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Cover Page Footnote

Mentor: Dr. Elena Klaw This study was conducted in collaboration with Sophia Alcala.

 <p>Jemerson Diaz</p> <p>Major: Psychology Minor: Communications Studies</p> <p>Mentor: Dr. Elena Klaw</p> <p>From Caution to College: The Effects on Veterans with Self-Reported Trauma Symptoms Sharing their Experiences with the Campus Community</p>	<p>Biography</p> <p><i>Jemerson Diaz is a graduating senior with a BA in Psychology and a minor in Communications Studies. He is one of the co-presidents of the SJSU Psi Chi Chapter, an International Honors Society for Psychology. He has been awarded EOP Honors and is a Dean's Scholar and the recipient of the Spring 2017 College of Social Sciences (CoSS) Charles Burdick Scholarship Award from the CoSS Dean's Office. He serves the campus community as a Mental Health Ambassador as well as the campus community as the Veterans Embracing Transition (VET) Connect Peer Manager. He is currently doing research on military acculturation with Dr. Shannon McCaslin and Dr. Ellen Herbst at the Palo Alto and San Francisco Veterans Affairs (VA). His plans are to pursue a Master's in Public Administration in order to build the skills necessary to develop his own non-profit organization designed to allow individuals labeled with psychological disorders to take ownership and fight the stigma set upon them by cultural and social norms.</i></p>
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From Caution to College: The Effects on Veterans with Self-Reported Trauma Symptoms Sharing their Experiences with the Campus Community

Abstract

Over 900,000 veterans are using benefits for higher education today; the vast majority of them served in the Global War on Terrorism (GWOT). Over 25% of GWOT service members that have been treated by the Veterans Affairs (VA) are reported to have symptoms of posttraumatic stress or posttraumatic stress disorder (PTS/PTSD). PTS/PTSD negatively impacts student veterans' abilities to navigate stressful environments such as college and university settings. The Veterans Embracing Transition (VET) Connect Program at San José State University (SJSU) is designed to connect veterans with non-veterans as peer educators. Five of the 13 VET Connect peer educators (38.5%) who were interviewed reported having symptoms of PTSD. Through their service as peer educators on and off campus, these participants demonstrated signs of healthy coping effects through sharing experiences and educating non-veterans of the struggles related to military culture, service, combat, and loss. This study was conducted in collaboration with Sophia Alcala. We worked on independent research questions and observations using data derived from the same larger study simultaneously under the supervision of Dr. Klaw.

Introduction

Over 900,000 veterans are using the benefits they earned through serving for higher education in colleges and universities today (U.S. Government Accountability Office, 2013). There are veterans in college that have been exposed to firefights, improvised explosive devices (IEDs), vehicle-borne improvised explosive devices (VBIEDs), and mutilated bodies of their fellow warriors, the enemy, and innocent victims. Due to this type of exposure, posttraumatic stress disorder (PTSD) is prevalent in college veterans, affecting 46% of a sample of 628 student veterans in a national survey (Rudd, Goulding, & Bryan, 2011). Deahl, Klein, and Alexander (2011) report that service-members who re-deploy into combat

theatres are three times more likely to develop symptoms of PTSD than those who deploy only once.

Veterans with posttraumatic stress or posttraumatic stress disorder (PTS/PTSD) have unique difficulties when transitioning from military culture to the civilian life. Many student veterans who face psychological distress resort to isolating themselves from the public (Glover-Graf, Miller & Freeman 2010). It is important that student veterans with PTS/PTSD learn how to cope with past traumatic memories and/or events in order to integrate into college and have a successful transition into the overall civilian community (Ness, Rocke, Harrist, & Vroman, 2014). The objective of this paper is to explore what factors may contribute to healthy coping among service members with PTS/PTSD in a public college university atmosphere. This study was conducted in collaboration with Sophia Alcala. We worked on independent research questions and observations using data derived from the same larger study simultaneously under the supervision of Dr. Klaw.

Symptoms of PTS/PTSD and the College Setting

Some symptoms of PTS/PTSD may include flashbacks, triggered distress, triggered physical reactions, avoiding related thoughts or atmosphere(s) of the traumatic event, self-blame, negative beliefs against self and others, loss of interest in activities once enjoyed, irritability, aggressive behavior, hypervigilance, feeling emotionally numb, being easily startled, variable levels of concentration, and signs of disturbed levels or lack of sleep (Bovin et al., 2016).

Although the university setting is not a combat theatre, stress factors such as social isolation, frustrations among “limited perspectives,” and poor work ethic among fellow college students can trigger student veterans with PTS/PTSD (Ness, Rocke, Harrist, & Vroman, 2014). Understanding the basics of PTS/PTSD symptoms allows for improved recognition, comprehension, and interaction between non-veteran students/faculty that do not have this condition and student veterans that do have PTS/PTSD (Ness et al., 2014).

Sharing Experiences

Veterans that have experienced intense stress while in the military tend to keep that stress held inside when they return home (Seal, Bertenthal, Miner, Sen, & Marmar, 2007). Sharing stressful experiences with concerned individuals who listen is important for veterans to transition effectively to social activity, civilian life, and to the new college university setting (Russell, 2013). Research shows that when people express themselves in ways that reveal their vulnerability, internal growth and strength begin (Asmundson, Coons, Taylor, & Katz, 2002).

Campus Resources for Student Veterans

There are campus resources for student veterans across the U.S. on public and private universities (Cook & Kim, 2009). For SJSU, the Veterans Resource Center (VRC) located in the Student Union is available for veterans to access educational and supportive benefits such as the Montgomery G.I. Bill, outreach programs for assisted living, housing allowance, computer usage, printing, study lounge, and general veteran camaraderie (Military and Veteran Student Services, n.d.).

The services provided at the SJSU campus along with the majority of campuses nationwide focus on serving student veterans (Rumann, & Hamrick, 2009). Although these programs have positive intentions, unfortunately many student veterans choose not to take advantage of them for reasons that include several aspects of military culture (Badger, & McCuddy, 2014). One trait of military culture revolves around the idea that service members do not want to be helped; rather, they want to serve (Hall, 2011).

Student veterans that face psychological distress are able to access counseling services on campus (Rudd, Goulding, & Bryan, 2011). Studies have found however, that counseling alone is not sufficient for increased growth, development, and integration in individuals that face distress (Vera & Speight, 2003). One method that has been found to develop a strong foundation regarding integration in higher learning is peer-to-peer mentorship (Colvin, J. W., & Ashman, M. (2010).

Veterans Embracing Transition (VET Connect)

The VET (Veterans Embracing Transition) Connect Peer Leadership Program is a peer education program for student veterans at

SJSU developed by Dr. Elena Klaw. The ultimate goal for VET Connect is to act as a vehicle for reintegration into the community, specifically the university campus. VET Connect Peer Leaders are expected to educate the public through means of public speaking, workshops, and interpersonal connections.

A qualitative study was conducted from 2015–2016 to see the major overall effects and benefits that the VET Connect Peer Leaders gained throughout the past five years since the establishment of the program. The major themes that were found were **Increased Connection, Increased Self-Growth and Integration**, and an **Increased Sense of Purpose** among 100% (13 out of 13) of the VET Connect Peer Leaders that participated in the study.

Overall, the findings suggest that VET Connect may serve as a potent high-impact practice that engages veterans in higher education and reduces the loneliness and distress that often accompanies the transition from the military to the civilian world.

The Current Study

VET Connect acts as a platform for student veterans to express themselves verbally. The participants spoke on panels, directly to students, and conducted interactive workshops. This atmosphere allowed the participants to express themselves emotionally and share stressful experiences with a non-veteran community that was willing to listen to their stories.

The research revolved around the following research question: How does participation as a peer educator affect the experiences of student veterans that have self-reported symptoms of PTS/PTSD?

Methods

The Larger Study: Participants

Out of 22 VET Connect Peer Leaders, 13 agreed to be interviewed either in person or via telephone. All of the participants identified as male. The branches that were represented included the U.S. Marine Corps, Navy, Army, Air Force, and the National Guard. Thirty-eight percent of the participants identified below the age of 30, 31% identified as above 30 but

below 40, 15% reported as above 40 but below 50, and 15% reported to be older than 50 years old.

The Current Study: Participants

Five of the 13 participants who served as VET Connect Peer Leaders who were interviewed in a qualitative setting self-reported symptoms of PTS/PTSD. One hundred percent (5) were male, 60% (3) represented the Marine Corps and 40% (2) represented the Army. In terms of age, 20% of participants (1) were between 18 and 30, 60% (3) ranged from 31 to 40, and 20% (1) reported his age between 41 and 50. Eighty percent (4) of the participants have served in a combat theatre.

Procedures

One VET Connect Peer Leader conducted the majority of the interviews either in person or by telephone. A structured interview guide was used to gather qualitative data. Once the interviews were recorded, they were then transcribed verbatim onto a shared document. Any type of identifiable information was removed in order to protect the identities of the participants. Interview responses and data were gathered to show broad benefits of sharing stressful experiences through the VET Connect program. The current study identified five transcripts in which participants reported symptoms of trauma.

Analysis

In regards to the larger study, the original research team comprised three student veterans. All three of these research assistants participated in gathering data via interviews either through the telephone or in person. Two of the research assistants transcribed the data verbatim. Afterwards, under the supervision of the primary investigator, themes and subthemes were derived and identified.

In regards to the current study, the leading researcher was the primary lead to identify the transcripts that contained qualitative data of self-reported PTS/PTSD. The transcripts that were set aside were further examined to derive themes that were identified in this sub-group of participants.

Findings: PTS/PTSD Symptoms Report

Five of the 13 (38%) participants displayed signatures of PTSD and/or trauma symptoms based on the data gathered during the interviewing process. The participants vocalized having PTSD in several forms: clearly stating they have PTSD, had gone through PTSD therapy, having gone through a “traumatic experience,” reports of “PTSD issues,” and reports that lead to the conclusion of having trauma symptoms. Some of the participants within this group have PTSD due to combat, others are due to reasons that have not been shared. Examples of interview responses are listed below:

“One thing I conducted was...this PTSD workshop...I’ve gone through PTSD therapy...you’re [referring to himself] always in this vigilance type of mode.”

“Mine was a pretty traumatic experience [in reference to what experience this veteran shared with mainly non-veteran students] ...the emotions that I’ve repressed...when I do talk about it I would be drinking and that would make it worse...I was pretty dismissive about it [sharing his experiences]. I was having issues...PTSD issues...I was the guy sitting at the back of the class...I lived the life in combat, I have nightmares and other issues...my family and I had never talked about my combat experience.”

Themes

The following themes were identified in the subgroup of the larger study that reported having symptoms of PTSD. The themes identified in the interview data are based on the responses of these five participants. All primary themes identified in the interview data were found in 100% (5/5) of the interview transcripts, suggesting that VET Connect Peer Leaders experienced common benefits. Participants reported **Increased Vulnerability in Interpersonal Interactions** at the university through enhanced relationships with faculty and staff, fellow student veterans, and civilian students.

“I did enjoy that [facilitating the campus-community forum]. Because...I wanted to let veterans or anyone else know that it is ok to be in a vulnerable position.”

“I’ve been avoiding interacting with anybody as much as possible. I tried to limit it to only necessary interactions. [Serving at a Vet Connect Peer Leader] made me a bit happier, because I felt being part of a community...it made me feel seen.”

Participants noted **Increased Support for Coping with Symptoms** through public speaking, expanded self-understanding, and greater acceptance of their own experiences. Through feeling “seen,” realizing that “it’s ok to talk about,” and through “exposure,” these active student veterans realized that the majority of non-veterans did not act “biased” towards them.

“...they [the students] saw me struggle through it [the traumatic experience], I think it helped them realize that it was ok to talk about stuff, that it was ok to feel bad about it, to feel sad about it for a while...”

“...instead of constantly feeling when I say something wrong people are going to see me for what I am, you know. I just [was] always thinking that they were going to see what I’ve been trying to hide...and realizing it is not the case.”

Participants reported developing an **Increased Motivation for Integration** in VET Connect through serving the campus at large, by “making a difference” in the lives of fellow veterans, and by feeling “needed” within the program. All participants were glad to have the opportunity to “engage” their classmates in understanding the perspectives of veterans, and to mentor and provide advocacy for other veterans to access benefits and resources, and to help ease the isolation and distress of fellow military students.

“It gives the guys courage to...put himself out there...because we were taught to ‘suck it up and drive on’...”

“...being a VET Connect Leader was a different experience because I was actively trying to make myself better.”

Discussion and Implications

Most programs designed for student veterans on university campuses nationwide provide benefits and services (Rumann, & Hamrick 2009). These benefits primarily include opportunities for veterans to utilize monetary benefits for school, housing for homeless veterans, healthcare, and compensation for medical claims. One major issue of the low turnout rate for these programs may be due to the idea that veterans have developed a culture of serving their country for a cause greater than themselves (Badger, & McCuddy, 2014). When transitioning to the civilian student life, the desire to serve may still exist (Hall, 2011). Unfortunately, many services are aimed at serving the veterans rather than giving veterans the opportunity to serve others.

VET Connect has become a platform for student veterans to serve their community on campus. Service members have a service-oriented mentality. This desire to serve must be nourished consistently, especially as these women and men transition back to the civilian-oriented life style. The idea of receiving “help,” “service,” and “a lending hand,” is not commonplace in the military (Hall, 2011). Veterans may very much still have that great desire to serve the community, to help others, to be social, and to share their experiences. Programs such as VET Connect are necessary for student veterans to give and share their abilities, wisdom, and experiences with society as a whole.

The VET Connect Program at SJSU is one outlet for student veterans to express themselves as human beings. It has also allowed former service members to feel internal gratification through serving their community. The program continues to be a platform for student veterans to educate men and women that have not been in the military. As more veterans participate in this program, more will reap the intrinsic benefits of serving the campus society. More integration into VET Connect creates an atmosphere of improved transition and decreased isolation for veterans.

Limitations

Although this study focused on student veterans that had PTSD, the small sample limits generalizations. This sub-data was gathered from a broad set of data regarding the overall benefits student veterans gained from

participating in VET Connect. The researchers in this study did not diagnose or ask whether or not the participant has or had PTSD. Determination of PTSD symptoms was based purely on participants' voluntary admission and subjective descriptions of symptoms that correlate strongly with PTSD.

Five participants were the focus group of this study. As this was a qualitative study, the different levels of PTSD are difficult to distinguish. Quantitative questions that determine PTSD would have allowed the researchers to have improved reliability and validity of PTSD in student veterans.

Future Research

Feedback from new student veterans and the campus community is important to sustaining programs such as VET Connect. One major goal for universities is to create an environment for veterans to be fully integrated with non-veterans. Veterans tend to isolate themselves with fellow veterans primarily because they can relate with each other. This behavior is not ideal for veterans because in the workplace, most workers are not military veterans. The conflict of military culture and civilian culture can be devastating for both parties.

In order for strong integration between military culture and civilian culture to exist, it must begin before veterans enter the workforce. It must begin on campus. Future projects that require veterans to work alongside non-veterans are possible. This work may allow both parties to build camaraderie and common ground with one another. This way, former service members can improve their communication skills with non-military personnel. Civilians would understand how to treat and explain complex ideas to veterans.

Expanded integration programs need to be developed so that civilians can understand veterans with PTSD, injuries from war, or service-connected disabilities with much less stigma. Prior service members would develop a strong respect for fellow non-military individuals and decreased stereotypes about civilians.

References

Asmundson, G. J., Coons, M. J., Taylor, S., & Katz, J. (2002). PTSD and the experience of pain: Research and clinical implications of shared

- vulnerability and mutual maintenance models. *The Canadian Journal of Psychiatry*, 47(10), 930-937.
- Badger, K., & McCuddy, M. D. (2014). Understanding the student veterans' college experience: An exploratory study. *Behavioral Health: Increasing Resiliency and Endurance*, 101.
- Bovin, M. J., Marx, B. P., Weathers, F. W., Gallagher, M. W., Rodriguez, P., Schnurr, P. P., & Keane, T. M. (2016). Psychometric properties of the PTSD Checklist for Diagnostic and Statistical Manual of Mental Disorders–Fifth Edition (PCL-5) in veterans. *Psychological Assessment*, 28(11), 1379-1391. doi:10.1037/pas0000254
- Colvin, J. W., & Ashman, M. (2010). Roles, risks, and benefits of peer mentoring relationships in higher education. *Mentoring & Tutoring: Partnership in Learning*, 18(2), 121-134.
- Cook, B. J., & Kim, Y. (2009). From soldier to student: Easing the transition of service members on campus. *American Association of State Colleges and Universities*.
- Deahl, M. P., Klein, S., & Alexander, D. A. (2011). The costs of conflict: Meeting the mental health needs of serving personnel and service veterans. *International Review of Psychiatry*, 23(2), 201-209.
- Elliott, M., Gonzalez, C., & Larsen, B. (2011). US military veterans transition to college: Combat, PTSD, and alienation on campus. *Journal of Student Affairs Research and Practice*, 48(3), 279-296.
- Glover-Graf, N. M., Miller, E., & Freeman, S. (2010). Accommodating veterans with posttraumatic stress disorder symptoms in the academic setting. *Rehabilitation Education*, 24(1-2), 43-55.
- Hall, L. K. (2011). The importance of understanding military culture. *Social work in health care*, 50(1), 4-18.
- Military and Veteran Student Services. (n.d.). Retrieved March 31, 2017, from <http://www.sjsu.edu/veterans/>
- Ness, B. M., Rocke, M. R., Harrist, C. J., & Vroman, K. G. (2014). College and combat trauma: An insider's perspective of the post-secondary education experience shared by service members managing neurobehavioral symptoms. *Neurorehabilitation*, 35(1), 147-158. doi:10.3233/NRE-141098

- Rudd, M. D., Goulding, J., & Bryan, C. J. (2011). Student veterans: A national survey exploring psychological symptoms and suicide risk. *Professional Psychology: Research and Practice, 42*(5), 354.
- Rumann, C. B., & Hamrick, F. A. (2009). Supporting student veterans in transition. *New Directions for Student Services, 2009*(126), 25.
- Russell, S. S. (2013). Veterans' stories: What they may have to tell us—a personal reflection. *Urologic Nursing, 33*(2), 92-96. doi:10.7257/1053-816X.2013.33.2.92
- Seal, K. H., Bertenthal, D., Miner, C. R., Sen, S., & Marmar, C. (2007). Bringing the war back home: Mental health disorders among 103 788 US veterans returning from Iraq and Afghanistan seen at Department of Veterans Affairs Facilities. *Archives of Internal Medicine, 167*(5), 476-482.
- U.S. Government Accountability Office (U.S. GAO). (n.d.). Retrieved March 31, 2017, from <https://www.gao.gov/>
- Vera, E. M., & Speight, S. L. (2003). Multicultural competence, social justice, and counseling psychology: Expanding our roles. *The Counseling Psychologist, 31*(3), 253-272.