Life Beyond War: Supporting the Mental Health Needs of Student Veterans

October 2013

OVERVIEW – Two symposia were held to identify recommendations for serving student veterans enrolled in higher education. Administrators, educators, veterans, and student veterans participated in the symposia.

All participants had experience with student veterans and represented four- and two-year colleges or universities from both rural and urban locations. The group focused on supporting the mental health needs of student veterans, which resulted in 12 recommendations that will be shared with other colleges and universities.
Life Beyond War: Supporting the Mental Health Needs of Student Veterans

Introduction

The HSC Foundation and The National Veterans Center partnered with The Graduate School of Education and Human Development’s Department of Counseling and Human Development at The George Washington University on a project to identify recommendations for supporting post-9/11 veterans with disabilities enrolled in higher education programs.

Methodology

Two symposia were conducted, one in October 2012 and another in March 2013. Approximately 15 university and college representatives, veterans, and advocates participated in each symposium. A cross-section including both four- and two-year schools and both urban and suburban schools attended. Session topics focused on veteran needs, and for each identified need, participants discussed their institution’s response, challenges in serving the need, practices that have been successful, gaps in services, and resources needed to provide services. Initial topics included:

1. Integrated and accessible information
2. Isolation/disconnection with campus life
3. Accommodations
4. Preparation for transition to civilian employment
5. Family issues affecting study
A professional facilitator guided panel and group discussions. The findings and recommendations from the first symposium informed and guided the development of the agenda for the second symposium.

The topics that emerged from the first symposium were categorized into the following three topics and were the focus of the second symposium:

6. Mental health and barriers to access
7. New student veteran orientation
8. The U.S. Department of Veterans Affairs’ (DVA) slow pace in processing tuition reimbursement to veterans

After a comprehensive discussion, it was determined that the most overarching issue facing student veterans is mental health needs. Additionally, the student veteran orientation at each school should include information that supports their mental health and success in school.

This paper captures recommended suggestions to provide the best possible accommodations to student veterans as they transition from the military to civilian life. It will also be the foundation for the development of webinar training targeted to colleges and universities interested in improving mental health support and services for veterans. Further, the recommended solutions could serve as an excellent model for a “veteran friendly” campus.

**Rationale: Veterans in Higher Education**

Veterans are enrolling in higher education at record rates (O’Herrin, 2011). Given the demographic and experiential differences that veterans bring to college campuses, it is not surprising that they need different or additional accommodations. Unlike traditional college students, veterans tend to be older and are more likely to be married and/or have children, experienced one or more traumatic events, and been placed in situations that demand maturity and responsibility (American Council on Education, 2008). Many of the returning
veterans have a physical, emotional, or cognitive disability (Ely, 2008; O’Herrin, 2011). Campuses need to understand the issues faced, in order for veterans to be successful in higher education (American Council on Education, 2008).

**Post-9/11 Veteran Population in Higher Education**

Post-9/11 veterans are younger than veterans from previous wars and 73 percent are age 39 or younger. In addition to being younger than previous wars, post-9/11 veterans are more ethnically diverse, with non-Hispanic whites accounting for two-thirds of veterans under 39 (American Council on Education, 2008; Radford, 2009; O’Herrin, 2011). The proportion of female veterans is on the rise as well. Thirty years ago only 4 percent of the veteran population was women, whereas today it is approximately 16 percent.

While the active military and veteran population comprises around 4 percent of the entire undergraduate population in the United States, veterans account for about 75 percent of that 4 percent (Radford, 2009; O’Herrin, 2011). The veteran population has a very different demographic profile than that of their traditional, non-military student counterpart. Around 62 percent of veteran undergraduates have a spouse and/or child, which is a far higher proportion than traditional undergraduates. Of those 62 percent of veteran undergraduates, 33 percent are married with a child, 15 percent are married with no children, and 14 percent are single parents. An additional 35 percent are unmarried with no children and 3 percent are dependents (Ely, 2008; Radford, 2009).

In addition to demographic differences, veteran undergraduates select colleges for different reasons. Seventy-five percent of veteran undergraduates look at location as the primary factor, followed by program or degree at 52 percent and cost at 47 percent (American Council on Education, 2008; Radford, 2009). It is not surprising that cost is not the primary factor that veterans consider because the new Post-9/11 GI Bill gives veterans more flexibility in selecting a school as long as it is no more costly than the highest in-state tuition cost (U.S. Department of Veterans Affairs, 2008; Shankar, 2009). This means that veterans can select any in-state school without worrying about the cost of tuition.
Veterans also make different decisions about the type of school they choose. Veterans attend two-year institutions at much higher rates than their non-military, traditional student counterpart. Forty-three percent of veteran undergraduates attend a two-year school compared with 32 percent of non-military, traditional undergraduates. Thirty-four percent of veteran undergraduate students attend a public or private not-for-profit, four-year university compared with 54 percent of non-military, traditional undergraduates (Radford, 2009; O’Herrin, 2011). Given the over representation of veteran undergraduates at two-year colleges, it is important to ensure that two-year universities are included in discussing best practices for veterans on campuses.

The proportion of veterans seeking associate degrees is also much higher than that of non-military, traditional students. Nearly half of veteran undergraduate students are seeking an associate degree, compared to only one-third of non-military, traditional undergraduate students (Radford, 2009). Again, this highlights the importance of including two-year institutions in creating veteran friendly campuses.

Another difference of note is the full-time/part-time attendance choices of veteran undergraduate students. As discussed previously, student veterans often have more responsibilities, such as a spouse and children, which impacts their ability to attend college at a full-time rate. Less than a third of veteran undergraduate students attend college full-time for even part of the year and more than a third only attend college part-time for part of the year (Radford, 2009).

**Military to College Transition Challenges**

Unfortunately, demographic differences are not the only challenges for student veterans. Their wartime experiences may have left them with an array of physical and emotional disabilities that can make the transition from combat to classes very difficult. Combat experiences can especially create challenges for veterans when enrolling or returning to college. In order to make recommendations or propose solutions for assisting veterans in their transition to higher education, it is necessary to understand the challenges that veterans may face.

“The transition from military culture to campus life can be a difficult one for many veterans and those with combat experience may be more at risk as they navigate difficult challenges.”
Emotional Disabilities

Getting a full picture of the challenges can be difficult because many veterans are hesitant to talk about their experiences in combat or their feelings during the transition to the classroom (American Council on Education, 2010). Limited communication coupled with a unique and complicated transition can be especially stressful, which can lead to mental health concerns (Lokken, Pfeffer, McCauley & Strong, 2009). In many cases the stress of transitioning to college is an overlay on top of pre-existing psychological wounds such as Post-Traumatic Stress Disorder (PTSD) (Ely, 2008).

There are 300,000 veterans who suffer from PTSD; this equals about 20 percent of veterans overall and 30 percent of those who deployed multiple times (McManus, 2011). As a result, it is not unreasonable to assume that student veterans suffer from PTSD at comparable rates. PTSD can cause a variety of symptoms, such as remembering the traumatic event(s), hyperarousal, shutting down, depression, self-blame, interpersonal problems, and physical symptoms (Whealin, 2004; Ackerman, DiRamio & Mitchell, 2009; DiRamio & Spires, 2009).

These symptoms can be very disruptive for a student veteran both in the classroom and out of the classroom. When a veteran experiences symptoms in the classroom they can be so severe that the veteran needs to leave the class or get up and move around (Ackerman, DiRamio & Mitchell, 2009). This can be detrimental both academically and socially because unusual behavior can be isolating. The busy nature of college campuses can cause PTSD sufferers to experience more severe symptoms, which can lead to adverse impacts on course work and campus experiences (McManus, 2011; Gillespie, 2011; Ackerman, DiRamio & Mitchell, 2009).

Beyond PTSD, many student veterans will suffer from shame and moral turmoil (Sherman, 2010; Silver, 2011). There is a sense of guilt that many veterans experience as they try to reconcile the horrors of war with their own morality. Even as veterans tell themselves their wartime actions were out of necessity, there can still be an overwhelming sense of wrong doing (Silver, 2011). This guilt can be so extreme that it will lead to a veteran feeling as though they do not deserve to be a part of their community (Silver, 2011). In addition to the guilt of actions, many veterans will experience survivor guilt.
This occurs when the veteran feels guilty that their fellow service members were wounded or killed while they survived (Shearman, 2011).

The emotional disabilities that many veterans enter college with are evidenced by suicide rates among veterans. In 2010 there were more service members lost to suicide than to combat casualties (Silver, 2011). A survey by Student Veterans of America found that 46 percent of student veterans contemplated suicide and 20 percent had a suicide plan, where as only 6 percent of non-military, traditional students contemplated suicide (Boodman, 2011).

Female student veterans can have emotional disabilities that are different from their male counterparts. The especially high rates of sexual assault in the military make it more likely that female student veterans will have PTSD from a sexual assault (Sander, 2012). And in the current war environment the lines of combat are blurred, which means that many women are placed in combat and can have both PTSD from combat experiences and sexual assault (Sander, 2012; Gillespie, 2011; Ackerman, DiRamio & Mitchell 2009).

**Physical Disabilities**

Student veterans will surely start their college journey at a disadvantage if their psychological wounds are unaddressed and untreated; however, physical wounds also impose challenges for student veterans (DiRamio & Jarvis, 2011). Emotional disabilities such as PTSD, depression, and anxiety are not the only types of disabilities with which veterans struggle. The advanced medical treatments and rapid evacuation capabilities of the wars in Iraq and Afghanistan have left a record number of physically wounded veterans (Glasser, 2006; DiRamio & Jarvis, 2011). These wounds vary in severity and impairment but they can all affect a veteran’s experience on campus.

A veteran’s physical disability can be especially difficult because it is a relatively “new” diagnosis, meaning it is not something a veteran dealt with before entering the military. Individuals who are born with disabilities or became disabled early in life have had time to understand their disability and adjust their lives accordingly. In the case of traumatically wounded veterans, they may still be learning how their
disability affects their life and how to deal with it. Veterans often do not identify themselves as "disabled," instead they may identify with "wounded" (American Council on Education, 2010).

Not all physical disabilities are visible. In the case of traumatic brain injury (TBI) the physical injury can manifest itself as cognitive and emotional issues. It is estimated that more than a quarter of combat troops suffer from TBI (DiRamio & Spires 2009). These symptoms can include problems with memory, concentration and focus, organizing thoughts, sequential tasks, problem solving, decision-making, planning, and reading comprehension. The previous impairments occur on a continuum from very little impact to catastrophic impact (DiRamio & Spires, 2009). It goes without saying that cognitive impairments, even minor, would negatively impact academic performance.

Since veterans with physical disabilities are still adjusting and learning about their disability, they may be less likely to know about the disability services that are offered on campuses. And even when veterans know about available disability services, they may be less likely to utilize them because they do not identify themselves as a disabled student (American Council on Education, 2010). Just as with psychological wounds, student veterans will start their college journey at a disadvantage if their physical wounds and the implications of those wounds are left unaddressed (DiRamio & Jarvis, 2011).

**Isolation/Interaction with Other Students**

Veterans will generally have a different outlook on classes and school in general; they may view it as a mission to be completed (Ely, 2008). This focus can make traditional college activities unappealing to veterans, which can lead to isolation from peers on campus (Rumann & Hamrick, 2010).

Veterans experience difficulty relating to other students on campuses who have not been in the military because they do not understand the experiences of veterans, and students who have not been in the military may have trouble communicating with student veterans (Rumann & Hamrick, 2010). Student veterans have reported feeling uncomfortable after being asked inappropriate questions about combat experiences (American Council on Education, 2008; Ackerman, DiRamio & Mitchell, 2009).
There may also be less common interests between student veterans and non-military, traditional students as non-military students tend to be younger and can be more focused on their social lives and their new found independence from parents. These feeling are completely contrary to the sense of brotherhood and close friendships that service members experience in the military and especially in combat zones (Boodman, 2011).

The loss of close friendships can increase the sense of isolation that veterans feel on campus if they are not replaced in a timely manner. Beyond the isolation in general on campuses, veterans may feel spotlighted in classes if professors single them out when discussing foreign policy or political issues (Boodman, 2011). One veteran reported a professor referring to American soldiers as terrorists. It is not surprising that the veteran did not complete the class (Ackerman, DiRamio & Mitchell, 2009).

Female student veterans can experience isolation symptoms at even higher rates than their male student veterans because they are less likely to participate in veteran-oriented activities (Sander, 2012; O’Herrin, 2011). The proportion of female student veterans on campuses is at far higher of a rate than that of the military, although there is a very low turnout of female student veterans in veterans support programs on campuses (Sander, 2012). Female student veterans also do not identify themselves as veterans at the same rates as male student veterans. Some female student veterans choose not identify themselves as veterans, which makes the challenge to help veterans on campus more difficult (Sander, 2012).

In general, the views and priorities of student veterans and those of non-military students have little alignment. This can create added stress to the college transition as student veterans become frustrated with their younger and often more naïve counterparts. Isolation, stress, and frustration will increase the likelihood that student veterans will experience psychological problems (Boodman, 2011).

**Family Issues**

Veterans entering school with families (spouse and/or children) can add additional stressors in the form of financial concerns, balancing school and family time, and staying focused in class and while doing homework. In addition to the immediate challenges of caring for a family while being a full-time student,
many veterans and their families have been through multiple deployments and may still be adjusting to homefront life as a family (American Council on Education, 2010).

Military families can experience tremendous hardship as they are uprooted for changes in duty stations, which can mean changing jobs for spouses and schools for children. Service members undergo multiple deployments, which can change parental roles in families and distance family members both geographically and emotionally (American Council on Education, 2010). All of these challenges increase the stress that veterans and their families face.

**GI Bill**

The GI Bill can be difficult and confusing to navigate, especially if campuses do not have a solid veteran’s service office to assist with GI Bill benefits. In many cases, GI Bill benefits are delayed for months, leaving veterans unable to pay tuition in the meantime (Ackerman, DiRamio & Mitchell, 2009).

**Academic Planning and Structure**

Many veterans returning to college have little assistance when selecting an academic course of study. There is very little insight into the jobs available to veterans with different degrees and many veterans end up selecting their course of study and career based on what they did in the military (Young Veterans Think Tank Project, 2010). A lack of proper academic and career planning can lead to disappointment and frustration if career expectations were unrealistic.

College is an unstructured environment and while there is an expectation to go to class, attendance and study habits are left up to the student to manage. Contradictory, the military is an extremely structured environment where almost everything is planned and in some instances every minute of the day is scheduled in advance (Rumann & Hamrick, 2010). It can be difficult to manage the responsibilities of classes without having the structure associated with the military (Boodman, 2011). This lack of structure can add to the difficulty of the transition to college for veterans, as the lax atmosphere of college can be overwhelming and frustrating (Ackerman, DiRamio & Mitchell, 2009).
Military Culture

Being part of the traditional military culture that values strength and self-reliance lends itself to imposed barriers to seeking support. The following is a list of these of culture related obstacles:

Underuse of Available Resources

Many veterans simply do not realize they need help and remain unaware of available resources on campus and in the community. Some veterans feel that the issues they face are not severe enough to warrant using resources that could be made available to someone with greater needs.

Equating Help with Failure

Veterans often view needing help as a sign of weakness and failure. They feel they should be able to “get it together” on their own, and knowing that they cannot does not make them more likely to seek assistance. For example, a veteran with a family may not want to admit the need for help because doing so would be an admission that he or she could not protect the family or be a good role model.

The Stigma Associated with Seeking Help

For anyone with mental health issues (including but not limited to veterans), there is a stigma associated with seeking assistance. People with mental health issues do not want others to know about—and potentially judge them on—their problems. For veterans, the stigma associated with accessing mental health services may be a much larger issue than for those without a military background because veterans are accustomed to an environment with little or no privacy or confidentiality. In some cases, the way services are structured can have an impact on the degree of stigma and the willingness to seek help. For example, student veterans may be reluctant to walk into a center with a large sign that says “counseling” over it. Instead, they need to be able to see a counselor without anyone else knowing about it, thus avoiding being labeled or stigmatized.

“Many veterans simply do not realize they need help and remain unaware of available resources on campus and in the community.”
Untrained Counselors

Many colleges and universities offer counseling services, but relatively few have counselors who are veterans, or counselors who either have training on the unique issues that veterans face or substantial experience working with veterans. Consequently, veterans often cannot develop a connection with these individuals and stop coming to counseling sessions. Veterans can also have a difficult time connecting with their professors for the same reasons.

Despite the current efforts by mental health professionals to fulfill the needs of military service members, they cannot keep pace with demand. The mental health effects of service members returning from deployments to Iraq and Afghanistan are of increasing importance to examine and have not been fully satisfied.

The rising need for mental health support is evident. Research has shown that deployment and exposure to combat result in an increased risk of PTSD, major depression, substance abuse, functional impairment in social and employment settings, and the increased use of health care services (Hoge, Aushterloine, & Milliken, 2006). A recent study showed that service members returning from Operation Enduring Freedom and Operation Iraqi Freedom are seeking mental health services from the DVA in unprecedented numbers, with 29 percent of these veterans seeking such services as compared to 10 percent of Vietnam War veterans (Christensen & Yaffe, 2012).

Recommendations

Symposia participants fully recognized that not all colleges and universities serve the same number of veterans and that the individual characteristics of student veterans can differ. Additionally, the resources available to serve student veterans vary widely among institutions. But despite these challenges, experts at the two symposia proposed that colleges and universities can improve the experiences of veterans on their campuses by building on or coordinating existing student services.
The following 12 recommendations capture suggestions from the symposia to support the mental health needs of student veterans and provide the best possible accommodations to student veterans as they transition from military to civilian life:

1. **Develop a Plan to De-stigmatize Support Services**

Veterans must be made aware of available services and be convinced to utilize them, and efforts should be made to better understand the culture of veterans and to make accessing services more comfortable. Additionally, offices on campus should become more flexible about documentation requirements necessary to establish eligibility for services. As part of this effort, simple steps should be taken to change the labels used, such as avoiding large signs that advertise mental health services and using words with less stigma associated with them, such as “counselor” instead of “therapist.” In some cases, services should initially be provided in the veterans support center. Over time veterans may be willing to move to the counseling center that provides counseling services for all students.

2. **Provide a Welcoming Initial Environment and “Warm Hand-offs” to Resources**

Veterans need to feel welcome when they first walk into a support center to ask for help; consequently, it is critically important that staff within the center understand the issues veterans face. Ideally, someone in the center should be a veteran. If that is not possible, then consideration should be given to hiring a student veteran to help out, which sends a strong signal that the center is a “veteran-friendly.” In addition, those who initially see veterans need to provide a “warm hand-off” to other resources as needed.

3. **Hire Learning Specialists**

Many veterans enter college without having studied in years. Consequently, they need access to specialists who teach basic skills to ensure learning and academic success, such as how to organize homework, study for a test, and write a research paper.
4. Provide Adequate Accommodations for Veterans with PTSD

Student veterans with PTSD and/or Attention Deficit Hyperactivity Disorder symptoms may need additional accommodations, such as a private room where they can take an exam.

5. Hire Experienced and Trained Counselors

While many colleges and universities have mental health counselors available on campus, relatively few have counselors who have experience with veteran issues, and even fewer have counselors who are veterans themselves. In an ideal world, veterans could receive counseling services from those who have “walked in the same boots” and have firsthand experience with veteran issues. To that end, colleges and universities should look to hire more counselors who are veterans. It is likely not realistic, however, for all schools to hire veteran counselors, and in some cases state laws may make it impractical. For example, a state university may not be able to require that applicants for counseling positions be veterans; instead, the job advertisement can only note that a veteran is “preferred.”

For the many schools that will be unable to fill counselor positions with veterans, attempts should be made to hire counselors who have training on the unique issues that veterans face and/or substantial experience working with veterans. These training programs must be rigorous, teaching counselors about military culture, terms, benefits, and other issues, because veterans will quickly see right through any counselor who attempts to “fake it” when it comes to understanding military culture. At a minimum, schools need at least one counselor who understands military issues to serve as the main contact person for veterans. For schools that do not have enough counselors with military experience or knowledge, consideration should be given to bringing in student veterans who can talk to other veterans on a peer-to-peer basis.

6. Provide Mentors

Veterans who leave the military often feel they have lost a “safety net” of officers and peers who functioned as mentors. Consequently, schools should consider setting up an informal peer mentoring system for student veterans. Among other benefits, these mentors can help to diffuse the stigma associated with accessing mental health services.
7. Establish Support Groups

These groups are an efficient way to help multiple students simultaneously, and can also serve as a good entry point for those who might need additional help. Some schools have such groups, but many more need to put them in place or use them more broadly. Anyone with appropriate training can facilitate a support group, including a student veteran. The goal is to provide social connections, helping student veterans understand that they are not alone and that others are dealing with the same kinds of issues. Understanding this reality immediately instills a sense of hope. Support groups also allow veterans to cultivate a network of individuals who know them on a deeper level. Often the group process takes on a life of its own and veterans learn to connect with each other and start to build their own identity in the civilian world, which can be different than their identity in the military world. Of course, some individuals will need more help than the group can provide. For these individuals, the group may be the impetus they need to seek assistance, as it is sometimes easier to hear that one needs help from a peer than from a counselor or group leader.

The success of any support group will depend on whether people show up on a consistent basis. In some cases, it may make sense to set up “time-limited” support groups that meet for a defined number of weeks or months. Several organizations help schools and universities in setting up and maintaining support groups, including Student Veterans of America, which promotes a peer-to-peer support model, and Vets for Vets.

8. Invest in Hiring and/or Training Support Group Leaders

The success of a support group also depends on having a talented leader who knows how to make participants feel welcome and comfortable opening up to others. Schools should consider providing training on how to be an effective peer support group leader. The training should focus on how to get individuals to come together and discuss and share ideas. Interestingly, the most effective way to teach these individuals to lead a group is to have them first be a participant in a support group.

“Support groups allow student veterans to cultivate a network of individuals who know them on a deeper level. The goal is to provide social connections, helping them understand that they are not alone and that others are dealing with the same kinds of issues.”
9. **Provide a Drop-in Center**

For some veterans, becoming part of a structured group may initially seem intimidating, and as a result, schools also need to consider having a drop-in center with trained peer counselors. The center can be an unintimidating way for a reluctant veteran to take the first step toward accessing help. Initially, the veteran may simply get a cup of coffee or play pool with a fellow student. Over time, he or she may begin to open up to peers on an informal basis and agree to try a structured group or see a counselor. In essence, the drop-in center represents another potential entry point, one that requires no commitment beyond just showing up. This type of informal, peer-to-peer social network may be the best entry point for many veterans to see firsthand the benefits of being understood by others and accessing available resources.

10. **Have Multiple Entry Points to Group Resources**

While a drop-in center may be the best entry point to reach veterans on a social level, schools need multiple entry points for veterans (drop-in centers, informal groups, formal groups, counselors), as different individuals will feel comfortable with different venues. No single solution will be right for every student. The goal should be to provide multiple, comfortable options for veterans as well as other student populations.

11. **Establish a Central Information Resource**

While multiple entry points are needed, there is also a need for a central resource to collect information on all the different veteran-related activities going on at the school. Schools should take notice of the fact that the existence of too many activities could lead to diluting interests in individual programs and services; therefore, a central resource can help to coordinate and support the various activities and events.

It can also help to identify duplicative efforts and bring different offices of the school together to work collaboratively. Unfortunately, the idea of cross-department collaboration tends to be foreign in many schools, as political issues encourage department leaders to “hold their cards close to the vest.” With respect to veteran issues, however, this mindset needs to change, as school and department leaders need to have an
open, collaborative approach focused on the common goal of supporting student veterans across the university, not just in one particular school or department. Student Veterans of America plays this clearinghouse role at some schools, working to promote communication and coordination across various departments (e.g., the schools of medicine, business, law, etc.), each of which also has its own group supporting veterans. It typically makes sense to have these separate school-specific groups; for example, the business school group will focus on helping veterans secure a job, while the medical school group may focus on helping them find the right residency program.

12. Develop and Implement a Comprehensive Student Veteran Orientation

Schools need to have an effective orientation process that makes veterans feel welcome in a new, unfamiliar environment. Unfortunately, many colleges and universities offer little assistance to veterans when they first arrive on campus, particularly smaller schools that may or may not have a full-time person who works with the DVA. While all schools have a certifying official, smaller ones often assign someone to this role on a part-time basis, with other responsibilities frequently taking precedence.

Large schools with multiple undergraduate and graduate programs should tailor their veteran-specific orientation to the specific subpopulations of veterans present at the school. The content of these sessions may vary across schools and departments, but overall, an orientation that is supportive of veterans is paramount to their mental health and necessary to ensure a successful beginning.

Suggested Practices for Student Veteran Orientations

Orientation Course

Some schools already offer for-credit classes designed to help freshmen succeed. The same approach could be used to support veterans, with a semester-long class focused on helping veterans transition effectively. Creating a veteran-specific course with outside speakers, peer mentors, and

“A central information resource can help coordinate the various veteran activities and events and bring together different parts of the school to work collaboratively.”
other resources could be leveraged to help veterans learn many skills that others may take for granted, such as how to budget finances, organize coursework, study for a test, write a research paper, interview for a job, and write an effective resume. Ideally, the course would offer multiple credits and be mandatory for student veterans. Only large schools could likely offer such a course, and even then administrators may be reluctant to do so unless they clearly understand the goals and potential value. Moreover, not all schools will have someone qualified to develop and teach the curriculum, nor is it clear what department the class would be a part of and who would pay the faculty member’s salary. It is possible that the teacher/facilitator could be a volunteer. Also, with a for-credit class, it might be possible for GI bill funds to pay for it through the tuition payments made on behalf of veterans, which typically go to the university. For schools able to offer such courses, however, the class can serve as a comprehensive, veteran-specific orientation to the school and also facilitate the formation of informal and formal support groups.

### Introduction to Veteran Support Services

Most schools will not have the luxury of providing a semester-long orientation course for veterans. Instead, the more typical approach is for the on-campus student veteran association or veteran center to block off one or two hours during the general orientation to provide an introduction to campus life for veterans, including available services. Topics usually focus on benefits and support services, including mental health and disability services. This approach is not ideal, and in some cases it can be difficult to get students to attend. In such a short session, the key is not to overwhelm student veterans, who may be distracted by other orientation activities, but rather to focus on a simple three-part message: the school offers a welcoming environment for veterans; support services are available; and how they can access the services. Ideally, student veterans should leave with a single point of contact that can direct them to available resources.

### Additional Session

The brief orientation previously described is typically not adequate to fully introduce veterans to campus life. Schools unable to offer a semester-long course should consider offering
a lengthier, follow-up session sometime shortly after the general orientation. This session could take the form of an off-site, one-day retreat.

**Checklist of Resources**

Regardless of the approach used (i.e., a semester-long course, one brief session as part of the general orientation, or a brief session combined with a lengthier session shortly thereafter), veterans also need to have a list of all available resources. To that end, schools should develop a brief checklist that introduces the veteran to key resources, including the veteran center, the federal work-study program, support groups, and counseling services. The checklist should briefly describe what each service can do for the veteran, and provide a single point of contact to call for additional information or support in accessing these services.

**Integration of Career Support Services**

Many veterans continue to face challenges securing employment, as businesses remain reluctant to hire them due to various stereotypes attached to veterans. Consequently, part of any school’s orientation process needs to emphasize the veteran career support services available, including career counseling.

**Conclusion**

The implementation of the Post-9/11 GI Bill in August of 2009, combined with the troop drawdown, contributes to record numbers of veterans entering higher education. Many of these veterans will have mental, emotional, and physical disabilities, and many campuses are ill-equipped to accommodate them. In order for veterans to be successful on campuses across the nation, institutions must provide appropriate support and resources.

**Moving Forward: The Need for Advocacy**

The recommendations in this paper should be considered although it is understandable that the implementation
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of these recommendations may be difficult in some settings. Symposia participants encouraged advocates to consider the need to lobby Congress for legislation or other actions that would help facilitate the development and spread of these programs. Virtually every state has at least one congressional representative who identifies with and focuses on veteran issues. In addition, both the U.S. Senate and House of Representatives have committees that focus on veteran affairs. At the state level, moreover, bipartisan coalitions often exist within the legislature that can move the ball forward in supporting the development of school-based programs for veterans. However, actions will not occur at either the federal or state level without a concerted, advocacy effort and the key to success is for schools facing similar situations to join together. Administrators, faculty, and staff need to work together to engage in joint advocacy within their own school and to connect with other organizations that advocate on behalf of veterans. Forming coalitions would allow interested organizations to work hand-in-hand with the various committees that can move specific pieces of legislation and with legislators who make veterans and veteran issues a top priority.

As an initial goal, symposia participants urged those leading advocacy efforts to consider convincing legislators to make the full one-semester orientation course a requirement. This course can serve as an excellent transition vehicle for veterans and can also be a critical entry point that facilitates access to other needed services; however, it is important to remember that this course should not be seen as a “magic button” that solves everything. Rather, the broader goal should be to convince colleges and universities that receive significant money from the DVA of their responsibility to support student veterans by having a wide array of services organized in a way that makes it easy for veterans to access them with little or no associated stigma.

Next Steps

There are three major outcomes to this project: First, this paper identifies and describes 12 recommendations that will be shared with colleges and universities wanting to improve mental health services for student veterans. Second, a training webinar to present and discuss the recommendations will be provided to interested colleges and universities. Third, the symposia experts have decided to form a coalition and continue to meet and share best practices on a continuing basis.
References


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**Contributors**
Matthew Feger, Student Veterans of America
Jessie MacKinnon, The HSC Foundation
Son P. McBride, The HSC Foundation

**Editor**
Eva R. Fowler, The HSC Foundation

**Press Contact**
efowler@cscn.org, 202-480-2341
The HSC Foundation is dedicated to improving access to services for individuals who face social and health care barriers due to disability, chronic illness, or other circumstances that present unique needs. The HSC Health Care System is a multi-faceted organization that weaves together a care coordination plan (Health Services for Children with Special Needs, Inc.), pediatric specialty hospital (The HSC Pediatric Center), and home health agency (HSC Home Care, LLC) with a parent organization, The HSC Foundation. Together, the System offers a comprehensive approach to caring, serving, and empowering individuals with disabilities.

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