCH SUBJECT FOR INTERVIEWS

Supporting the Camouflaged in Transition: Serving Student Veterans with

Disabilities

You are being asked to participate in this study because you are a student veteran who at South County Community College who participates in the Veterans Resource Center and has identified as having a disability that may or may not be receiving services on campus through the Disability Resource Center. Participation in this research study is completely voluntary and you may withdraw your participation at any time. Please read the information below and ask questions about anything that you do not understand before deciding if you want to participate.

RESEARCHER
Brooke S. Boeding, a doctoral student at California State University, Stanislaus located in Turlock, California.

PURPOSE OF STUDY
The study is entitled: *Supporting the Camouflaged in Transition: Serving Student Veterans with Disabilities*. The purpose of this study is to identify the ways in which veterans with disabilities navigate the process of transition from their lives as members of the military community to participants of the community college. This study will analyze the subset of veterans with disabilities in a community college to identify the support structures and services that can help this population to navigate their academic experiences effectively.

PROCEDURES
The researcher will conduct an interview with you that will last from 1 to 2 hours. The time and place for the interviews will be negotiated with you. You will be assured conditions of confidentiality. Topics discussed during the interview will include: (1) How do veterans with disabilities perceive their transition experiences from the military to the community college? (2) What are the barriers, personal or structural, that student veterans with disabilities experience in self-identifying and accessing services related to their disabilities? (3) What types of structures and services do veterans with disabilities identify as factors that can facilitate their transition into college?

Audio recording – With your permission, the interview will be audio recorded. Following the interview, participants have the right to view their transcripts, correct any errors, and designate any quotations or information.

Total Time Involved:
You will be involved in this study during one day to participate in one individual interview. The interview session will last between 1 to 2 hours.

RISKS
Participation in this study would entail three potential risks. The first risk refers to a break in confidentiality/anonymity, with possible consequences of a social, financial, legal, or political nature. Researchers will minimize this risk by assigning pseudonyms to all participants, not using exact department names or titles (except for the Veterans Resource Center and/or Disability Resource Center as applicable), and keeping all study records, including digital audio files and transcripts in a secure, password-protected computer. The researcher will be the only ones with access to said records. The second risk involves experiencing some degree of emotional distress before, during, or immediately after the interview. However, previous studies and research experiences suggest that semi-structured interviews with this kind of population will not cause long-term emotional harm or distress for participants. The third risk refers to the eventuality that the research-participant relationship could potentially influence administrative judgments if, in the future, the researcher accepts an administrative role and consequently have administrative authority over former participants.

BENEFITS
To the Participant
You may benefit directly from this study because you may find an opportunity to reflect on your academic experience and to develop a more comprehensive understanding of yourself, your involvement in The Veterans Resource Center Program and on campus.

To Others or Society
This investigation will provide elements to make sense of the ways in which community colleges can improve services to student veterans with disabilities and potentially assist student veterasn with disaiblties in receiving services and attaining academic success. This information can guide the formulation of policies and academic management programs that improve the participation of student veterans with disabilities in the achievement of their higher educational goals.

WITHDRAWAL OR TERMINATION FROM STUDY
You are free to withdraw from the study at any time. If you choose to withdraw from the study, you can communicate your decision immediately to the researcher without any negative consequences or interruption to campus services or programs. If you stop your participation in the study, the researchers will destroy any data received from you, including audiotapes and transcripts.

CONFIDENTIALITY
Data Storage
All research records, including the audio recording, documents, and computer-based data will be stored in a locked cabinet and in a password protected computer.
Data Access
The researcher will be the only person who will have access to the study records to protect your safety and welfare.

IF I HAVE QUESTIONS?
If you have any comments or questions regarding the conduct of this research or your rights as a research subject, please contact the researcher: Brooke S. Boeding, xxxxxx, (408) xxxxxxx or email xxxxxxx.

If you have any concerns or questions before or during participation that you feel have not been addressed by the researcher, you may contact my Primary Advisor and Dissertation Chair: Dr. Virginia Montero-Hernandez, California State University, Stanislaus, One University Circle, Turlock, CA 95382, (209) 664-6564 or email: vmonterohernandez@csustan.edu

IF I SHOULD NEED ADDITIONAL ASSISTANCE?
Following the study, should you feel you need additional assistance, please contact:

San Jose Vet Center　　　　　　　　　　*Veterans Crisis Line*
278 N. 2nd St.　　　　　　　　　　　　　*1-800-273-8255, press 1*
San Jose, CA 95112　　　　　　　　　　*Confidential chat at:*
Phone: (408) 993-0729　　　　　　　　*VeteransCrisisLine.net*
Fax: (408) 993-0829　　　　　　　　　　*Or Text to: 838255*

PLEASE CHECK ONE OF THE FOLLOWING

☐　 I agree to have this interview audio recorded

☐　 I do not agree to have this interview audio recorded

VOLUNTARY PARTICIPATION STATEMENT

I understand that participation in this study is voluntary. I may refuse to answer any question or discontinue my involvement at any time without penalty or loss of programs, services, or benefits to which I might otherwise be entitled. My decision will not affect my future relationship with South County Community College. My signature below indicates that I have read the information in this consent form and I consent to participate.

_____　　　　_____
　　Signature of the participant　　　　　　　　　　　　　　　　Date

APPENDIX E

INTERVIEW PROTOCOL BRIEFING

Thank you for participating in my research entitled, Supporting the Camouflaged in Transition: Serving Student Veterans with Disabilities. The purpose of this study is to explore the experience of student veterans with disabilities who are transitioning from the military to the community college and to understand what services are being utilized and ways that services can better meet the needs of student veterans with disabilities.

This study is utilizing a form of research called Community-Based Participatory Research. This research will occur *with* student veterans with disabilities, rather than *on* them. This approach was chosen because *you* are the experts on your own experiences, strengths, needs, challenges, and capabilities. Therefore, you are the only ones who can effectively inform, educate, guide change and build a program to meet your needs. I am well aware that any decisions or changes made by those with little no knowledge or personal military experience; will likely not be what is needed, wanted, nor utilized. Your expertise is essential to this process.

During the interview I will be asking you questions about your experience transitioning out of the military and into the community college; your choice to utilize/not utilize campus programs and services; experiences with those services; and your input on ways to improve the community college experience for student veterans with disabilities.

Your participation and statements will be entirely confidential (as outlined in the Interview Consent form). I will also request that you please not share your responses to the interview questions with other student veterans on campus to maintain the integrity of the research.

These interview questions will be a springboard for a focus group discussion with student veterans with disabilities that will lead to recommendations to improving the community college experience of veterans at this institution as well as suggestions for improving the Veterans Resource Center on campus for current and future student veterans with disabilities.

If at any point you feel do not feel comfortable answering any of the interview questions, please inform me and we will immediately move on to the next question. If you feel that you would like to end the interview at any time,

please let me know immediately.

Your choice to participate or to not participate in this study will in no way affect the services that you receive at South County Community College or the programs that you participate in.

Following the interview, should you feel you need additional assistance, please contact:

San Jose Vet Center   *Veterans Crisis Line*
278 N. 2nd St.   *1-800-273-8255, press 1*
San Jose, CA 95112   *Confidential chat at:*
Phone: (408) 993-0729   *VeteransCrisisLine.net*
Fax: (408) 993-0829   *Or Text to: 838255*

Before we begin, I have two questions.

First, may I record this interview?

Second, do you have any questions for me?

APPENDIX F

CONSENT TO ACT AS A HUMAN RESEARCH SUBJECT FOR FOCUS GROUP

You are being asked to participate in this study because you are a student veteran who at South County Community College who participates in the Veterans Resource Center and has identified as having a disability that may or may not be receiving services on campus through the Disability Resource Center. Participation in this research study is completely voluntary and you may withdraw your participation at any time. Please read the information below and ask questions about anything that you do not understand before deciding if you want to participate.

RESEARCHER
Brooke S. Boeding, a doctoral student at California State University, Stanislaus located in Turlock, California.

PURPOSE OF STUDY
The study is entitled: *Supporting the Camouflaged in Transition: Serving Student Veterans with Disabilities*. The purpose of this study is to identify the ways in which veterans with disabilities navigate the process of transition from their lives as members of the military community to participants of the community college. This study will analyze the subset of veterans with disabilities in a community college to identify the support structures and services that can help this population to navigate their academic experiences effectively.

PROCEDURES
The researcher will conduct a focus group session, lasting 1 to 2 hours. The focus group location will likely occur in the Veterans Resource Center at South County Community College. The time will be negotiated with the focus group members. You will be assured conditions of confidentiality. Topics discussed during the focus group will include information obtained from individual interviews reviewing the following questions: (1) How do veterans with disabilities perceive their transition experiences from the military to the community college? (2) What are the barriers, personal or structural, that student veterans with disabilities experience in self-identifying and accessing services related to their disabilities? (3) What types of structures and services do veterans with disabilities identify as factors that can facilitate their transition into college?

Audio recording – With your permission, the focus group will be audio recorded. Following the interview, participants have the right to view their transcripts, correct any errors, and designate any quotations or information.

Total Time Involved:
You will be involved in this study during one day to participate in one focus group. The focus group session will last between 1 to 2 hours.

RISKS
Participation in this study would entail three potential risks. The first risk refers to a break in confidentiality/anonymity, with possible consequences of a social, financial, legal, or political nature. Researchers will minimize this risk by assigning pseudonyms to all participants, not using exact department names or titles, and keeping all study records, including digital audio files and transcripts in a secure, password-protected computer. The researcher will be the only ones with access to said records. The second risk involves experiencing some degree of emotional distress before, during, or immediately after the interview. However, previous studies and research experiences suggest that semi-structured interviews with this kind of population will not cause long-term emotional harm or distress for participants. The third risk refers to the eventuality that the research-participant relationship could potentially influence administrative judgments if, in the future, the researcher accepts an administrative role and consequently have administrative authority over former participants.

BENEFITS
To the Participant
You may benefit directly from this study because you may find an opportunity to reflect on your academic experience and to develop a more comprehensive understanding of yourself, your involvement in The Veterans Resource Center Program and on campus.

To Others or Society
This investigation will provide elements to make sense of the ways in which community colleges can improve services to student veterans with disabilities and potentially assist student veterasn with disaiblties in receiving services and attaining academic success. This information can guide the formulation of policies and academic management programs that improve the participation of student veterans with disabilities in the achievement of their higher educational goals.

WITHDRAWAL OR TERMINATION FROM STUDY
You are free to withdraw from the study at any time. If you choose to withdraw from the study, you can communicate your decision immediately to the researcher without any negative consequences or interruption to campus services or programs. If you stop your participation in the study, the researchers will destroy any data received from you, including audiotapes and transcripts.

CONFIDENTIALITY
Data Storage
All research records, including the audio recording, documents, and computer-based data will be stored in a locked cabinet and in a password protected computer.

Data Access
The researcher will be the only person who will have access to the study records to protect your safety and welfare.

IF I HAVE QUESTIONS?
If you have any comments or questions regarding the conduct of this research or your rights as a research subject, please contact the researcher: Brooke S. Boeding, xxxxxxx, (408) xxxxxxx or email xxxxxxx.

If you have any concerns or questions before or during participation that you feel have not been addressed by the researcher, you may contact my Primary Advisor and Dissertation Chair: Dr. Virginia Montero-Hernandez, California State University, Stanislaus, One University Circle, Turlock, CA 95382, (209) 664-6564 or email: vmonterohernandez@csustan.edu

IF I SHOULD NEED ADDITIONAL ASSISTANCE?
Following the study, should you feel you need additional assistance, please contact:

San Jose Vet Center	*Veterans Crisis Line*
278 N. 2nd St.	*1-800-273-8255, press 1*
San Jose, CA 95112	*Confidential chat at:*
Phone: (408) 993-0729	*VeteransCrisisLine.net*
Fax: (408) 993-0829	*Or Text to: 838255*

PLEASE CHECK ONE OF THE FOLLOWING

☐ I agree to have this interview audio recorded

☐ I do not agree to have this interview audio recorded

VOLUNTARY PARTICIPATION STATEMENT

I understand that participation in this study is voluntary. I may refuse to answer any question or discontinue my involvement at any time without penalty or loss of programs, services, or benefits to which I might otherwise be entitled. My decision will not affect my future relationship with South County Community College. My signature below indicates that I have read the information in this consent form and I consent to participate.

_____   _____
  Signature of the participant   Date

APPENDIX G

FOCUS GROUP INTERVIEW QUESTIONS

Determine recommendations to meet the needs of student veterans with disabilities.

1. Phase I - Moving In

    a. What ways can the Veterans Resource Center support the transition of veterans who also have a disability as they come to the college?

    b. What are ways each stigma could be addressed and/or minimized?
        1. Veteran
        2. PTSD
        3. Disability

    c. In light of these stigmas, both personal and social, what are ways the Veterans Resource Center can provide better support and service to student veterans who have a disability rating?

    d. How can the strengths/assets that veterans possess be built into and incorporated into VRC Services?

2. Phase II – Moving Through

    a. Looking at the theme of community and service:
        i. How can community building (family, friends, peers, college staff, etc.) be incorporated or strengthened in the VRC?

    b. What are your impressions of the new theme that developed of Community Service and the value obtained from continued service?

        i. Why do you feel this is this important?
        ii. How has being of service to others impacted you?
        iii. What are ways this can be incorporated or built into the VRC?

    c. What is the significance/importance of caring for the next group of veterans coming into the community college?

3. Phase III – Moving Out

a. Now that you have survived the transition and have learned to manage the impact of your disability…
    i. What about this experience are you taking with you?
    ii. What skills did you acquire that you can draw on in future transitions?
    iii. With what you know now, what would you want to pass on to other student veterans who also have a disability rating to increase their chances of success?

b. What does it mean to be a resilient veteran?

c. What is the next step for you?

APPENDIX H

VETERAN SERVICES INFORMATION FOR STUDY PARTICIPANTS

Veteran Services
Information for Study Participants

(U.S. Department of Veterans Affairs, 2016)

Helpful Website Links

The following represents Internet Sites of interest to Veterans. Providing these Internet Addresses/Sites does not constitute endorsement by the Department of Veterans Affairs of any Web site or the information, products or services contained therein. VA does not exercise any editorial control over the information you may find at these locations

Department of Veterans Affairs (www.va.gov)

1.	Board of Veterans Appeals	http://www.bva.va.gov/
2.	Business USA	http:/www.business.usa.gov
3.	Center for Minority Veterans	http://www.va.gov/centerforminorityveterans/
4.	Center for Veterans Enterprise & Business	http://www.vetbiz.gov/
5.	Center for Women Veterans	http://www.va.gov/womenvet
6.	eBenefits – Veterans On-line application:	https://www.ebenefits.va.gov/ebenefits-portal/ebenefits.portal?_nfpb=true&_portlet.async=false&_pageLabel=ebenefits_myeb_vonapp1
7.	Enrollment in VA's Health Care System	http://www.va.gov/healtheligibility/
8.	Faith-Based and Neighborhood Partnerships	http://www.va.gov/cfbnpartnerships
9.	Federal Benefits for Veterans and Dependents:	http://www.va.gov/opa/publications/benefits_book.asp
10.	History of Veterans Day	http://www.va.gov/vetsday
11.	Homeless Veterans Program	http://www.va.gov/homeless/index.asp
12.	National Cemetery Administration:	http://www.cem.va.gov
13.	National Center for Health Promotion & Disease Prevention	http://www.prevention.va.gov
14.	National Center for PTSD	http://www.ncptsd.va.gov
15.	National Resource Directory (DoD/DOL/VA)	http://www.nationalresourcedirectory.gov
16.	National Guard and Reserve	www.benefits.va.gov/guardreserve/
17.	National Veterans Employment Office	http://www.va.gov/jobs
18.	Office of Survivors Assistance	http://www.va.gov/survivors/
19.	Returning OEF/OIF Servicemembers	http://www.oefoif.va.gov
20.	Survivor Benefits Homepage	http://www.vba.va.gov/survivors/
21.	USA Jobs for Veterans	https://www.usajobs.gov/Veterans
22.	VA Advisory Committees	http://www.va.gov/advisory
23.	VA Benefits for Veterans of Enduring Freedom-Iraqi Freedom	vaww.va.gov/oaa/pocketcard/oefoif.asp
24.	VA Caregiver Support	http://www.caregiver.va.gov/
25.	VA Education Benefits and Servces	http://www.gibill.va.gov
26.	VA Health Services Research & Development: Women's Health	http://www.hsrd.research.va.gov
27.	VA Home Loan Guaranty	http://www.homeloans.va.gov

April 2015

Veteran Services
Information for Study Participants
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28.	VA Office of Small and Disadvantaged Business Utilization	http://www.va.gov/osdbu/index.asp
29.	VA Office of Research & Development – Women's Health	http://www.research.va.gov/programs/womens_health/default.cfm
30.	VA Public Affairs for News Releases	http://www.va.gov/OPA/pressrel/pressarchinternet.cfm and http://www.va.gov/opa/pressrel/opalist_listserv.cfm
31.	VA Statistics	http://www.va.gov/vetdata
32.	Vet Center Website	http://www.vetcenter.va.gov
33.	Veterans Benefits Administration	http://www.vba.va.gov
34.	Veterans Crisis Line	http://www.veteranscrisisline.net
35.	Veterans Employment Center	https://www.ebenefits.va.gov/ebenefits/jobs
36.	Veteran Employment Services Office	http://www.vacareers.va.gov/veterans/employment-coordination.asp
37.	Veterans Justice Outreach	www1.va.gov/HOMELESS/VJO.asp
38.	VHA CHAMPVA	http://www.va.gov/purchasedcare/programs/dependents/champva/index.asp
39.	VHA Online Health Eligibility and Enrollment:	http://www.va.gov/healtheligibility
40.	Women Veterans Health Program	http://www.womenshealth.va.gov

Department of Agriculture (www.usda.gov)

41.	Single Family Housing Direct Home Loans (Very Low and Low Income)	http://www.rd.usda.gov/programs-services/single-family-housing-direct-home-loans
42.	Single Family Housing Guaranteed Loans (Low and Moderate Income)	http://www.rd.usda.gov/programs-services/single-family-housing-guaranteed-loan-program
43.	Value Added Producer Grant Program	http://www.rd.usda.gov/programs-services/value-added-producer-grants
44.	Rural Veterans At A Glance	http://www.ers.usda.gov/media/1216115/eb25.pdf
45.	Supplemental Nutrition Assistance Program (SNAP)	http://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program-snap
46.	Women, Infants, and Children (WIC)	http://www.fns.usda.gov/wic/women-infants-and-children-wic

Department of Defense (www.defenselink.mil/)

47.	Defense Advisory Committee on Women in the Services (DACOWITS)	http://dacowits.defense.gov
48.	Defense Visual Information Center	http://www.defenseimagery.mil/index.htm
49.	DoD New Policy on Prevention and Response to Sexual Assault	http://www.sapr.mil

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Veteran Services
Information for Study Participants
Helpful Website Links

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50.	DoD Reserve Affairs	http://www.defenselink.mil/ra/
51.	DoD Mental Health	http://www.militarymentalhealth.org
52.	Military Funeral Honors	http://www.dmdc.osd.mil/mfh/
53.	National Resource Directory (DoD/DOL/VA)	http://www.nationalresourcedirectory.gov
54.	United States Army	http://www.army.mil
55.	The United States Marine Corps	http://www.marines.mil
56.	Unite States Navy	http://www.navy.mil
57.	United States Air Force	http://www.af.mil
58.	National Guard	http://www.nationalguard.mil
59.	United States Coast Guard	http://www.uscg.mil
60.	Popular DoD Resources	http://www.defense.gov/resources

Department of Energy (www.energy.gov)

61.	Troops to Energy Jobs	http://www.troopstoenergyjobs.com/
62.	Women @ Energy	http://www.energy.gov/diversity/listings/women-energy

Department of Labor (www.dol.gov/)

63.	American Job Center Network	http://www.servicelocator.org/
64.	America's Heroes at Work:	http://www.AmericasHeroesAtWork.gov
65.	DOL Employment & Training	http://www.dol.gov/vets
66.	National Resource Directory (DoD/DOL/VA)	http://www.nationalresourcedirectory.gov
67.	DOL VETS-Women Who Served	http://www.dol.gov/vets/womenveterans/
68.	DOL Women's Bureau-Trauma Informed Care Guide for Service Providers	http://www.dol.gov/wb/trauma/

Department of Health and Human Services (www.hhs.gov/)

69.	Agency for Healthcare Research and Quality (AHRQ)	http://webmm.ahrq.gov/

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Veteran Services
Information for Study Participants
Helpful Website Links

The following represents Internet Sites of interest to Veterans. Providing these Internet Addresses/Sites does not constitute endorsement by the Department of Veterans Affairs of any Web site or the information, products or services contained therein. VA does not exercise any editorial control over the information you may find at these locations

93.	Armed Forces Foundation	http://www.armedforcesfoundation.org
94.	Bar Association Legal Assistance for Military Personnel	http://www.abanet.org/legalservices/helppreservists
95.	Commissary Information Baby Program:	http://www.commissaries.com
96.	Disabled Veterans National Foundation	http://www.dvnf.org
97.	Employer Support of the Guard and Reserve	http://www.esgr.org/
98.	Funeral Ceremony Bugle	http://www.ceremonialbugle.com
99.	Metro, Washington Metropolitan Area Transit Authority:	http://www.wmata.com
100.	Military Records Correction (SF Form 293)	http://www.archives.gov/veterans/military-service-records/correct-service-records.html
101.	National Association of Child Care Resources and Referral Agencies	http://www.naccrra.org
102.	National Coalition for Homeless Veterans	http://www.nchv.org/.
103.	National Resource Directory (DoD/DOL/VA):	http://www.nationalresourcedirectory.org
104.	The Veterans Corporation, Doing Business with the federal Government	http://www.veteranscorp.org
105.	Veterans' Treatment Courts	http://www.nadcp.org/learn/veterans-treatment-court-clearinghouse
106.	Veterans Upward Bound (VUB) Program	http://education.military.com/timesaving-programs/veterans-upward-bound-vub
107.	VFW Unmet Needs Program for active duty, National Guard, and Reserves	http://www.unmetneeds.com.
108.	Women In Military Service For America (WIMSA)	http://www.womensmemorial.org
109.	Women's Overseas Service League	http://www.WOSL.org.
110.	Women's Policy , Inc:	http://www.womenspolicy.org/
111.	YWCA of Glendale	http://www.glendaleywca.org

Women Veterans Employment Resources:

112.	Allstate Insurance Company Training Program – California Residents Only	www.civilianjobs.com/allstate.htm

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