

EXPLORING THE EXPERIENCES OF FEMALE STUDENT VETERANS WITH  
DISABILITIES ENTERING HIGHER EDUCATION DURING REINTEGRATION:  
A PHENOMENOLOGICAL STUDY

by

Beverly Tillery Williams

Liberty University

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

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## ABSTRACT

The purpose of this qualitative transcendental phenomenological study was to explore and describe the lived experiences of female student veterans with disabilities entering higher education during reintegration in order to improve programs, services, and support available to female student veterans with disabilities. A screening questionnaire, interviews, a focus group, and journals were used to collect data. Participants consisted of 11 female student veterans with disabilities who were purposively selected using criterion, snowball, and maximum variation sampling. The central research question was: What are the transition experiences of female student veterans with disabilities entering college during reintegration into society? Four sub-questions were also addressed. Data analyses were conducted using Moustakas' (1994) recommendations of a transcendental phenomenological study, and five themes were identified. Textural and structural descriptions were written and integrated into the composite description to reveal the essence of participants' experiences. Findings served to inform post-secondary institutions of the diverse needs of female student veterans with disabilities so they can better serve them, increase student veterans' perseverance and academic success, and provide a smoother reintegration for all student veterans with disabilities.

*Keywords:* disabled student veterans, student veterans, transition, reintegration, women in military, social support

## **Dedication**

This dissertation is dedicated to my loving mother, Evangelist Annie Mae Stanley, who gave me life and taught me many lessons on living. I dedicate this dissertation to the memory of my late father, Herbert West; my late husband and soulmate, Walter Williams; my late sister-in-law, Pastor Bettie Tillery; my late nephews, Christopher Williams and Tashun Tillery; and my late cousin, Evangelist Cathy Wooten, who were all so very special and will forever live in my heart.

Special appreciation and dedication also to my wonderful God-fearing daughter, Rochelle Epps, who consistently prayed, believed in, and supported me, no matter what; and to my five lovely inspiring grandchildren, Jachele, Kalisha, Deshawna, Walter, and Carli, who compelled me to persevere and are the most precious loves of my life next to God, who is, and always will be the head of my life. To my wonderful sister, Evangelist Julia Weaver, an influential woman of God who constantly nudged me to keep pressing no matter what; to my dear friend, Gary Alvies, who continually supported me along the way; and lastly, to my wonderful, loving Pastor Eddie and First Lady Sandra Ford who kept me uplifted in prayer.

A special appreciation and a hearty thank you to all of the courageous soldiers, sailors, airmen, and marines that have honorably served and sacrificed their lives, and those who are currently serving in the Armed Forces of the United States of America.

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### **List of Abbreviations**

American Community Survey (ACS)

Americans with Disabilities Act Amendments Act (ADAAA)

Defense Activity for Non-Traditional Education Support (DANTES)

Department of Defense (DoD)

Department of Veterans Affairs both acronyms (DVA) and (VA)

Institutional Review Board (IRB)

Military Sexual Trauma (MST)

Office for Civil Rights (OCR)

Operation Enduring Freedom (OEF)

Operation Iraqi Freedom (OIF)

Operation New Dawn (OND)

Posttraumatic stress disorder (PTSD)

Service-connected (SC)

Social cognitive theory (SCT)

Student Veterans of America (SVA)

Traumatic brain injury (TBI)

Veterans Benefits Administration (VBA)

Veterans Health Administration (VHA)

Veterans Integration to Academic Leadership (VITAL)

Vocational Rehabilitation and Employment (VR&E)

## **CHAPTER ONE: INTRODUCTION**

### **Overview**

The purpose of this qualitative transcendental phenomenological study was to explore and describe the lived experiences of female student veterans with disabilities entering higher education during reintegration in order to improve programs, services, and support available to female student veterans with disabilities. The disabilities of veterans as discussed in the study were not intended to imply that veterans with disabilities have human defects, nor that they are weak or unable to sustain a normal standard of living. The goal of this study was to inform faculty, administrators, and other stakeholders of higher education institutions about the necessity of adequate resources, programs, and support for female student veterans with disabilities in order for them to excel academically and with successful reintegration. This chapter addresses the background, situation to self, problem and purpose statements, significance of the study, research questions, research plan, delimitations, definitions, and a chapter summary.

### **Background**

The disabilities of the student veterans in this study are the permanent results of real injuries, scars, diseases, and trauma that were incurred or aggravated during their military service to the United States (Federal Benefits for Veterans Handbook, 2014). Approximately 19% of the nation's population (over 56.7 million people) had a broadly defined disability in 2010, and it was anticipated that these numbers would increase over the next decade, especially with the aging baby boomers and as more service members return home (U.S. Census Bureau, 2012). Females comprised 28% of the military (Department of Veterans Affairs, 2013b). In 2009, about 5.5 million veterans had a disability, 3.3 million veterans had a service-connected (SC) disability, and 11.3% of female veterans had a disability (U.S. Census Bureau, 2010). Female

student veterans with disabilities were the focus of the study rather than the entire population of veterans as the intent of the study was to add to the limited research on female student veterans who have disabilities.

A disabled veteran is a former member of the military who has become permanently disabled due to an injury, illness, or trauma incurred, caused, or aggravated during active military service, to include the National Guard and Reserve Forces for purposes of the study (Federal Benefits for Veterans Handbook, 2014). A disabled veteran is a person who applied for disability benefits and was approved by the Department of Veterans Affairs (VA). Upon approval, the veteran would then officially be considered a disabled veteran and would be entitled to even more benefits than veterans without a disability rating to include permanent disability compensation, health care and specialty treatment at VA facilities, necessary medications, and other entitlements depending on the rating percentage. Further, the official recognition as a disabled veteran is permanent and authorized by the federal government and bears certain honor and pride as it is symbolic of honorable service to the United States. A student veteran is “any student who is a current or former member of the active duty military, the National Guard, and/or Reserve Forces, regardless of deployment status, combat experience, legal veteran status, or GI BILL use” (Vacchi, 2012, p. 17). These definitions are presented to provide clarity in describing who student veterans are, and specifically to inform higher education institutions in development of appropriate services, programs, and support. Faculty, administrators, and other stakeholders of higher education institutions need to be aware that student veterans are more than just students using GI BILL benefits as not all student veterans are eligible for Post-9/11 GI BILL benefits.

Reintegration is the process through which veterans readjust and adapt to civilian life, work, family, and college in such areas as securing employment, changing from a military structure to a different social structure, and adapting to life roles, such as parenthood and marriage (Yan et al., 2012). The time span for veterans to reintegrate into society can vary from a few weeks, months, or sometimes years and is described as “holding on to military friendships until acknowledging that closeness and trust developed during deployment have faded away” (Hinojosa & Hinojosa, 2011, p. 1151). Most research on veterans’ reintegration after wars was conducted using a majority of male veterans, and few studies investigated the reintegration of female service members or female veterans (Yan et al., 2012). The stories of female veterans’ transition and reintegration experiences have been considerably invisible.

This study focused on female student veterans with disabilities that served in the military during Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF). OEF refers to combat operations that occurred in Afghanistan from the years 2001 through 2010, and OIF refers to combat operations that occurred in Iraq from the years 2003 through 2010 (Department of Defense [DoD], 2010). Past research on the experiences and challenges that female veterans with and without disabilities faced varied from the missions of earlier wars and conflicts. Females are a vital part of the military (Sherman, 2010). Females have honorably and courageously served in changing roles during every military conflict and war dating back over 200 years ago and continually play a crucial role in the military (Department of Veterans Affairs [DVA], 2013a). It is estimated that by 2040, almost one in five veterans will be a female (DVA, 2013b). Over 180,000 females were deployed in support of the wars in Afghanistan and Iraq (Defense Manpower Data Center, 2009). A new policy announced in 2013 changed the rule that stated females could not serve in direct ground combat, and females’ roles have been expanded



to 237,000 positions, of which 184,000 are in combat arms (DoD, 2013). President Barack Obama stated “this milestone reflects the courageous and patriotic service of women through more than two centuries of American history and the indispensable role of women in today’s military” (DoD, 2013, para. 7).

Since the end of the draft and the start of an all-volunteer military in 1973, there has been a movement toward greater gender equality in the military, especially with personnel shortages that evolved from having a majority male volunteer force (DoD, 2007). Military occupational specialties have opened up substantially for female service members. Initiatives were taken to make the military more welcoming, appealing, and more family focused in order to attract more females to enlist and remain in the military, such as the joint domicile duty assignment option for active duty married couples. In 2013, female roles were further extended when Secretary of Defense Leon Panetta announced an end to the rule that excluded females from direct ground combat and President Obama applauded this change (DoD, 2013).

The following data are presented to report on the statistics of the general veteran population and more specifically, the female veteran population for the purpose of comparing data. As of 2011, the overall veteran population was “over 22,676,000; the female veteran population exceeded 2.2 million, and the male veteran population almost reached 20,014,000” (DVA, 2013b, p. 3; U.S. Census Bureau, 2012). A greater percentage of female veterans than male veterans had a SC disability rating in 2011 and a higher percentage of female veterans use DVA health care overall (Department of Veterans Affairs, 2013b). The DVA consists of the largest system of comprehensive health care services in the U.S. Veterans may enroll and receive primary care, preventive care, specialty care, mental health services and counseling, care

for chronic illnesses, gynecological services, cancer screenings, and other health care from any DVA health care facilities located across the nation.

The war in Afghanistan, referred to as OEF, lasted over 10 years, which was longer than any other military conflict in the history of the United States. The wars in both Afghanistan and Iraq, OEF and OIF, generated conditions that added more stress, challenges, injuries, and trauma for soldiers, including females, especially since the number of female soldiers reached its highest peak in the history of the military (Ostovary & Dapprich, 2011). Although females were banned from direct ground combat positions, they were exposed to the traumas, consequences, and threats of danger from combat environments.

Some of the specific problems reported by female veterans were high rates of military sexual trauma (MST) and mental health problems related to this trauma (Street, Vogt, & Dutra, 2009; Williams & Bernstein, 2011). MST is rape, sexual assault, harassment, unwanted sexual advances, or any sexual experience involving an individual against their will, regardless of the perpetrator, or if the MST occurred on or off the military installation (DVA, 2015). MST can include emotional or economic abuse and can involve domestic and physical violence, threats, loneliness, and intimidation (Valente & Wight, 2007). As of 2010, 20% of female veterans that were treated at a DVA health care facility reported being a victim of MST (DVA, 2015).

Posttraumatic stress disorder (PTSD) can result from MST, and only in recent years has the DoD acknowledged such sexual trauma (Williams & Bernstein, 2011).

The four main military service-related disabilities are posttraumatic stress disorder (PTSD), neurological impairments, traumatic brain injury (TBI), and poly-trauma (several injuries to the body requiring specialized care) (DVA, 2013a; DoD, 2007; Ostovary & Dapprich, 2011). PTSD is an anxiety disorder that may develop following the experience or witnessing

extremely stressful and terrifying events that can cause serious injury resulting in symptoms of depression, avoidance, difficulty concentrating, noise sensitivity, anger, sleeplessness, and increased arousal (ADA National Network, 2014; Carlson, Stromwall, & Lietz, 2013; DoD, 2010; Graf, Miller, Feist, & Freeman, 2011; Shackelford, 2009). Based on reported demographics from DoD (2010), approximately 38,650 service members have been physically wounded; 31% of veterans had PTSD, and combat exposure increased veterans' risk for anxiety, guilt, anger, depression, sleeplessness, and other mental and emotional problems.

Student veterans may experience many challenges, daily stressors, mental and emotional disorders, and other health problems, such as PTSD, TBI, and depression, especially if they have been exposed to combat environments (Graf et al., 2011). Proper access to educational benefits, delays in the GI BILL disbursements, access to assistance, complex administrative procedures, and stressful academic environments are some of the challenges that female student veterans with disabilities may face during college entry while reintegrating into civilian life (Burnett & Segoria, 2009; Ostovary & Dapprich, 2011). Female student veterans with disabilities face potential hardships after exiting the military. These veterans may no longer be entitled to federal benefits and services, and other challenges and problems may rise during their transition, entry into college, and the workforce while still reintegrating into society.

The lengthy bureaucratic processes required by service organizations of veterans that are involved in their transitions and reintegration could also become barriers to successful academic achievement. Accelerated enrollments in college may place veterans at risk of inattentiveness, heightened arousal, anger flare-ups, and greater irritability due to noise, poor concentration, undesired seating, and other stressful environments on college campuses (Burnett & Segoria, 2009). Additionally, symptoms of PTSD, TBI, other traumas and/or disorders may become

intensified and create more barriers that could also jeopardize their academic success. Zinger and Cohen (2010) stated that “challenges of readjustment entailed coping with PTSD symptoms, depression, lack of structure in civilian life, physical injury, and difficulties with personal relationships and social functioning” (p. 47). Student veterans may endure lingering effects of combat experiences that interfere with their ability to acknowledge their disabilities or functioning impairments (Grossman, 2009).

For female student veterans who have disabilities, college is about pursuing new goals and purposes and reclaiming their lives that were impacted by physical and/or mental impairments incurred while serving in the military, and colleges should exhibit equality, distinction, and diversity (Branker, 2009). Students with disabilities have progressively been attending higher education institutions in greater numbers over the past few years even though they were long deprived of opportunities to enroll in college (Konur, 2006). The main reasons for increased enrollment of students with disabilities in higher education were the legislation mandating direct access to higher education and better access to education for persons with disabilities (Konur 2006).

The law that defined and governed the protection of student veterans with disabilities was the American with Disabilities Act Amendment Act (ADAAA) which is enforced by the Office for Civil Rights within the U.S. Department of Education. Section 504 of the Rehabilitation Act was amended as Title IV of Workforce Investment Act. This legislation prohibits discrimination of an individual’s disability in delivering programs or activities receiving federal financial aid and stipulates what actions should be taken by institutions and employers to ensure equal opportunities and reasonable accommodations are provided (Office for Civil Rights, 2010). Under the new guidelines of the ADAAA, female student veterans with disabilities entering

higher education institutions can reveal how higher learning institutions are inadequately equipped to meet their diverse needs and demands (Grossman, 2009).

In past years, very few colleges accepted female student veterans with severe disabilities. Student veterans would hide their disabilities in order to fit into society, although colleges expected female student veterans with disabilities to overcome their disabilities and to fit in (Rose, 2012). During the 20th century, individuals with disabilities were once regarded as being unproductive and the general public thought it best that they remain at home away from the public (Rose, 2012). Thus, some individuals may not have self-identified their disability since disclosing one's disability is strictly a voluntary option. Scholars of higher education institutions untruthfully insisted that "as many as 40% of student veterans have visible or invisible injuries, and existing literature on student veterans presumed that they have difficulty transitioning as a population without offering empirical evidence" (Vacchi, 2012, p. 16). The media and higher education scholars exaggerated the number of student veterans with disabilities, especially the number of student veterans who had PTSD, (which was far greater than 40%) in an effort to draw attention to the increasing numbers of student veterans (Vacchi, 2012).

Little is known about the experiences of veterans entering college, especially those of female student veterans with disabilities (Bean-Mayberry et al., 2011; Demers, 2011; Rumann & Hamrick, 2010; Yan et al., 2012). Very little is known about the post-deployment transition and reintegration experiences of female student veterans who have disabilities, especially those who are members of the Reserve Forces (Bauman, 2013; Jones, 2013; Rumann & Hamrick, 2010; Street et al., 2009). Most research on veterans' reintegration after OEF/OIF wars were conducted using a majority of male veterans, and few studies investigated female service members or female veterans (Yan et al., 2012). A significant gap exists in literature on female

veterans and female student veterans, and further research is needed on the experiences of female combat veterans (Bauman, 2013; Cromptoets, 2011).

Masses of media productions, blogs, news reports, and other published articles featuring veterans exist, but empirical literature addressing issues of female service members and female veterans that deployed in support of OEF/OIF is limited and dated (Bauman, 2013; Street et al., 2009). Most studies related to veterans' transition and reintegration from OEF/OIF deployments were conducted using a majority of male veterans, while only limited studies had a substantial number of women, and investigated even fewer active duty females or female veterans (Bean-Mayberry et al., 2011; Yan et al., 2012). Past studies conducted on female veterans were focused mainly on females pursuing treatment at the Veterans Health Administration (VHA) and deployment experiences of PTSD (Yan et al., 2012). However, there is a gap in literature on gender differences in how servicemen and servicewomen, and female student veterans with disabilities readjust during reintegration into society (Baechtold, 2011), and "research on the socioeconomic status of servicemen and women is limited" (Wurster, Rinaldi, Woods, & Liu, 2013, p. 129). Gaps in literature exist on female veterans in general and female student veterans with disabilities and little is known about the experiences and expectations of combat veterans entering college (Ackerman, DiRamio, & Mitchell, 2009).

Veterans should be recognized and supported in the same manner as other students with special needs. The intent was not to have administrators, faculty, and policymakers of higher education institutions, nor the general public, view female student veterans with disabilities or any other veterans as being incompetent and oppressed, but rather to acknowledge them as being misunderstood, inadequately served, and sometimes not having their diverse needs met. The intent of the study was to explore and describe real-life transition and reintegration experiences

of female student veterans with disabilities as related to their college entry to expand the limited knowledge base and fill gaps in literature on female student veterans with disabilities.

### **Situation to Self**

I am passionate about the well-being of veterans with disabilities. I am a 100% disabled veteran and I served 30 years of military service which greatly compelled me to conduct this study. I am a strong advocate of those in need and willing to offer assistance, support, and spiritual guidance to those in need. I experienced many challenges during my transitions in the military which is explained more in-depth in the researcher personal transition and reintegration experiences included in Appendix A as recommended by experts in the field of education.

Soldiers are taught and expected to maintain strong esprit de corps, feelings of pride, enthusiasm, loyalty, honor, commitment, and camaraderie to fellow soldiers as they depend on each other for survival, both on and off the battlefield. I am quite sensitive and my presumption is that hearing veterans tell their real-life stories, some of which may include some horrific combat experiences, can reopen some old wounds. Because of the significance of revealing my assumptions and past experiences, I acknowledge that I need to expose my sensitivity which does not imply that I am weak. I am simply a human instrument with feelings, beliefs, values, and esprit de corps shaped by a culture that became deeply engrained in me throughout my 30 years in the military.

My past military experiences allowed me to nurture and assist others in need which has enhanced my ability, perseverance, and respect for others, and greatly benefited me throughout the study. I incorporated core biblical principles during the research process to better understand and form meaningful responses during data collection and to deal with challenges. The epistemological assumptions that I brought to the study are the opinions of female student

veterans with disabilities may not always be heard or valued, and their needs may not always be understood and accommodated on college and university campuses in the same ways as nonveteran female students and male veteran and nonveteran students.

I worked closely with participants to establish trust and build rapport in order to become more familiar with their attitudes and behavior. A participatory paradigm guided the study, and I was a participant who deeply explored, rigorously gathered, and analyzed data to describe the essence of the phenomenon. This study intended to provide an understanding and description of the participants' lived experiences from their perspectives. This study sought to allow female student veterans with disabilities to have a voice and to reveal their transition experiences and perceptions that evolved during reintegration as related to their college entry.

### **Problem Statement**

The problem of the study was the disabilities, diverse needs, and transition experiences of female student veterans with disabilities during reintegration are not fully understood, addressed, or supported by educators, administrators, nonveteran students, and other stakeholders in their academic environment. Educators, administrators, and leadership of higher education institutions should fully understand the individual needs, experiences, and potential problems that female student veterans with disabilities face while transitioning from the military and entering college during reintegration into civilian life (Vacchi, 2012). Evidence has shown that female veterans may face increasing work-related challenges and unique threats to their mental health and well-being (Street et al., 2009) which could impact their academic outcome in college.

Since enactment of the Post-9/11 GI BILL in 2009, over 760,000 veterans have utilized this GI BILL to finance college expenses and numbers are expected to increase (Sander, 2012). The Post-9/11 GI BILL offers the greatest educational and training benefits in the history of



educational assistance for service members and veterans who served in the military after September 10, 2001 (Vacchi, 2012). The ADAAA and Title IV of the Workforce Investment Act (formerly Section 504 of the Rehabilitation Act) provided enhanced protection for students who have disabilities and specified what actions employers and higher education institutions should take to ensure equal opportunities and reasonable accommodations were provided to them (Office for Civil Rights, 2010). With the new rules of the ADAAA, female veterans with disabilities entering post-secondary institutions may disclose that their educational institutions are not sufficiently prepared to meet their diverse needs (Grossman, 2009). The number of student veterans' enrollment has escalated, but institutions across the nation lack an understanding of student veterans' needs; and, little is known about the post-deployment transition and reintegration experiences of student veterans who are members of the Reserve Forces (Bauman, 2013; Jones, 2013; Rumann & Hamrick, 2010).

Women should be allowed the opportunity to expose their identity as veterans, women, and their military service without being compared with male veterans. Female student veterans with disabilities need the collegiate environment and society to know about their existence, transition, and reintegration experiences as related to their college entry. Because of their many sacrifices and dedication to the nation's defense, they deserve the opportunity to speak out and to be heard. While some research has been conducted on female veterans, it is limited, not very recent, and focused more on mental health issues, health care, and academic accomplishments. This study sought to fill gaps in literature on the post-deployment transition and college experiences of female student veterans with disabilities.

## **Purpose Statement**

The purpose of this qualitative transcendental phenomenological study was to explore and describe the lived experiences of female student veterans with disabilities entering higher education during reintegration in order to improve programs, services, and support available to female student veterans with disabilities. For purposes of this research, reintegration of female student veterans with disabilities was generally defined as veterans' readjustment and adaptation to civilian life, family, work, and/or college (Yan et al., 2012). The theory that guided this study was Schlossberg's (1981) transition model using her Four-S system: self, situation, support, and strategies which affect how individuals cope with transitioning and reintegration experiences. While in the military, service members experience different stages of transitioning. However, the transition phase of female veterans with disabilities discussed in this study was the phase in which the veterans have already transitioned, exited the Armed Forces, entered college and/or the workforce, and were reintegrating into society. This study sought to fill gaps in literature on studies of female veterans and female student veterans with disabilities entering college during reintegration into society.

Schlossberg's adult transition theory guided the framework of the study using her Four-S system as these four aspects of transition influence how well individuals may cope with change during their transition. Schlossberg (1981) emphasized how the transition fits the individual's style, stage, and situation; transition experiences can affect an individual's ability to cope with transitions, and change relationships, roles, routines, and assumptions. Some of the factors noted that affect adapting to a transition were characteristics of the transition, the individual undergoing a transition, and the pre- and post-transition environments (Schlossberg, 1981). As veterans transition from the military and reintegrate back into society, one would think that they

need relational, physical, emotional, and spiritual renewal in order to better cope with the transition (Bean-Mayberry et al., 2011).

Bandura's (2003) social cognitive theory (SCT) proposed that the environment or situation can impact one's self-efficacy, motivation, and overall perceptions, and that social modeling can be instrumental in conveying knowledge, capabilities, values, and spiritual beliefs. He suggested that when individuals observe others persevering through their hardships, it builds their belief and helps them to improve their own lives. Individuals adjust to their standards and develop self-demands and self-capabilities: "do things that give them self-satisfaction and self-worth; and refrain from behaving in ways that produce self-censure" (Bandura, 2003, p. 168). Bandura's SCT helped to guide the theoretical framework of the study by applying his social modeling to the experiences of participants in the study. Bandura's (2003) social modeling was applied to female student veterans' experiences in that commonalities shared by participants could have been socially modeled and may have observed the persistence of female student veterans with disabilities when they faced adversities during their transition and reintegration.

### **Significance of the Study**

The study is significant to faculty, administrators, policymakers, and other stakeholders of higher education institutions, especially with the increasing number of veterans enrolling in college. College enrollment has increased with the expanded educational benefits and increased use of the Post-9/11 GI BILL (Cook & Kim, 2009; Vacchi, 2012), which increased the importance of findings from the study. Since 2009, over 760,000 veterans have utilized the Post-9/11 GI BILL to finance college expenses (Sander, 2012). Since signing the Post-9/11 GI BILL into law, the DoD budget cuts which led to downsizing of the Armed Forces have triggered an expectation of a greater influx of student veterans to enter colleges (Vacchi, 2012). This

projected influx of student veterans enrolling in college demands that staff, faculty, scholars, and administrators acquire a better understanding of female student veterans' disabilities and special requirements, and become better prepared to meet their diverse needs. Vacchi (2012) recommended that campus faculty and staff consider student veterans' backgrounds, and to interact and work with them in order to better understand them and to positively impact their learning and college experiences.

The study was significant to female student veterans with disabilities and all student veterans as it can compel other student veterans to speak out and inform faculty of their different needs and boost their chances for personal and academic success. Enhancing or adding more programs, services, and support systems could result in a quicker and smoother reintegration of female student veterans with disabilities. Findings can inform male veterans, student veterans with no disabilities, educators, faculty, administrators, and other leaders of higher education institutions of the special requirements and needs of female student veterans with disabilities. Further, the intent was to expose the necessity of establishing adequate programs, services, and policies to support the needs of female student veterans who have disabilities. These programs may include initiatives to make the campus more veteran friendly, and to improve or create new programs and services that meet the physical, academic, spiritual, and other needs of all student veterans that may evolve during their reintegration. Findings can provide practical, theoretical, and/or empirical contributions to the field on female student veterans who have disabilities.

### **Practical Contributions**

The study had practical value in that it served to inform college faculty, administrators, and other stakeholders on what services and support systems are needed to assist female student veterans with disabilities to persevere and to excel academically. Findings also served to provide

higher education professionals with an understanding of the issues faced by these student veterans to enable them to provide greatly needed assistance to help ease their transition from the military, increase their perseverance in college, and completion of their college degrees (Ackerman et al., 2009). It is hoped that higher education institutional leaders and faculty will work collectively to improve programs and support services, and possibly design classes related to veterans to positively impact all learning and academic achievements of female student veterans who have disabilities.

Other practical contributions were to establish initiatives to support female student veterans with disabilities and to create an awareness of the unique challenges that females face as veterans. For example, there are approximately 38,000 female veterans in Colorado, and some of its universities are making higher education a top priority as they are designing veteran programs to engage more women (Sander, 2012). Allowing female student veterans who have disabilities to have a voice and share their experiences may inspire a stronger desire for them to persist through college, increase academic success, and totally reintegrate sooner into the normalcy of society. It is hoped that more initiatives will be taken by institutional stakeholders to support all student veterans with disabilities that are pursuing a college education.

### **Theoretical Contributions**

Theoretical contributions of the study were that findings served to fill gaps in the literature by adding knowledge to the field on the transition and reintegration experiences of female veterans and female student veterans with disabilities as related to their college entry. Also, theoretical contributions were made with regard to Schlossberg's (1981) Four-S system of self, situation, support, and strategies. The participants' experiences were related to the framework of the Four-S system in that their situations, strategies, support received, and

themselves could have impacted how they coped with transitioning and reintegration experiences and how it changed their routines, relationships, and roles as individuals (Schlossberg, 1981). Reflecting on how the participants observed the experiences and persistence of female student veterans with disabilities while facing obstacles and setbacks can be attributed to Bandura's (2003) application of social modeling under his SCT theory. Individuals tend to model the observed actions and behaviors of others around them, especially when facing similar hardships as others and they discover that the individual still managed to persevere.

### **Empirical Contributions**

Empirical literature addressing female service members and female veterans that deployed in support of OEF/OIF are extremely limited (Street et al., 2009). This study was not focused on empirical literature and may not contribute to the existing body of knowledge on female student veterans with disabilities. However, the study served to fill gaps in literature on female veterans and female student veterans with disabilities.

### **Research Questions**

One central research question and four sub-questions guided the exploration of the lived experiences and needs of female student veterans with disabilities enrolled in college during reintegration. The constructs from the research questions were guided by Schlossberg's (1981) transition theory and Bandura's (2003) social cognitive theory. The central question of the study was: What are the transition experiences of female student veterans with disabilities entering college during reintegration into society? The four sub-questions were:

1. What factors influenced the decisions of female student veterans with disabilities to enter or reenter college?

2. How do emotional and social needs of female student veterans with disabilities drive their perseverance to remain in college?
3. What coping strategies do female student veterans with disabilities employ in college as related to transition and reintegration experiences?
4. How do female student veterans with disabilities identify the available college resources, support systems, and services as meeting their individual needs?

The first three sub-questions guided the focus of this study in order to learn about participants' needs, what factors influenced their decision to enter or reenter college, and how they coped, even though they were still reintegrating back into civilian life (Ackerman et al., 2009; Persky, 2010). Schlossberg's adult transition model explained the nature of what and how changes are experienced during transition, how all types of transitions can be analyzed, and what interventions may be established (Schlossberg, 1981). Sub-question four was developed to explore and reveal participants' perceptions of on-campus programs, services, and support currently offered, and whether their needs were being met. The participants' perceptions of available programs and services provided faculty and institutional leaders some insight into the diverse needs of these female student veterans, revealed the effectiveness of programs and services in serving their needs, whether improvements were needed to better meet their needs, and boosted their academic and reintegration success (Persky, 2010). These four sub-questions were not to be viewed as the interview questions used for collecting data.

### **Research Plan**

This study was qualitative and employed a transcendental phenomenological descriptive research design. A qualitative research design was the best approach to explore, identify, describe, and provide a "better understanding of the phenomenon from the perspectives and lived

experiences of the participants, and it is ongoing, evolving, and flexible based on the continued analyses of various tools, such as interviews, documents, and fieldwork” (Burton, 2009, p. 53). Moreover, in qualitative research that is descriptive or exploratory, researchers seek for a deep understanding of participants’ stories and lived experiences of the phenomenon (Strauss & Corbin, 1990), which was the intent of the study. Moustakas (1994) emphasized that a transcendental phenomenological research design employs “disciplined and systematic efforts to set aside prejudgments regarding the phenomenon being investigated in order to launch the study as far as possible free of preconceptions, beliefs, and knowledge of the phenomenon from prior experiences and professional studies” (p. 22).

This qualitative transcendental phenomenological research design was the most appropriate design to adequately describe the real-life transition and reintegration experiences of female student veterans with disabilities as related to their college entry within uncontrolled environments and it aligned with the purpose of the study. A quantitative approach using measurements and statistics would have made it difficult to fully explore and describe the essences of the participants’ experiences. The phenomenon in the study was far more fitting of qualitative descriptive data rather than quantitative statistical data.

The participants in the study consisted of 11 female student veterans with disabilities of different races and ethnicity who served in the Army and/or Army Reserve component, with at least a 20% disability rating, and completed at least one semester of college. The site of the study was the Veterans’ Center at the Cumbersome Community College (pseudonym). This site was purposefully selected because of its strong recruitment potential with accessibility to a high number of student veterans, although the study occurred during the summer session when veterans’ enrollment was much lower. One of the top chapters of the Student Veterans of



America (SVA) is located on the campus of Cumbersome Community College. This SVA chapter was awarded the Chapter of the Month SVA Award in June, 2014 (M. Thewes, personal communication, October 13, 2014).

A pilot study was conducted using a small sample of three participants from outside of the study after approval was granted by Liberty University Institutional Review Board (IRB). See Appendix B. The pilot study was conducted to ensure clarity of the interview and focus group questions and to rehearse and become more familiar with procedures of these two data collection methods to increase the credibility of the actual study (Creswell, 2013). The pilot study consisted of individual interviews and a focus group session. Participants met the criteria of the actual study, but they were veterans from colleges outside of the study site in order to prevent not having enough qualified participants for the actual study.

Data collection methods were: a screening questionnaire, semi-structured individual interviews, a focus group, and journaling. Separate files were created and organized individually for all sets of data collected. All participants were asked to review transcriptions of their individual statements made during individual and focus group interviews for integrity and accuracy after the completion of data transcriptions to increase validity and reliability of findings. A convenient time and location were determined for participants to review their transcriptions. The safeguard and maintenance of all written, electronic, and any other physical data related to this study complied with the ethical considerations as stated in Chapter Three. As recommended by Moustakas (1994), all collected data were read, transcribed verbatim, interpreted, coded, and analyzed separately for each set of data that I collected.

### **Delimitations**

Delimitations of a study are decisions made by a researcher on the limits chosen to define boundaries and to narrow the scope of a study (Simon, 2011). Thus, I purposefully opted to exclude active duty females and studied only female student veterans with disabilities who were ages 18 and above rather than including any male veterans because of the existing gap in literature on female student veterans with disabilities. Also, only female student veterans with disabilities were studied because there is limited recent empirical literature available on this female population that has entered college while reintegrating into society.

### **Definitions**

The following definitions of some of the more technical terms pertinent to the study are explained for clarity.

1. *American Community Survey* – A survey of a fraction of the population conducted by the U.S. Census Bureau annually that provides statistical data on economic and social qualities of the U.S. population for planning and designing services and investments (DVA, 2013a; U.S. Census Bureau, 2012).
2. *Americans with Disabilities Act Amendments Act of 2008* – Significantly expanded the terms of disability making it easier to establish one's disability; provides protection and prohibits discrimination based on one's disability in delivery of programs receiving federal financial aid; and stipulates what should be done to ensure equal opportunities and reasonable accommodations are provided by employers and educational institutions (Office for Civil Rights, 2010; U.S. Department of Justice, 2009).

3. *Defense Activity for Non-Traditional Education Support* – Provides support and resources to service members and veterans; and provides assistance with certifications, degree requirements, and educational goals while in service and after exiting the Armed Forces (*Defense Activity for Non-Traditional Education Support [DANTES]*, 2014).
4. *Department of Defense* – Executive branch of the federal government; oversees all governmental functions and agencies; provides military troops to protect national security; and is the single largest employer of veterans (DoD, 2010).
5. *Department of Veterans Affairs* – “operates the nation’s largest integrated health care system with more than 1700 sites of care,” with diverse responsibilities, such as determining and approving disability ratings, providing oversight and approval of educational benefits, vocational rehabilitation benefits, and employment benefits programs for veterans (*Federal Benefits for Veterans Handbook*, 2014, p. 1).
6. *Disabled veteran* – An official term referring to a former member of any branch of the military who has become permanently disabled due to an injury, illness, or trauma incurred or aggravated during active military service, to include the National Guard and Reserve Forces (*Federal Benefits for Veterans Handbook*, 2014).
7. *GI BILL* – Congressional bills enacted over several decades to provide a variety of benefits to include educational benefits, home purchases, and other benefits to qualified service members and veterans (DVA, 2013a; *Federal Benefits for Veterans Handbook*, 2014).
8. *Institutional Review Board* – A committee that “exists to assure the protection of the rights and welfare of human participants involved in research, governs their actions,

- and reviews all research involving human participants prior to conducting any research” (Liberty University IRB Handbook, 2014, p. 8).
9. *Operation Enduring Freedom* – Official name used to refer to the combat operations in Afghanistan during the time span of 2001 through 2010 (DoD, 2010).
  10. *Operation Iraqi Freedom* – The official name of military combat operations in Iraq from 2003 through 2010 that was intended to remove Saddam Hussein’s regime, and to find and destroy Iraq’s weapons of mass destruction (DoD, 2010).
  11. *Operation New Dawn* – The official name referring to the end of the involvement of the United States in transitional operations mission to assist Iraq’s Security Forces from August 3, 2010 until present time (DoD, 2010).
  12. *Poly-trauma* – Consists of several injuries to one or more areas of the body requiring specialized care (Ostovary & Dapprich, 2011).
  13. *Post 9/11 GI BILL* – Created to provide education and training benefits to qualified service members and veterans who served in the Armed Forces after September 10, 2001, to include tuition and fees, monthly housing allowance, payment for books and supplies, and a \$500 one-time payment to specific service members or veterans who move out of very rural areas (DVA, 2013a; Federal Benefits for Veterans Handbook, 2014).
  14. *Posttraumatic stress disorder* – One of the signature disabilities; an anxiety disorder triggered after experiencing an extremely stressful and terrifying event that may cause serious injury or death (ADA National Network, 2014; DoD, 2010; Graf et al., 2011).

15. *Reintegration* - The process through which veterans readjust and adapt to civilian life, work, family, and college, changing from a military structure to a different social structure, and adapting to life roles, such as parenthood (Yan et al., 2012).
16. *Section 504 of the Rehabilitation Act of 1973* (a component of the Americans with Disabilities Act Amendments Act of 2008) - Prohibits discrimination against qualified persons based on their disability in delivery of programs receiving federal financial aid and stipulates proper action to take to ensure reasonable accommodations and equal opportunities are provided (Office for Civil Rights, 2010).
17. *Service-connected disability* - Trauma, disease, injury or disabling impairment incurred or aggravated while on active duty (Federal Benefits for Veterans Handbook, 2014).
18. *Student veteran* - “Any student who is a current or former member of the active duty military, the National Guard, or Reserve Forces, regardless of deployment status, combat experience, legal veteran status, or GI BILL use” (Vacchi, 2012, p. 17).
19. *Student Veterans of America* – Alliance of student veterans’ groups located on over 950 college campuses providing support and services to veterans during reintegration into society to help them succeed in college and beyond (SVA, 2013).
20. *Transition* – Event or process requiring change in roles, relationships, behavior, routines, and assumptions that is perceived by the person involved as a transition (Ackerman et al., 2009; Schlossberg, 1981).
21. *Traumatic brain injury* – Viewed as one of the signature disabilities; an invisible wound to the head that normally occurred while serving in combat in Afghanistan and Iraq (ADA National Network, 2014; DoD, 2010).

22. *Workforce Investment Act of 1998* – Provided legal protection to ensure proper access to services and programs were granted to qualified students with disabilities and veterans attending public higher learning institutions (Grossman, 2009; Office for Civil Rights, 2010).
23. *Veterans Integration to Academic Leadership* - Offers assistance to student veterans with educational goals to help ease their transition and reintegration into civilian life through a partnership between DVA, the New York Harbor health care system, and local colleges and universities (DVA, 2014).

### **Summary**

This study was designed to explore and describe the experiences of female student veterans with disabilities guided by one central question and four research sub-questions. The intent was to present the participants' transition and reintegration experiences as related to their college entry. According to Vacchi (2012), college enrollment has increased with the increased use of the Post-9/11 GI BILL benefits. Some veterans entering college may have various disabilities. Thus, it is imperative that leaders of higher education institutions are prepared to attract, serve, and retain this unique population of students. This study can serve to inform stakeholders of higher learning institutions of the possible challenges, special needs, trauma, injuries, and other impairments of veterans so they can be prepared to appropriately support these veterans entering or reentering college.

## **CHAPTER TWO: LITERATURE REVIEW**

### **Overview**

The goal of this transcendental phenomenological design was to explore the participants' lived experiences of transitioning and entry into higher education during reintegration "as we see them and as they appear to us in consciousness" (Moustakas, 1994, p. 49). This study is different from some previous studies in that it is focused specifically on the transition and reintegration experiences of female student veterans with disabilities as related to their college entry rather than on the entire veteran population or their health care. The intent of the study was to inform faculty and administrators of higher education institutions of the unique needs of female student veterans with disabilities and to reveal what services, support, and programs are needed to better accommodate them and to increase their perseverance and academic success. A synthesis of the literature review is presented on the following: (a) the theoretical framework; (b) recent legislative mandates; (c) measurements of disability; (d) history of educational benefits; (e) benefits of higher education; (f) addressing learning needs of students and implications; (g) challenges faced during transition; (h) challenges faced upon college entry; (i) reintegration challenges and concerns; (j) organizations providing services to student veterans; and (k) the chapter summary.

### **Theoretical Framework**

The focus of the study was related to theories of both Bandura and Schlossberg. Schlossberg's (1981) transition model emphasized the individual changes and evolving senses of oneself. Bandura's (2003) SCT, social modeling, and observation can be applied to the experiences of participants. Nevertheless, the call to active duty, the apparent upcoming deployments, and facing the possibility of life-threatening combat duty are all major transitions

that interrupt service members' and veterans' current roles and family life, routines, and relationships that can instill fear, uncertainty, behavioral changes, and more change.

### **Social Cognitive Theory**

Bandura's SCT may be the most significant theory of learning and development (Malone, 2002). The social learning theory was proposed by Miller and Dollard in 1941, but in 1963, it was extended by Bandura and Walters to add the principles of observational learning and reinforcement. Bandura proposed that individuals could learn through observation or modeling, and he refuted the traditional learning theory for understanding learning and provided the concept of self-efficacy in 1977 (Malone, 2002).

Bandura also emphasized how individuals learn a behavior, but may wait and not perform or model the behavior until a time when it will result in the most favorable outcome. Modeling can facilitate the transfer of values, knowledge, skills, beliefs, and practices, and promote personal and shared efficacy, while observation can be instrumental in self-development, adaptation, and change whereas individuals learn values, personal efficacy, lifestyles, and self-regulated principles (Bandura, 2003). "After individuals adapt personal standards and develop self-evaluative skills, self-demands and self-sanctions serve as guides, motivators, and deterrents; they do things that give them self-satisfaction and self-worth, and refrain from behaving in ways that produce self-censure" (Bandura, 2003, p. 168).

Bandura's (2003) social modeling can be applied to the transition and reintegration experiences of female student veterans with disabilities. This population of student veterans may have observed how fellow student veterans with disabilities persevered when they faced extreme adversities during transitioning and reintegration as related to their college entry. As a result, Bandura's social modeling could be instrumental in helping participants to construct and



improve their lives and increase their perseverance with the demands of college during their reintegration.

### **Transition Theory of the Four-S System**

Schlossberg's (1981) transition theory of the Four-S system (self, situation, support, and strategies) represents the four aspects of a transition that impact how well individuals cope with changes that occur from a transition. Schlossberg proposed four key aspects that impact how people adapt to transitioning: features of the transition; pre- and post-transition environments; the individual experiencing the transition; and their interaction to produce an outcome of adapting or failure to adapt. Each type of transition has ways of adapting, and the ease of transitioning can be impacted by the person's ability, well-being, health, and the pre-and post-environment of the transition (Schlossberg, 1981). Schlossberg, Waters, and Goodman (1995) asserted that transitions can change "lives, roles, relationships, routines, and assumptions, and it is not the transition per se that is critical, but how much it changes one's roles, relationships, routines, and assumptions" (p. 2). The framework of Schlossberg's transition theory as modified by Anderson, Goodman, and Schlossberg (2012) is based on this assertion:

Adults continuously experience transitions. Adults' reactions to transitions depend on the type of transition, their perceptions of the transition, context in which it occurs, and its impact on their lives. A transition has no end point; rather, a transition is a process over time that includes phases of assimilation and continuous appraisal as people move in, through, and out of it. (p. 59)

This transition theory presented a framework that helped to explain the transition of service members and veterans and the context of how they coped with the normal routine of living during and after transition. Emphasis was placed on Schlossberg's Four-S model in order

to provide a better understanding of the context and effects of transitions, and how it aligned with the study. Individuals will understandably experience some form of transition throughout their lifetime. All adults, especially veterans, will adapt differently to change and even to similar types of changes that may occur, and these changes can result in new relationships, new behaviors, and new self-perceptions. Numerous variables of differing relevance can affect the outcome of individual transitions.

### **Related Literature**

This section provided a synthesis of relevant literature and research on the transition and reintegration of female student veterans with disabilities as related to their college entry. Recent legislation was presented on measurements of veterans and nonveterans' disability, history of educational benefits, and benefits of higher education. The literature reviewed and presented was to substantiate the significance of this study. It provided the reader some insight on the limited research pertaining to the phenomenon of the study and substantiated that there is a gap in literature on female student veterans who have disabilities. Other related literature was presented on the learning needs of students, challenges faced during transition, college entry, and reintegration, and organizations providing services to student veterans.

### **Recent Legislative Mandates on Education and Student Veterans with Disabilities**

Recent legislative mandates were enacted that affected the academic success and reintegration of student veterans who have disabilities as related to their college entry and perseverance. This legislation and other governmental initiatives were instrumental in shaping the disability services of institutions of higher education. Some of the key legislation are: the Americans with Disabilities Act Amendments Act of 2008 (ADAAA); Section 504 of the Rehabilitation Act (amended as Title IV of Workforce Investment Act); Workforce Innovation and Opportunity Act (WIOA); Post-9/11 Veterans Educational Assistance Act of 2008 (referred

to as the Post-9/11 GI BILL); Post-9/11 Veterans Educational Assistance Improvements Act of 2010; and the Veterans Access and Accountability Act (VAAA). Even though there are other laws related to this phenomenon studied, these laws are applicable and were addressed specifically for purposes of this study as related to the college entry and collegiate experiences of female student veterans with disabilities during their reintegration into society. All of these laws guide the services that should be rendered by higher learning institutions and the legal rights of female student veterans with disabilities as well as student veterans who have no disabilities.

The ADA and Section 504 of the Rehabilitation Act (amended as Title IV of Workforce Investment Act) provided protection for student veterans with disabilities and are enforced by the OCR within the U.S. Department of Education. Section 504 of the ADA prohibits discrimination based on a qualified individual's disability in delivery of programs or activities receiving federal financial aid and stipulates what actions should be taken by institutions and employers to ensure equal opportunities and reasonable accommodations are provided (Office for Civil Rights, 2010). With these new ADA guidelines, the influx of veterans entering college could expose how higher education institutions are inadequately equipped to meet the diverse needs and demands of student veterans who have disabilities (Grossman, 2009).

In addition, Section 504 of the Rehabilitation Act of 1973, amended as Title IV of the Workforce Investment Act (WIA) of 1998 provided legal protection to ensure appropriate access to services and programs was granted to qualified students and student veterans with disabilities attending public higher learning institutions (Grossman, 2009; Office for Civil Rights, 2010). However, in July, 2014, the Workforce Innovation and Opportunity Act (WIOA) was signed into law, replacing the WIA, which was intended to increase employment, educational, and career

opportunities, and to strengthen programs for individuals with disabilities (Office of Special Education and Rehabilitative Services, 2014).

The Post-9/11 Veterans Educational Assistance Act of 2008 (VEAA), frequently referred to as the Post-9/11 GI BILL, became law in 2009. The Post-9/11 GI BILL provides 100% funding to colleges or universities for veterans who served three years on active duty since September 11, 2001 and provides the ability to transfer benefits to the veteran's spouse or children upon 10 years of service or agreement to serve for 10 years. The Post-9/11 GI BILL has been a tremendous motivator for service members and veterans to pursue an education as it provides the greatest educational benefits in history and has been used by over 760,000 veterans (Sander, 2012; Stripling, 2010; Vacchi, 2012). However, because of many concerns with its administration and implementation, it was proposed that eligibility should be extended to improve its benefits. As a result, the Post-9/11 Veterans Educational Assistance Improvements Act of 2010 was enacted in 2011 amending the Post-9/11 VEAA and other educational assistance programs for veterans (DVA, 2013a). Some significant improvements of this law are extended eligibility for educational assistance for veterans and certain members of the Reserve Forces and the National Guard, a new housing allowance for online students, \$1,000 book allowance for eligible spouses, and the state tuition cap was eliminated (DVA, 2013a).

In August, 2014, Congress passed the VAAA. The VAAA made several enhancements to the Post-9/11 GI BILL to include transferability of Post-9/11 GI BILL entitlements to dependents of service members that were killed in action, authorized veterans to pay in-state tuition to public institutions, and enhanced accountability of the DVA (SVA, 2014b). The VAAA was another tool to help ensure veterans and their family members were provided access to more educational benefits.

This legislation provided guidelines for future provisions of educational benefits and services for veterans and student veterans with disabilities. These laws also posed new concerns for colleges and universities in the provision of programs and services for veterans needing access to their educational assistance, such as financial aid, disability services and programs, academic advising, and other student services. While some student service centers at colleges and universities may utilize shared standards for student veterans, they lack consistent policies and standards of which to adhere (Rumann & Hamrick, 2009).

### **Measurements of Disability**

Over 56.7 million people, approximately 19% of the United States population, had a broadly defined disability in 2010, and these figures were expected to escalate over upcoming years because of aging baby boomers and the influx of service members expected to return home (U.S. Census Bureau, 2012). According to the 2009 American Community Survey (ACS) of the U.S. Census Bureau, the number of military veterans equaled 21.9 million with 5.5 million veterans having a disability; 11.3% of female veterans had a disability and 3.3 million had a SC disability, of which 652,000 had a disability rating of 70% or above (U.S. Census Bureau, 2010).

The ADAAA defined disability from a wider perspective with legal implications. The ADAAA defined disability as a mentally or physically disabling impairment that significantly limits one or more vital life events, has a history of such an impairment, or is known to others as having such a disabling impairment (Grossman, 2009). According to the Social Security Administration (2014), an individual with a qualified disability is anyone over the age of 18 who is unable to “engage in substantial gainful activity because of a medically-determinable physical or mental impairment that is expected to result in death, or has lasted or is expected to last for a continuous period of at least 12 months” (para. 1). Substantial gainful activity is defined as

“work performed for pay or profit; or work of a nature generally performed for pay or profit; or intended for profit, whether or not a profit is realized” (para. 2).

Disabling impairments can consist of limitations in walking, hearing, talking, eyesight, caring for oneself, working, various invisible disabilities, including cancer, epilepsy, psychological difficulties, learning disabilities, and other chronic health issues (Shackelford, 2009; U.S. Department of Justice, 2009). A disabling impairment does not have to considerably restrict or prevent any vital activity in one’s life to be considered as a significant limitation. The military, DVA, or institutions of higher education do not acknowledge every impairment as a disability. A disability is viewed differently by various organizations and government agencies.

Some other laws define disability differently. For example, an individual can have written proof of a disabling impairment and may be considered as having a disability, even though it may not be an apparent disability. The U.S. Census Bureau’s (2012) measurement of an individual’s disability may not always include persons with upper body disabilities (e.g., arms, shoulders, and back problems) or persons with psychological or mental illnesses, even though a large percentage of individuals with disabilities may possess these types of disabilities. The Armed Forces and the DVA consider any disabling impairments of service members and veterans, whether physical, mental, or psychological, to include upper body disabilities that were incurred or aggravated while serving in the Armed Forces (Federal Benefits for Veterans Handbook, 2014). However, disability claims are reviewed under different standards and defined differently by the DVA than the ADA and Section 504 of the Rehabilitation Act of 1973. Additionally, the OCR stressed that if the Armed Forces or the DVA determines that a veteran is qualified for disability benefits, it does not authorize the veteran to receive educational modifications (Burnett & Segoria, 2009; Office for Civil Rights, 2010).

According to the U.S. Census Bureau, a disability is measured by the following two means for veterans on the ACS survey as stated below:

- ACS disability – difficulty with self-care, vision, hearing, ambulatory, cognitive, and/or independent living, and this disability must not have occurred while serving on active duty in the military; and
- Service-connected (SC) disability - the disease or injury occurred or was aggravated while the service member was on active duty. (ADA National Network, 2014)

These two measurements of ACS disabilities may not totally embody all veterans' disabilities. The disabilities of veterans as discussed in the study were the permanent results of genuine injuries, scars, diseases, and trauma sustained or aggravated while serving in the military (Federal Benefits for Veterans Handbook, 2014).

Three very common disabilities among returning and transitioning veterans that are referred to as signature disabilities are: PTSD, traumatic brain injury (TBI), and depression, and about 30% of OEF/OIF veterans have one or more of these signature disabilities (ADA National Network, 2014). This may be a higher percentage due to some veterans may have failed to reveal they had disabilities or, at the time of the ACS survey, some veterans might not have been diagnosed with a disability. However, according to the DoD (2007), PTSD, TBI, neurological impairments, and poly-trauma are the main four disabilities that veterans may incur during military service; although, PTSD and TBI were the signature wounds of OEF/OIF veterans. Poly-trauma involves several injuries to one or more areas of the body requiring specialized care (Ostovary & Dapprich, 2011). Church (2009) revealed that blasts from improvised explosive devices were “considered the signature cause of injuries during OEF/OIF deployments” (p. 44).

## **Brief History of Federal Educational Benefits**

Federal educational benefits for veterans are the largest federal financial aid program for students in the nation (Angrist & Chen, 2011). A brief history of educational benefits is provided in order to expose the various increases and changes that occurred throughout the history of federal educational benefits available to veterans dating back to 1944. The veteran population increased after World War II and a substantial number of new benefits were enacted for war veterans. The World War II GI BILL was enacted in 1944 offering educational assistance of up to \$500 each year for up to four years to veterans with an honorable discharge, and it had more impact than any law since the Homestead Act of 1862 (DVA, 2013a). Since World War II, it was anticipated that veterans would enroll in college in extraordinary numbers (Cook & Kim, 2009). As a result, veterans had higher income levels in comparison to nonveterans of similar ages, became better educated, and were more likely to work in professional and skilled jobs (Madaus, Miller, & Vance, 2009).

Additional educational assistance acts were passed to provide educational benefits to veterans of the Korean Conflict, the Vietnam Era, Persian Gulf War, Iraq, and Afghanistan wars (DVA, 2013a). The Korean GI BILL entitled veterans to receive up to \$110 a month or higher who served from June 1950 through January 1955. The Veterans' Readjustment Benefits Act of 1966 created the Post-Korea and Vietnam-Era GI BILL for peacetime veterans who served from 1955 to 1964 and for veterans of the Vietnam War who served from 1964 to 1975 (DVA, 2013a). This act was designed to boost the appeal of the Armed Forces and to provide greater educational benefits for veterans. Also, vocational readjustment benefits and restoration of jobs lost or interrupted due to their being called to active military duty were available for veterans



from June 1966 through December 1989. Benefits increased throughout the programs and the amounts ranged from \$100 per month initially and reached \$376 a month by 1984.

Approximately 2,000,000 veterans were qualified for educational benefits after the enactment of the Post-9/11 Educational Assistance Act of 2008, of which an estimated 1,200,000 may have been veterans with disabilities (DVA, 2011). The number of veterans that earned a bachelor's and an advanced degree increased significantly from 2000 through 2009. Higher numbers of female veterans completed a bachelor's degree as compared to nonveteran females; a larger percentage of female veterans had a bachelor's degree than male veterans; and overall, the number of veterans having a bachelor's degree was lower than that of nonveterans from 2000 to 2009 (DVA, 2011).

One should be able to comprehend why there has been such a vast increase in the college enrollment of veterans. While the different GI BILLS have undergone many changes with varying educational benefits, the current Post-9/11 GI BILL which became effective in 2009, offers the greatest educational entitlements ever. It pays up to \$19,198 annually for tuition and fees, up to \$1,000 annually for books and supplies, and a housing allowance based upon the zip code of the respective college, if enrolled at least half time (Federal Benefits for Veterans Handbook, 2014). This sophisticated historical account of different educational benefits involved numerous programs offering specific benefits that helped to increase socio-economic success (Madaus et al., 2009). Many individuals enlisted into different branches of the Armed Forces to receive educational benefits for college. Angrist and Chen (2011) highlighted some key incentives offered to individuals that enlisted into the Armed Forces to include vocational and technical training, education benefits to attend college, college credits for military training completed, military scholarships, and opportunities to complete college credits while on active

duty. Educational benefits provided by the Post-9/11 GI BILL have drawn an influx of service members and veterans to the collegiate environment in pursuit of college degrees and has greatly impacted institutions of higher education.

### **Benefits of Higher Education**

The benefits of pursuing a higher education make it crucial to have adequate access to resources and programs for students, specifically student veterans with disabilities. While a college education is not a guarantee of a perfect, successful life, evidence has shown that a college education is necessary to have a financially, economically, and socially stable and secure life, despite the transitioning challenges that may be endured (Baum, Ma, & Payea, 2013; Murphy, Blustein, Bohlig, & Platt, 2010). With no college degree, “those born into the lower economic rungs are likely to stay there” (Baum et al., 2013, p. 8). Earning a degree in higher education substantially improves employment and earnings potential, provides the means to help individuals to eat and live healthier and more fulfilled lives, actively engage in society, and to nurture and build opportunities for their family members. A college degree increases the possibility that individuals will remain gainfully employed and have greater socioeconomic success. Research has shown that over a 40-year span of full-time employment, the average earnings of individuals with a four-year degree are 65% higher than average earnings compared to a high school graduate, and average earnings of those with an associate’s degree and those with some college but with no degree are 27% and 13% higher than the average earnings of high school graduates (Baum et al., 2013).

A college education may have different meanings to different individuals based upon their age and life circumstances when they enroll in college, the college enrolled in, subjects they will study, college status, and their attitude and behavior toward college and other interests.

“The knowledge, fulfillment, self-awareness, and broadening of horizons associated with education can transform the lives of students and of those with whom they live and work” (Baum et al., 2013, p. 8). This is not to imply that every student veteran must earn a four-year degree or that their success is defined by their level of education because an individual’s motivation, needs, abilities, personal preferences, and goals are different.

### **Addressing Learning Needs of Students**

Obtaining a college education can empower individuals to include those with disabilities. It can provide more opportunities and help to broaden their horizons financially, socially, academically, and professionally. Recommendations to participate in educational programs and services to aid in learning can benefit veterans by helping them to access needed resources and services, especially those experiencing memory, awareness, and attention difficulties (Osborne-Smith, 2012). A good education offers substantial rewards, such as more desirable employment with higher pay, more employment options, greater benefits, a healthier life, and a more rewarding and satisfying career.

**Veteran students.** Community colleges have ideally responded to the learning needs of student veterans and have been a key sector of higher education for service members and veterans since 1944. The year of 1944 is a “landmark in the history of the relationship of community colleges and the military, and the GI BILL helped shape a middle class in the United States, by furthering social mobility through access to higher education” (Rumann, Rivera, & Hernandez, 2011, p. 52). In 2013, 26.8% of veterans aged 25 and older earned a bachelor's degree or higher, while 29.9% of nonveterans earned a bachelor's degree or higher; 29.1% of veterans’ (age 25 and older) highest educational achievement was a high school diploma or its equivalent as compared to 27.7% of the nonveteran population (U.S. Census Bureau, 2010).

It was estimated that military service increased the possibility of a veteran attending college and earning an associate's degree by six to nine percentage points (Angrist & Chen, 2011). Community colleges offered a range of vocational and pre-baccalaureate courses and technological advancements in delivery of courses on military installations across the nation which helped to trigger the increase in enrollment of student veterans. The Post-9/11 GI BILL and an influx of veterans and service members entering college have impacted higher education institutions to establish programs focused specifically on student veterans offering veteran orientation programs, extra financial aid, out-of-state tuition waivers, and other initiatives to attract veterans' enrollment (Rumann et al., 2011).

**Nonveteran students with disabilities.** Students with disabilities are the most rapidly increasing category of students enrolled in higher education institutions (Hitchings et al., 2010). Adults reentering college may manage several life roles while attending college (Ross-Gordon, 2011). Nonveteran students with disabilities and adult students are viewed as nontraditional students who can appreciate the opportunity to incorporate learning with their lifestyles and they typically desire more active approaches to learning (Hitchings et al., 2010; Ross-Gordon, 2011). People want to be heard and know that they matter, regardless of whether or not they have a disability. Developing a voice is a cognitive method; being recognized and heard is a symbol of being connected; and knowing that one matters is vital to their academic success, especially for a female nontraditional student or female student veterans with disabilities (Baechtold, 2011). Nonveteran and female student veterans with disabilities were addressed in this chapter and other chapters for purposes of comparing and drawing conclusions about participants in this study.

Some features that differentiate nonveteran and veteran students with disabilities from the traditional younger college student are maturity, motivation, limited social support, and

acceptance, and they probably juggle multiple roles in life, such as parent, spouse, caregiver, and/or employee (Ross-Gordon, 2011). These multiple responsibilities can limit students' time for their studies, interaction with peers and establishing relationships, and engaging in campus activities. While these responsibilities may be rewarding and beneficial, they can affect students' learning and their academic success.

Students with a disability, both veterans and nonveterans, need to know their rights and responsibilities and the responsibilities of their respective educational institution so they can enjoy the provided benefits, college, and life experiences (Office for Civil Rights, 2011). Institutions of higher education are mandated to "provide academic adjustments to ensure they do not discriminate based on the disability, and if housing is provided to nondisabled students, they must provide comparable, convenient, and accessible housing to student veterans with disabilities at the same cost" (p. 1). Institutions of higher education are mandated to provide accommodations, services, and support for students with disabilities as required by Section 504 of the Rehabilitation Act of 1973 and the ADAAA of 2008. Some students with disabilities will need accessible special services and support on campus and some will not.

Some implications for veterans and nonveteran students with disabilities are explained. Laws were enacted that protected the rights of students with different disabilities and enabled them to attend college. If nonveteran students with disabilities fail to achieve their career goals, they may become frustrated and discouraged. Students with disabilities may not understand the various ways in which their disabilities can potentially influence their academic choices and may not utilize the career development and other services available to them. Higher education institutions should become knowledgeable of the entire process that veterans experience when

transitioning from the military to college so they can better understand their needs and provide them with adequate services, programs, and support.

Nonveteran and veteran students with disabilities both pose major challenges for higher education institutions that provide programs and support services that were designed more toward the traditional students. These institutions may have to reassess and redesign their programs and services for female student veterans with disabilities and additional services and support programs may be needed to adequately meet their needs. Thus, students' diverse needs for specific services have implications for Student Services Offices, Disability Services Offices, and other support services available on campuses.

**Nonveteran female versus male students.** Females and males differ in their reasons and inspirations for attending college. Some students pursue a college degree with the desire to pursue professional careers and some may desire to acquire additional skills. According to the U.S. Census Bureau's 2011 Annual ACS survey, approximately 56% of nonveterans reported being enrolled in some college as compared to veterans of which approximately 61% reported being enrolled in college (DVA, 2013b; SVA, 2013; U.S. Census Bureau, 2012). Females were expected to account for the majority of college students in the fall of 2014 in comparison to males. From 2000 to 2012, there was an increase in the numbers of younger and older students. Increases in enrollment of traditional college students contributed to the increase in overall college enrollment, and student enrollment of ages 18 to 24 increased from 35.5% in 2000 to 41% in 2012 (National Center for Education Statistics, 2014). Pattillo (2011) declared that the number of female student veterans will increase as the number of student veterans rises.

Past studies revealed that older, nontraditional students may desire flexibility and structure and their learning styles and preferences are partially influenced by their high school

experiences and their social and cultural backgrounds (Ross-Gordon, 2011). Andragogy is one of the best theoretical approaches to adult students' learning used as a framework for student learning over the past few decades, although it has been debated by researchers (Knowles, 1980). The andragogy framework proposed that adults desire independent learning that is self-directed; they are highly motivated; learning is task or problem-focused instead of subject-focused; their willingness to learn is based on whether they need to know or do something; and adults have an enormous amount of experience (Knowles, 1980).

Social support or the lack thereof can play a role in how military experiences can impact the transition of female student veterans who have disabilities and their college experiences. Perceived social support involves supporting and permitting student veterans to reveal their stories so that they can receive some degree of recognition, reparation, resolution, and restoration (Ingala, Softas-Nall, & Peters, 2013). Veterans' adjustment to civilian life, work, and college can be affected when their social surroundings change. Strong social support can make a difference and influence how veterans handle their fears, vulnerabilities, and frustrations, and the impact on their lives (Ingala et al., 2013). Veterans' past military experiences can influence their worldview and cause them to perceive their social environment differently. Consequently, veterans bring their worldviews into college classrooms, although their worldviews may be different from those of nonveteran students because of their military training and experiences. Colleges should offer social support to enhance students' adaptation to college life and to help them become more successful academically (Baker & Robnett, 2012).

Goodman and Bowman (2014) asserted that persistent college diversity is crucial and influences students to have different concepts, perceptions, and expectations. Past literature has shown that diversity can facilitate learning and development of college students. The more

students engage in different courses and experiences with other students, the more advantageous it is for them to become more accountable, have more positive attitudes toward learning, mental well-being, and critical thinking (Goodman & Bowman, 2014).

Implications for nonveteran female versus male students are presented. All students, whether veterans or nonveterans, with and without disabilities, should be instructed on how to be their own advocate, think independently, and to be accountable for their unique needs and learning when making decisions concerning their academic experiences and other responsibilities. Schmidt (2014) suggested that students be informed that learning is their responsibility, be accountable for their own learning, and use effective study tactics. However, because students may juggle many responsibilities and academic requirements, opportunities to establish relationships on campus can be limited and their academic success could be threatened.

### **Challenges Faced by Veterans during Transitioning**

Transitioning from the military into the collegiate environment and the civilian workforce can present many unique challenges for veterans in general. The transition and reintegration process can become more demanding as veterans' roles and responsibilities change upon transitioning from the military, as they seek new jobs, enter college, and pursue other endeavors. Family members of veterans may also encounter many challenges due to changes in the family structure and dealing with responsibilities of being a single parent while the other parent is deployed or serving elsewhere in the military.

**General population of veterans.** Entering college can be daunting and challenging for veterans who experience reintegration difficulties with physical, social, moral, and emotional functions (Ostovary & Dapprich, 2011; Rumann & Hamrick, 2010). However, college life is much more tailored to the individual, is less structured, can become burdensome and stressful,



and may take more time for degree completion (SVA, 2012). Faculty, scholars, and administrators of higher learning institutions should understand the problematic and unexpected challenges endured by student veterans with disabilities (Shackelford, 2009). Additionally, the difficulties and challenges that student veterans may face while transitioning and reintegrating may not be well understood by college faculty, administrators, and other scholars of post-secondary institutions (Ostovary & Dapprich, 2011; Rumann & Hamrick, 2010).

Student veterans with their unique military experiences and various disabilities are considered as nontraditional students in institutions of higher education (Barnard-Brak, Bagby, Jones, & Sulak, 2011; O'Herrin, 2011; Zinger & Cohen, 2010). Veterans are usually older and have earned many transfer credits through the completion of college courses while on active duty or credits recommended by the American Council on Education (O'Herrin, 2011). Higher learning institutions and society are concerned about student veterans' academic success and institutions have begun to respond and provide programs and resources to boost student veterans' academic success (Zinger & Cohen, 2010).

Student veterans may experience many of the same problems as nonveteran and traditional students enrolled in college, but many student veterans experience unique challenges that traditional nonveteran students may not understand. The experiences that veterans gained in the military can significantly benefit them while attending college and can also help them to be more successful academically (SVA, 2012). Though many of these challenges may surpass the scope of college administrators, scholars, and policymakers, their origin must be appreciated in order to fully understand veterans' setbacks and problems in order to build trust (Kurzynski, 2014). Practical resolutions for student veterans can be attained to improve veterans' programs and services and to increase their academic success.

Evidence showed that 80% of higher education institutions enrolled student veterans who withdrew from college after being ordered to active military service (Rumann & Hamrick, 2010). When veterans return home after exiting the military, they are not the same; their home setting and the world are different which can generate physical, psychological, and social problems for veterans and their families (Russell, 2013). Consequently, this can negatively affect their persistence, ability to cope, and academic achievement if their medical problems or disabilities go undiagnosed or untreated. Researchers suggested that serving in combat can cause deficits in memory, attentiveness, retention, and inability to function well with daily activities which could largely impact their perseverance and academic success (Church, 2009; Grossman, 2009).

Some of the challenges with transitioning that veterans may face are loss of friends and family members, homelessness, unemployment, academic endeavors, and inability to function well due to physical injuries and trauma. Physical wounds are the most apparent effects of combat. The aftermath of combat exposure during OEF/OIF wars is evident from countless cases of PTSD, TBI, missing limbs, deaths, and shattered families. PTSD is an anxiety disorder that may develop after undergoing terrifying events which may cause severe harm; it reflects symptoms of depression, difficulty concentrating, increased arousal, anxiety, severe guilt, anger, sensitivity to noise, avoidance, sleeping difficulty, nightmares, and hopelessness (Barnard-Brak et al., 2011; Carlson et al., 2013; Graf et al., 2011; Shackelford, 2009). Initial symptoms of PTSD may not surface right away and can be delayed for months or years after the traumatic events (Graf et al., 2011). TBI results from direct or penetrating trauma that can lead to functional impairments. Symptoms of TBI include: problems with hearing, vision, motor skills, endurance, balance, speech, fatigue, headaches, pain sensitivity, attentiveness, depression, mood swings, paranoia, and hallucinations (Church, 2009). Some of these behavioral and emotional

issues may also be similar to symptoms of PTSD and other mental health disorders. Consistent and extensive research has not been established to examine transitions from military service to college or the workforce, or the effects of PTSD and TBI on the transition (Ostovary & Dapprich, 2011). Thus, the perception, experiences, and voices of these female veterans with disabilities can help close the gap and add to the limited dated literature currently available on female student veterans.

Family members also experienced many challenges during deployments and return of service members. Some challenges encountered by families were changes in family systems, adapting to being a single parent and separation from spouse, parenting and marital problems, obtaining social support, and psychological preparedness in case of serious injuries or death of the service member (Graf et al., 2011). In 2009, only 53% of returning service members from OEF/OIF wars had been seen by a physician or a mental health expert during the last year before returning home, and only about half of them had received adequate medical care (Church, 2009).

The influx of service members that returned home and enrolled in college over the past few years has increased and more veterans are coping with the repercussions of trauma and injuries incurred during combat experiences (Ingala et al., 2013). Veterans who experienced trauma suffered the effects of such trauma in various ways which may have been aggravated by what happened during their readjustment to life (Russell, 2013). Many veterans cope with a future of uncertainty. Veterans have invisible scars from their military service, and they find it difficult to adjust to civilian life because they have adapted to surviving by any necessary means.

Active duty service members and veterans struggle with moral and ethical opposition. A somewhat new concept of an existing disabling impairment is moral injury. Moral injury is caused by exposure to ugly, damaging combat experiences that violate one's knowledge of what

is right and wrong, and can provoke symptoms of grief, pain, regret, anger, embarrassment, nightmares, depression, and isolation (Wood, 2014). Moral injury is different from the most common war wound of PTSD, but both types of injuries have similar symptoms and may go unnoticed. Current treatment for PTSD may not adequately treat moral injury. Maguen and Litz (2012) asserted that PTSD is a “mental disorder requiring a diagnosis, while moral injury is a dimensional problem; there is no threshold for establishing the presence of moral injury; and veterans may have none or mild to extreme symptoms of moral injury” (p. 1).

Veterans that have been exposed to or have served in combat may struggle with ethical and moral uncertainties of war along with moral wounds. According to Wood (2014), moral injury has not been officially acknowledged by the DoD, although it can cause pain and sorrow, damage veterans’ moral beliefs, and have long-term effects on veterans and their family members. It can be difficult to communicate the trauma and adequately describe the magnitude of human suffering, injuries, guilt, betrayal by fellow soldiers and leadership, and other ugly realities of combat.

The enrollment of students with disabilities in institutions of higher education has significantly increased over the past decade as more students with disabilities are attending college. According to the Office for Civil Rights (2011), one reason for the increase in enrollment of students with disabilities is services and support systems are now available in higher education institutions for student with disabilities. Although the enrollment of student veterans on campuses has increased tremendously, there is still a lack of understanding regarding student veterans at colleges across the nation (Jones, 2013). Recent qualitative studies exploring real-life experiences of veterans that transitioned to civilian life are scarce (Demers, 2011; Rumann & Hamrick, 2010; Yan et al., 2012). As many service members exit the Armed Forces

and return to civilian life, they may encounter serious challenges readapting after transition and many may not access needed medical services. Not all college campuses have accessible services and appropriate programs to assist student veterans or student veterans with disabilities, and these student veterans face challenges while trying to fit in on the campus (Ackerman et al., 2009). According to DiRamio and Jarvis (2011), only about 22% of colleges that assist student veterans provided transition support. Hinojosa and Hinojosa (2011) asserted that “physical and social isolation and deprivations of deployment encourage soldiers to rely heavily on military unit members for social and emotional support, forging strong friendships” (p. 1146).

Veterans can experience many challenges, stressors, behavioral, mental, and emotional disorders, and other health problems, such as PTSD, TBI, depression, anger, hostility, moral injury, and substance abuse which are possibly consequences of combat experiences (Carlson et al., 2013; Graf et al., 2011). According to the DoD (2010), 31% of veterans overall have PTSD, and combat exposure can increase risk for anxiety, anger, depression, and other stressors. The increased length and frequency of deployments increased the challenges and stressors associated with various combat experiences, adding even more difficulties for veterans trying to reintegrate into civilian employment and/or collegiate environments (Ostovary & Dapprich, 2011). These problems, emotions, and stressors are rather common consequences for veterans readjusting to civilian life as the transition and reintegration process can be extremely stressful. The military experiences of both male and female student veterans “have set them significantly apart from other students” (Shackelford, 2009, p. 36).

Veterans may be unable to recognize and accept the truth that they have disabling impairments or specific deficiencies in functioning due to prolonged effects from combat exposure added to the stress of transitioning and reintegrating into civilian life. Physical wounds

can disfigure and leave scars. Moral injury that incurred during exposure to combat involves numerous adverse consequences and may go unnoticed and/or untreated. Further, the effects of disabilities, moral burdens, and struggles of veterans can remain invisible to family, friends, fellow service members, and society. Veterans fight an inner war to recover individual accountability and may struggle with guilt, embarrassment, anger, pride, betrayal, and other effects of war, but researchers have overlooked the existence of these inner wars and human struggles (Sherman, 2010).

Many veterans have hidden medical ailments and experience symptoms that may go undiagnosed and/or untreated for PTSD, TBI, moral injuries, or other disorders during transition and reintegration into civilian life, and some may hesitate to disclose their disabilities (Church, 2009; Graf et al., 2011; Hinojosa & Hinojosa, 2011; Maguen & Litz, 2012). Veterans have to juggle family responsibilities, life roles, employment, effects of any trauma and injuries incurred on active duty, doctor appointments, therapy, and other medical care, along with any disabling impairments. All of these challenges were presented to reveal potential hardships and problems that veterans may contend with as they enter college during reintegration to give readers a clearer sense and understanding of veterans' transition experiences.

**Female veterans.** Females have served in numerous combat support positions and have been exposed to many of the same dangers as those of male service members, to include serving in combat as doctors and nurses, helicopter pilots, serving on ships and combat aircraft, and other support positions. Females have honorably and courageously served in the Armed Forces since the American Revolution and continually play a crucial role in the military (DVA, 2013a). According to Madaus et al. (2009), record numbers of females encountered combat situations during OEF/OIF, but the extent of how female veterans have been affected by combat is

unknown. Female service members that “were exposed to combat environments were definitely at risk for developing PTSD” (Church, 2009, p. 47). Females are a vital part of the military, although the military has traditionally been male (Sherman, 2010). According to DoD (2010), the Armed Forces were comprised of about 14% females which was reportedly the highest percentage of females in the history of the military. Almost 2 million service members have served in Iraq and Afghanistan, and in 2007, over 180,000 female soldiers were deployed in support of OEF/OIF, which exceeded the number of females that ever served in previous wars (Defense Manpower Data Center, 2009; DoD, 2007).

Female service members have undergone many transitions throughout their military career in contrast to male soldiers to include changing various duty stations, leaving their family members behind while serving on unaccompanied tours of duty (no family members allowed), deployments, and exiting the military. Females may have served in different environments and assignments that were dominated by males who sometimes lacked compassion and a thorough understanding of female needs and their individuality, and/or failed to show females the proper respect that they deserved. Women faced unique challenges when readjusting after deployments, transitioning from the military, and reintegrating into society (Ostovary & Dapprich, 2011). While females were traditionally exempt from combat jobs, they served in support positions, such as military police, medical, and convoy operations, exposing them to high risks of physical harm, trauma, and other effects of combat.

Specific problems reported by female veterans were military sexual trauma (MST) and mental health issues related to this trauma, as well as some of the social, physical, and mental disorders experienced by male veterans (Ostovary & Dapprich, 2011; Street et al., 2009). While the majority of MST victims are females, both males and females are impacted equally, though

they react in similar ways, but may struggle with different complications, depending on their race, ethnicity, religion, and culture. As of 2010, 20% of female veterans treated at a DVA health care facility reported being a victim of MST (DVA, 2015). As the female population increases in the military, there is concern that the number of reported MST cases involving females may also increase. In 2005, the Sexual Assault Prevention and Response Office was created by the DoD to help deal with MST; however, it is currently estimated that the majority of MST cases in the Armed Forces are still not reported and it becomes challenging when females do not want to report such trauma and abuse (DVA, 2015; Valente & Wight, 2007). Free health care is offered to MST victims at every DVA medical facility and Veterans' Center for mental and physical problems related to MST. Victims of MST are provided free care and treatment even if they are not eligible for other treatment and services by DVA; no disability rating is required, and no proof that the MST occurred is needed (DVA, 2015).

While there is much known about PTSD in male veterans and service members who fought in conflicts before OEF/OIF wars, less is known about PTSD in female veterans that served in support of OEF/OIF (Carlson et al., 2013). Studies on the readjustment of veterans have mainly addressed psychosocial adjustment from the perspective of PTSD (Demers, 2011). Female veterans are "more likely to report negative reintegration experiences than men, and it may also be more complicated for female veterans due to having multiple life roles" (Yan et al., 2012, p. S549). Female student veterans who have disabilities suffer from different types of physical, social, emotional, moral, and/or mental disabilities and may enter college at a disadvantage in comparison to student veterans with no disabilities or the general population with no disabilities. Baechtold (2011) acknowledged that "a person is no less a soldier because she is woman, and no less a woman because she is a soldier" (p. 80).



## **Challenges Faced Upon College Entry/Reentry**

Serving in the military is demanding, but combat is a life-changing experience that can profoundly affect service members transitioning from the military into an environment where they may have to deal with danger, continual threat, and uncertainty (Branker, 2009). Evidence has shown that student veterans with disabilities may already be experiencing difficulties and unique physical, social, psychological, moral, and medical challenges even before they enroll in college (Sander, 2012). Female student veterans with disabilities may face more challenges entering the college environment than the general student population and student veterans who have no disabilities. These challenges and certain changes can possibly affect female student veterans' ability to quickly adapt and cope with changes, thereby affecting their academic success. Conversely, female student veterans with disabilities who experience symptoms of moral injuries face physical and mental challenges that can affect academic success as it may cause an inability to stay alert, focus, adapt, cope, and interact sufficiently. The challenges faced while transitioning from the military and entering college are many, and the diverse needs of female student veterans with disabilities may vary based on qualifications, interests, and academic goals (SVA, 2012). The combat and noncombat experiences and effects of injuries and/or disorders incurred by veterans entering or returning to college can shape their behavior, responses to daily situations, and their academic success.

Female student veterans with disabilities frequently face different challenges than male veterans which has implications for colleges as they strive to assist female student veterans by linking them with the appropriate services that they need (Sander, 2012). These student veterans may need social, medical, and mental health services, special transportation, work-related assistance, access to therapists, and other services, which can cause them to be vulnerable when

these services are lacking or interrupted (Schlossberg, 1981). Jones (2013) indicated that campus personnel should have a solid understanding of female veterans' needs in order to better assist them. Further, faculty can serve as vital change agents by integrating research and theory on learning and advocating adult programs and services on campus (Blair, 2010).

While student veterans with disabilities bring unique challenges, they also bring their strengths, valuable perspectives, and other assets to the campus, such as leadership skills, teamwork, resilience, and self-discipline (Church, 2009). Higher education institutions and students can benefit from the strengths that female student veterans bring to the campus, such as “a wealth of knowledge on living abroad, personal experiences with innovation, accountability, responsibility, and opportunities to enrich classroom discussions and enhancement of campus diversity” (O’Herrin, 2011, p. 15). Baechtold (2011) offered this proposal:

Higher education can support female student veterans by developing intentional programming efforts; establishing learning communities; providing a female student veteran group as a subset of the student veterans organization on campus; establishing a link with the counseling center; working with faculty and support services by connecting women with programs; and designing professional development opportunities for faculty so all women, especially veterans, experience validation as learners. (p. 79)

Some veterans may lose some or all of their federal benefits upon discharge from the military, depending on their disability, reason, and type of discharge, which can create hardships and challenges during their transition, college entry, and reintegration into society. The complex, lengthy processes required by service organizations to assist veterans with their transition and reintegration could become barriers to successful academic achievement. Accelerated enrollments in college may place veterans at risk of heightened arousal,

inattentiveness, anger flare-ups, and greater irritability due to noise, poor concentration, and stressful environments on college campuses (Burnett & Segoria, 2009). Symptoms of PTSD, TBI, other disorders, and trauma may become intensified and create more barriers that could jeopardize academic success.

The anxiety and stress experienced after combat exposure, past military experiences, and current academic responsibilities pose challenges for veterans pursuing a college education (Zinger & Cohen, 2010). Colleges can better assist female student veterans who have disabilities by ensuring appropriate services and support systems are accessible and faculty regularly interacts with student veterans. Colleges and universities should endorse student organizations, such as student veterans' organizations and student government associations because of the necessity and importance to student veterans (Pamphile, 2013). Female veterans with disabilities need to know that colleges will protect their confidentiality when handling, releasing, and storing personal documents and information related to their disability, be attentive, and ensure that they provide courteous support (Burnett & Segoria, 2009). Further, more problems could evolve with student veterans' interaction and distrust of personnel providing veterans' services.

Little research has explored "a sense of self and identity for women in today's military; however, what we do know suggests that such a sense of identity can have an impact on women's health and influence their access to services" (Cromptoets, 2011, p. 27). Operation New Dawn (OND) was the end of military involvement in Iraq and Afghanistan and it was anticipated that an influx of returning service members and veterans would enter or reenter colleges (DoD, 2010). This influx of veterans entering college demanded that institutions of higher education better understand and respond to veterans' unique physical, social, and mental impairments in order to properly retain, support, and boost their academic success. Because of

the increased enrollment of student veterans, there is greater need to understand the importance of perceived social support (Ingala et al., 2013).

Studies were conducted that explored factors contributing to college entry decisions. Some factors found to influence one's decision to enter college were accessibility, family background and responsibilities, finances, option of two or four-year colleges, parents' expectations, academic goals, and college features, such as type of college, quality of college life, and college demographics (Lee, Almonte, & Youn, 2013). After transitioning from the military and prior to entering college, veterans and service members have to contend with other decisions and commitments. According to Pattillo (2011), female student veterans' experiences with college entry are normally different than male student veterans. Females are more likely than males to choose college over entering the workforce (Lee et al., 2013). Rather than opting to attend colleges based on cost and accessibility, veterans may choose a community college located close to a military installation because they feel chances of receiving more financial aid and assistance with academic and disability accommodations are greater (Madaus et al., 2009).

Presumably, female student veterans who have disabilities are generally older and more mature, face great challenges, and have different experiences than most college students. Female student veterans with and without disabilities identify themselves differently from nonveterans. Student veterans may have different requirements from the nonveterans on college campuses because of their military service and disabilities (e.g., PTSD, TBI, and other impairments) which can affect their perseverance and academic success.

Stakeholders of institutions who understand the issues that female student veterans with disabilities currently face can provide them with the assistance they may need during their transition to college (Rumann & Hamrick, 2009). Despite the gratification of an education for

learning purposes, most students enter or reenter college with the ultimate goal of entering the workforce (Sandoval-Lucero, 2014). Some veterans may seek employment instead of enrolling in college. Veterans may undergo various career transitions when they exit college and transition to the workforce and may require different coping skills to adapt (Murphy et al., 2010).

During recent years, often veterans enter or reenter college after exiting the military and higher educational institutions need to be prepared to help student veterans have a smooth transition. Students can face countless problems when entering college, to include academic enrollment, financial difficulties, complex forms to complete, academic advising, and counseling services (Rumann & Hamrick, 2009). Research has shown that student veterans' concern about their finances is the main problem in transitioning as well as their skills, physical disabilities, health concerns, mental difficulties, family background and commitments, and military duties with the National Guard or Reserve Forces. Female student veterans with disabilities "contribute to the diversity of higher education as both students with unique experiences as veterans, and as students with possible disabilities, either psychologically or physically" (Barnard-Brak et al., 2011, p. 30). Many challenges experienced by female student veterans with disabilities during transition are not understood by administrators, faculty, and other stakeholders of institutions of higher education (Rumann & Hamrick, 2010). Institutions need to understand that student veterans with disabilities face unique challenges and have different experiences and perspectives than traditional students, to include how they identify and disclose their disability (Burnett & Segoria, 2009; Madaus et al., 2009).

This study serves to inform faculty and other stakeholders of higher education institutions of the concerns and challenges faced by female student veterans with disabilities. Consequently, faculty and other educational stakeholders can become more knowledgeable of student veterans'

needs and can improve or add adequate programs and services to better serve and compel them to persevere in college until completion of their education. Such initiatives could also help student veterans to have a more rapid and smoother reintegration.

### **Reintegration Challenges and Concerns**

Veterans react differently during their reintegration into society. Reintegrating back into civilian life can vary from a few weeks up to several years, depending on the veterans' social support system, how hard they strive at reconnecting with family and friends, and other individual factors (Hinojosa & Hinojosa, 2011). Family members of veterans have expressed concerns that veterans may not be capable of talking about specific combat and/or traumatic experiences because recalling such events or experiences may be extremely upsetting and painful (Russell, 2013). Social support may consist of various types, such as having someone to confide in, financial assistance, physical and emotional support, sense of belonging and feeling needed, and connection to social groups (Ingala et al., 2013).

Student veterans may endure unique challenges, problems, personal stress, and concerns that can become overwhelming, and the lack of strong institutional support can add to their worries (Baumann, 2013). Females transitioning from the military seek to balance their responsibilities, environments, and life roles from military to civilian: independent to family member, soldier to student, male-dominated to a different campus culture, and they will respond to their unique transition to college (Baechtold, 2011). These student veterans are accustomed to being part of a strong, close-knit circle of fellow soldiers that shared common experiences. However, when they entered college, they might have met students, faculty, and other staff who did not understand the experiences or challenges they encountered. Baechtold (2011) declared:

Female veterans want to be appreciated, respected, and acknowledged as a person; recognized as the women they are and not valued or measured against any stereotypes of either soldiers or females because some females identify strongly as veterans and others desire to be seen no differently from civilian women on campus. (p. 80)

A substantial number of veterans experience many problematic stressors and emotional, behavioral, and mental disorders, such as PTSD and depression, even though these disorders may not be diagnosed or treated as they transition and reintegrate back into society (Graf et al., 2011; Hinojosa & Hinojosa, 2011). Female veterans can experience many challenges and unique stressors while transitioning and during reintegration due to female veterans having more combat exposure during OEF/OIF (Street et al., 2009; Yan et al., 2012). Women may be at higher risk for mental health and problematic relationships during reintegration, but many adjust well when they return home which is indicative that women can overcome negative consequences related to deployment, transition, and reintegration experiences (Carlson et al., 2013). However, as emphasized by Blevins, Roca, and Spencer (2011), only a few evidence-based programs are available that are conducive to supporting good, sound reintegration.

Alarming numbers of service members and veterans have physical disabilities, moral, psychological and emotional wounds, and trauma. The veterans suffering from these injuries and wounds may begin college at a grave disadvantage which can significantly affect their academic success and reintegration. More research is needed to inform faculty, administrators, scholars, and other stakeholders of higher learning institutions of the special needs of student veterans with disabilities and the appropriate support, resources, and programs that will enable them to successfully complete college and reintegrate into society quicker and more smoothly.

## **Organizations Providing Services to Student Veterans**

Different programs and organizations provide assistance to student veterans to help them be more effective, increase their performance, and become successful in college. The services and support range from counseling, tutoring, educational benefits and services, vocational rehabilitation, medical care, employment, and other support. Benefits and services provided by these organizations can vary depending on the veterans' needs, disability status, and other factors. Because of the study's focus, some organizations were presented to reflect on the nature of the services and programs that exist to support student veterans during and after transition and reintegration into civilian life.

**Department of Veterans Affairs.** The DVA controls and manages the largest integrated health care organization in the nation and provides access to medical care, counseling, vocational rehabilitation, employment and educational opportunities, disability compensation, and other benefits and services to veterans, their dependents, and survivors (Federal Benefits for Veterans Handbook, 2014). Its benefits, responsibilities, and programs have vastly increased over the past few decades. The DVA's core values are integrity, commitment, advocacy, respect, and excellence as emphasized using the acronym I CARE which implies professional integrity (DVA, 2013a).

The DVA is comprised of three main divisions: the National Cemetery Administration, Veterans Health Administration (VHA), and the Veterans Benefits Administration (VBA) (DVA, 2013a). However, for purposes of the study, only the VBA will be discussed because it is the most relevant. The VBA is significant because educational benefits are administered by this division separately from other benefits and programs, and it directs and administers the



Vocational Rehabilitation and Employment program (VR&E) for qualified veterans (Federal Benefits for Veterans Handbook, 2014).

The DVA established a rating system to interpret the scope of a veteran's SC disability which affects the extent of monetary and other benefits that will be provided. The higher a veteran's disability rating, the higher the monetary value of the disability benefits and the greater the benefits available to the veteran from the DVA (Federal Benefits for Veterans Handbook, 2014). Any veteran that has disabling impairments can voluntarily apply to the DVA for a disability rating determination, although it is an extremely slow process, and these ratings are not liberally approved and granted. The focus of the study is to examine the transition and reintegration experiences of female student veterans with disabilities as related to their college entry, and not their rehabilitation and employment. The educational benefits for which veterans are qualified and approved by the DVA can help veterans fund their college education.

**Student Veterans of America.** Student Veterans of America (SVA) is an alliance of student veterans' groups with chapters available on some college campuses throughout the nation. With over 950 chapters, numerous partners, and increasing services and programs for veterans, these SVA chapters offer counseling, peer-to-peer networking, support, and other events to help student veterans reintegrate, excel in college, and seek employment after graduating from college (SVA, 2013). The SVA also link alumni with veterans, invest in research, and form partnerships with other organizations to provide advocacy, mentoring, scholarships, and employment opportunities for veterans.

Over one million veterans have returned to college in pursuit of an education using federal educational benefits since SVA was founded in 2008 (SVA, 2013). The nation has shifted their focus to veterans' care and well-being which has sparked transformation on college

campuses and within the government. SVA is devoted to ensuring veterans receive the necessary support during their entry into college and the workplace while reintegrating into society. One of the top chapters of SVA is located on the Cumbersome Community College (pseudonym) campus nearby the Veterans' Center where the study was conducted. This SVA chapter received the Chapter of the Month SVA Award in June 2014 (M. Thewes, personal communication, October 13, 2014).

**Defense Activity for Non-Traditional Education Support.** The Defense Activity for Non-Traditional Education Support (DANTES) provides information, resources, and support to service members and veterans pursuing an education. DANTES offers assistance with completion of certifications, requirements for college degrees, and other educational goals while on active duty and after transitioning from the Armed Forces. Service members can also advance their education and earn college credits based upon their experience and knowledge through non-traditional means of completing examinations for course credit in over 150 subjects (DANTES, 2014). DANTES offers support and guidance through partnerships across academic communities and between DoD and educational institutions to ensure service members receive fair and equal treatment while pursuing their education (DANTES, 2014).

**VetsSuccess.** VetsSuccess is a program that was established to provide support, services, and readjustment counseling on college campuses to aid veterans in successfully completing their educational goals and preparing for the workforce. VetsSuccess programs are located at various institutions of higher education across the nation, but are not yet available on all campuses. Some of the services and benefits that are provided include support, outreach, and aid to ensure that veterans' health, education, and benefit needs are fulfilled as needed (Federal Benefits for Veterans Handbook, 2014).

**Veterans Integration to Academic Leadership.** The main objective of Veterans Integration to Academic Leadership (VITAL) is to assist student veterans with their educational goals while they transition and reintegrate into society. VITAL is a method used by DVA in partnership with the New York Harbor health care system and in-state colleges and universities to help ease and expedite student veterans' transition from the military to college (DVA, 2014). Services offered to student veterans include quick confidential responses to inquiries, work study, free tutoring, assistance with communication, enrollment, and medical care, to include specialized health care and wellness programs, treatment, and counseling to help with readapting, stress, depression, anger, and difficulty sleeping (DVA, 2014).

### **Summary**

Since OEF/OIF wars have ended, an influx of veterans and military service members have transitioned into college to use their Post-9/11 GI BILL educational entitlements. Although it has been productive for colleges and universities, the challenges and responsibilities of post-secondary institutions increased as well. Faculty and all stakeholders in higher education institutions should be aware of the processes and challenges that veterans experience when transitioning from military service to the collegiate environment during reintegration which could take years, depending on the veteran (Baumann, 2013). Institutions should also understand the potential challenges involved with providing services and support to student veterans who have disabilities that may affect their academic success.

While PTSD, TBI, MST, depression, and other physical and mental disorders were not the primary focus of the study, it was necessary to address these issues because some of the research and interview questions address emotional and social needs of participants. The ability to cope and persevere in college can be affected by these disorders and trauma. These disorders

and issues were discussed to provide clarity for readers with no military knowledge and to help them better understand the context of the disorders, challenges faced by female student veterans with disabilities, and their transition and reintegration experiences. Transitioning from the military and reintegrating into the normalcy of family, work, and college can be difficult because veterans may juggle family obligations, health issues, and other problems, and make various decisions while tackling different responsibilities. Female student veterans with disabilities deserve the right to expose their experiences, perceptions, and challenges they faced during reintegration.

Discovering female student veterans' perceptions of available services could reveal which programs, services, and support are meeting their needs and could also lower retention problems (Rumann & Hamrick, 2010). Informing college faculty and other stakeholders of the needed improvements to current services and programs can help them to better attract, serve, and retain female student veterans with disabilities. It was stated that much was learned from war on how to successfully conduct it, how the human body works, and how to help it to recuperate and function well, thus, this could be applied to academia (Russell, 2013).

Gaps in literature exist on female veterans and the experiences and expectations of female student veterans upon entering college (Ackerman et al., 2009). Research on the experiences, successes, and setbacks of veterans in college was limited, and studies addressing the experiences of female veterans and female student veterans with disabilities entering college during reintegration were limited and dated (Jones, 2013; Rumann & Hamrick, 2010; Street et al., 2009). The experiences and stories of these female student veterans can be the voices to help close the gap and add to the limited literature on female student veterans. This study sought to create a greater awareness of the unique challenges faced by female veterans with disabilities and

to seek ways that colleges can enhance or establish collaborations to address their challenges and the gaps in accessible programs and services. Moreover, this study sought to add current knowledge to the limited, dated literature on female veterans and female student veterans with disabilities and to bridge gaps in literature on the college entry experiences of these female veterans. The real-life transition and reintegration experiences of female student veterans with disabilities as related to their college entry were investigated in this phenomenological study. Chapter Three will address the research methodology and data analyses of the study.

## **CHAPTER THREE: METHODS**

### **Overview**

The purpose of this qualitative transcendental phenomenological study was to explore and describe the lived experiences of female student veterans with disabilities entering higher education during reintegration in order to improve programs, services, and support available to female student veterans with disabilities. The procedures that occurred during the research process are discussed. Data collection was thoroughly conducted in an effort to better understand and describe the real-life transition and reintegration experiences of female student veterans with disabilities as related to their college entry. A chapter overview, description of the design, research questions, study site, participants, procedures, researcher's role, data collection and analysis, trustworthiness, ethical considerations, and a chapter summary were presented. Collected data were interpreted, analyzed, and coded into descriptive themes and of meaningful statements to reveal the essence of the experiences of female student veterans with disabilities entering higher education during reintegration into society.

### **Design**

The transcendental phenomenological descriptive research design was used in this qualitative study. Moustakas (1994) emphasized that imagination, perception, and common structures play a major role in attaining an awareness of intricate experiences and provide an understanding of how specific feelings, perceptions, and awareness are aroused in consciousness. Perception is viewed as "the primary sources of knowledge, the course that cannot be doubted" (Moustakas, 1994, p. 52). The participants' perceptions of their transition and reintegration experiences as related to their entry into higher education were examined as primary sources of knowledge for the study. While using a quantitative design was feasible, a qualitative research

design enabled me to focus on the “wholeness of the experience rather than solely on objects or parts; search for meanings and essences of experiences, rather than measurements and explanations; and obtain descriptions of experiences through first-person accounts in conversations and interviews” (p. 21). Bloomberg and Volpe (2008) indicated that phenomenological research allows the researcher to “investigate the meaning of the lived experiences of people to identify the core essence of human experience or phenomena as described by research participants” (p. 32).

Transcendental phenomenology entailed investigating with a fresh, pure perspective, and dismissing all bias, predispositions, and assumptions to focus more on the participants’ experiences. However, I had to employ *epoche*, a process in which preconceived experiences, ideas, and biased perceptions were set aside as much as realistically possible so participants’ experiences and perceptions could be examined with a vibrant, pure perspective (Moustakas, 1994). I bracketed (*epoche*) past experiences, presumptions, preconceived notions, and biases in the study as much as possible.

Husserl, Dummett, Findlay, and Moran (2001) believed that there was a distinction between facts and essences and was concerned with learning the meanings and essences of knowledge. Thus, I was faced with the challenge of being aware of and understanding the meanings and essences of the experiences and perceptions that participants revealed based upon my own awareness and self-reflection. I developed a relationship with the participants and the meanings and essences of their knowledge were identified after data were collected, read, interpreted, and analyzed. As the researcher, I rigorously explored and gathered descriptions of participants’ transition and reintegration experiences as related to their college entry through the lens of their minds and voices, and described holistic accounts of their experiences. Because of

the subjective nature of the study, qualitative descriptive data were more suitable rather than using statistics to quantify and measure data, and it would have been more difficult to investigate the small sample size of the study in controlled environments using a quantitative approach.

Schutz's (1962) work originated around his theory of relevance which was of major importance for the social sciences, and basically pertained to the collection of facts from the lived experience in its entirety. He posited that there are no such things as facts; but, there is such a thing as interpreted facts, and the process of collecting facts in its entirety denotes how individuals perceive, identify, understand, and act (Schutz, 1962). Schutz (1962) emphasized that "in essence all analyses carried out in phenomenological reduction must retain their validation within the natural sphere" (p. 139). However, as Natanson (1998) stated, the justification of this phenomenological principle "must proceed by way of epoch and, ultimately, transcendental phenomenological reduction" (p. 6). Hence, I bracketed (*epoche*) my presuppositions, past experiences, and biases, and the participants' experiences and perceptions were explored with a pure perspective (Moustakas, 1994).

### **Research Questions**

The central question of the study was: What are the transitioning experiences of female student veterans with disabilities entering college during reintegration? The four sub-questions are:

1. What factors influenced the decisions of female student veterans with disabilities to enter or reenter college?
2. How do emotional and social needs of female student veterans with disabilities drive their perseverance to remain in college?



3. What coping strategies do female student veterans with disabilities employ in college as related to transitional and reintegration experiences?
4. How do female student veterans with disabilities identify the available college resources, support systems, and services as meeting their individual needs?

### **Site**

The site of the study was the Veterans' Center (pseudonym), a newly remodeled facility located at Cumbersome Community College (pseudonym) in Southeastern North Carolina within close proximity of a large military installation. Approximately 60,000 active duty Army and Air Force service members, Army National Guard and Army Reserve personnel, and countless retirees and veterans reside within this general area. This site was purposefully selected because it is military-friendly and had a high number of veterans enrolled. This community college accepts students with physical, psychological, and learning disabilities, and had very strong recruitment potential of female student veterans with disabilities. The college caters to a large population of veterans from surrounding counties which speaks volumes of student veterans that transitioned from military service and possibly enrolled at this community college.

Cumbersome Community College is the one of the largest community colleges in North Carolina with one of the largest continuing education departments in the state, and has provided education to the military for over 50 years (North Carolina Community College System, 2014; StateUniversity.com, 2014). It serves a diverse population of over 40,000 students annually at several sites, to include a large military installation, has over 11,500 students enrolled on campus, and offers access to students with disabilities (North Carolina Community College System, 2014; StateUniversity.com, 2014; SVA, 2014a). The SVA chapter at Cumbersome Community College was 1 of only 11 chapters to be awarded a \$10,000 grant through

partnerships with the Veterans' Center Initiative and Home Depot (SVA, 2014a). Through the Veterans' Center Initiative, nearly 100 chapters applied for this grant to build veteran resource centers on campuses across the nation.

As of 2014, approximately 2,538 student veterans attended this college and 667 student veterans were enrolled at this site. Of those veterans, 466 were serving on active duty in the Army; 8 were serving in the Navy; 2 were in the Air Force; 4 were on the Panthers team; 167 were assigned to the Special Warfare Center and Schools located on the military installation; 12 were serving in the National Guard; and 8 were serving in the Reserve Forces (M. Thewes, personal communication, August 29, 2014).

Rationale for selecting Cumbersome Community College as the study site was that it provided good services to a high number of veterans. The Veterans' Center was conveniently situated on campus, provided useful resources and services to veterans, and was easily accessible by student veterans. The center offered substantial support for veterans, including assistance with college enrollment applications, Post-9/11 GI BILL application and inquiries, financial aid, applications to join service organizations, and other administrative needs. Veterans were allowed all-day access for networking or other needs, camaraderie, several big screen televisions, computer access with free Wi-Fi, free coffee and refreshments in their large lounge, and other resources and services. The DAV representative visited frequently and assisted veterans with their application for disability compensation and supported student veterans with disabilities, especially through its VR&E program which enabled the selection of my targeted sample size.

I visited Cumbersome Community College several times and presented an overview of the study, selection criteria, significance, and purpose of the study to the director of the Veterans' Center located on campus. I talked with the director of the Veterans' Center and was informed

that I could conduct the study in the conference room and other reserved areas of the Veterans' Center. He was very supportive and quite interested in my study as well as the potential benefits to student veterans enrolled at the Cumbersome Community College. A high volume of student veterans were enrolled, although considerably less female student veterans were enrolled. The director had access to a list of female student veterans that met criteria of my study. Approval was granted to conduct the study on campus at the Veterans' Center.

### **Participants**

The participants consisted of 11 female student veterans with disabilities, most of whom attended the Cumbersome Community College. Pseudonyms were used for participants, institutional and personal names, unless otherwise stated (Creswell, 2013; Glesne & Peshkin, 1992). To protect their confidentiality, participants did not reserve the right to use their own names in the study. Participants were purposefully selected using criterion, snowball, and maximum variation sampling (Creswell, 2013). I encouraged as many participants as possible to participate in the study to have a larger sample size and to compensate for any participants who might have opted to drop out of the study. Since this was an exploratory and descriptive study, maximum variation sampling was used to ensure diversity with respect to race, ethnicity, age, and type of disability (Patton, 2002). This study consisted of a homogeneous group of female student veterans with disabilities who were not serving on active military duty. Definitions of the sampling strategies and how they were applied in the selection of participants were presented separately. No compensation was provided to participants for their participation in the study.

### **Criterion Sampling**

Criterion sampling is selecting a sample that meets some level of predetermined and essential criteria of the study (Creswell, 2013; Patton, 2002). Criteria for the study consisted of

only female student veterans with disabilities who completed at least one semester of college, or recently graduated within six months of the study, or no longer enrolled, but were enrolled within six months prior to the study. Other criteria included race, ethnicity, and age diversity, served in the U.S. Army and/or Army Reserve, a minimum of 20% disability rating approved by the DVA, and no required age restriction as all participants were above the age of 18. No active duty military service members were used in the study. No combat service was required because some of the female veterans might have incurred their disability while serving in non-combat duties. Completion of at least one semester of college was required because participants might have been more likely to recall college entry experiences and better able to reflect on the challenges they had already overcome since initial entry into college. Female student veterans with disabilities who had graduated or previously attended college within six months of the study were eligible to participate if they met other criteria of the study as they could provide rich, thick data. If longer time spans since graduation or college enrollment were permitted as criteria, participants could possibly have forgotten their college experiences and perceptions and collected data could be skewed and unreliable.

Participants possessed a minimum of 20% SC disability rating granted by the DVA which is responsible for administering educational benefits (Federal Benefits for Veterans Handbook, 2014). The DVA assigns a disability rating as a percentage from 0% up to 100% rating for eligible veterans who have disabilities. A minimum of 20% SC disability rating was required for the study as some potential participants were recruited that participated in the Vocational Rehabilitation and Employment (VR&E) program at the study site. The mission of the VR&E was to assist student veterans having a minimum SC disability rating of 20% to prepare, obtain, and retain appropriate employment. Educational and vocational counseling

services were provided to student veterans with disabilities in the VR&E program who were eligible for DVA's educational benefits (SVA, 2012).

Participants with a 20% rating were more fitting for the study because they were more likely to have completed a longer enlistment period of military service, and as a result, they could generate rich, thick data. Volumes of active duty service members exiting the military may receive a disability rating of 10% for service-connected injuries, illnesses, or trauma. Some of these veterans may not have completed a full regular enlistment period of three or more years, completed no deployments, and/or had no combat exposure. Using a minimum disability rating of 10% could possibly present a larger pool of female student veterans with disabilities. However, a disability rating of 20% would include more veterans that possibly served for a longer time span and may have greater information-rich experiences to share which could generate rich, thick data. Participants were interviewed until thematic saturation was accomplished. Gall, Gall, and Borg (2010) indicated that thematic saturation is reaching the point of which no additional data or themes are observed during data collection and data analysis. Thematic saturation occurred during analysis of journal entries and primary themes and commonalities were identified within the first six interviews.

### **Snowball Sampling**

Snowball or chain sampling is a strategy to identify “information-rich key informants” (Creswell, 2013, p. 158; Patton, 2002, p. 237). Female student veterans with disabilities were asked for referrals who met the criteria of the study to help gather more information-rich participants, especially since there was less availability of female student veterans with disabilities than males. Some referrals were provided to me who met the sampling criteria. One participant had graduated within the previous month of the study and met all of the criteria.

Snowball sampling was used to secure as many qualified participants as possible. This sampling strategy was applied to help broaden the sample size in order to allow for any participants that might have opted to voluntarily drop out of the study.

### **Maximum Variation Sampling**

Maximum variation sampling is a strategy in which criteria that will distinguish the participants based on specific qualities will be determined in advance (Creswell, 2013).

Maximum variation sampling was used based on race, ethnicity, and disability rating.

Participant selection continued until theoretical saturation occurred. As indicated by Strauss and Corbin (1990), theoretical saturation is obtained when no new relevant data are identified and the newly collected data become duplicated.

Dukes (1984) stressed that “the sample size need not be large, and there is always the danger of either seeing what we want to see - rather than what is there to be seen - or falling prey to the contingent facts” (p. 200). Dukes suggested to “expand the sample to include three, five, or perhaps even 10 subjects,” though it would be more practical to use a sample size of at least 10 or more participants (p. 200). In phenomenological research, a small sample is studied through prolonged engagement to establish patterns and relations of meanings (Moustakas, 1994). I contacted experts within the field of education at Liberty University on the appropriateness of the sample size using only one site for the study. I made appropriate revisions based upon their feedback received and it was determined by experts in the field of education at Liberty University that using one study site and a sample size of 8 to 12 was sufficient for the study. However, I purposefully recruited more participants to compensate for any participants that might have opted to drop out of the study so I could still meet my target sample size.

## **Procedures**

I sought support from experts in the field of education to review individual and focus group interview questions for clarity, appropriateness, and composition (Lincoln & Guba, 1985). Two experts holding doctoral degrees in the field of education at Liberty University reviewed individual and focus group interview questions to help ensure face and content validity prior to IRB approval to conduct the study. One expert in the field of education recommended a shorter interview session and decreasing the number of interview questions to maintain their attention and to collect reliable, rich, thick data as the disabling ailments and attentiveness of participants was unknown. Another expert in the field of education recommended that longer interviews be conducted as it may result in deeper and more reliable data. The interview questions were modified by decreasing some of the questions and modifying the wording of others as advised by expert reviews. The length of individual interviews was revised to not exceed 40 minutes as approved by my chairperson. All recommendations from expert reviews were incorporated into the list of individual and focus group interview questions prior to IRB approval.

Approval was granted by Liberty University IRB to conduct the study. A copy of the IRB approval letter is included in Appendix B. Approval was granted to conduct the study by the appropriate approval authority located on Cumbersome Community College. I contacted the Director of the Veterans' Center at the college and began recruitment procedures upon receipt of IRB and study site approval. The approval letter was not included in the appendices to protect confidentiality of the site.

### **The Pilot Study**

A pilot study was conducted prior to the actual study upon receipt of IRB approval to begin data collection as recommended by Creswell (2013). A pilot study can help to “refine and

develop the interview questions and further adapt the research procedures” (p. 165). Participants for the pilot study were recruited through snowball sampling. Participants who completed consent forms to participate in the pilot study were contacted and interviews were scheduled. The pilot study was conducted using a sample size of three female student veterans with disabilities from different colleges than the study site to prevent the risk of not securing an adequate number of qualified participants for the actual study. Participants closely met criteria of the actual study. The individual interviews of the pilot study lasted approximately 30 to 40 minutes and the focus group session lasted approximately 45 minutes. Interviews were audio recorded and transcribed verbatim by the researcher progressively as data were collected.

A pilot study was conducted to rehearse the study and reveal whether the individual interview and focus group questions would generate desired rich, thick data which could also increase the credibility of the study. Completing the pilot study increased the probability of a more successful study. This study allowed me to rehearse procedures precisely before conducting the actual study, identify potential glitches that needed to be addressed, to check and become more familiar with my audio recording devices, and other procedures. During the first two focus group interviews, participants seemed nervous and confused and did not divulge much data naturally. However, using the words “why and why not” as prompts generated better responses and more interaction among the focus group. I did not modify the wording of the individual or focus group interview questions. I annotated in my notes the few prompts used during the focus group interview of the pilot study consisting of “why and why not” for two of the interview questions to help guide future interviews of the actual study. The pilot study did not reveal the need to modify any of the interview questions.



## **The Actual Study**

Female student veterans were emailed a recruitment letter inviting them to participate in the study by staff at the Veterans' Center to maintain confidentiality of the student veterans. The recruitment letter used to invite female student veterans to participate in the study is included in Appendix C. A screening questionnaire was emailed and also distributed in person to potential participants. A copy of the screening questionnaire is included in Appendix D. All participants signed an informed consent form prior to completing the screening questionnaire and prior to conducting individual interviews. A copy of the informed consent is exhibited in Appendix E.

Data were collected for the actual study using a screening questionnaire, semi-structured individual interviews, and a focus group at the Veterans' Center in a conference room with privacy as recommended by Creswell (2013) and a journal. Data were collected sequentially over several weeks, as needed, to allow ample time to gather rich, thick data from participants about their experiences and perceptions. Individual interviews and journaling by participants were completed independently and privately. Each participant was interviewed individually and each session was audio recorded using a laptop and a cell phone voice recorder as a backup recording device. A focus group session consisting of four participants was conducted after all individual interviews were completed. The focus group session was conducted to delve deeper, collect additional rich, thick data from participants, and clarify any commonalities discovered during individual interviews. The last phase of the study was participant journaling which was distributed to participants shortly after the focus group session ended. The participants were given one month to record entries consisting of nine categories.

As the researcher, I read, transcribed verbatim, and interpreted all data as suggested by Moustakas (1994). Participants reviewed transcriptions of their statements recorded during the

interviews for integrity and accuracy after completion of the transcriptions. All data collected from all three sets of data complied with ethical considerations as noted in Chapter Three. Participants found questions to be clear and responded to all questions asked. The responses were appropriate based upon the individual and focus group interview questions. All interview questions were clear and understandable to the persistence of the study. Responses given were appropriate and consistent with the intended design of the interview and focus group questions.

### **The Researcher's Role**

As the researcher, I was the “human instrument” in the study as described by Lincoln and Guba (1985). My past military and college experiences helped to provide me the insight needed to be the human instrument to explore and learn about participants’ experiences so that deep, rich, and thick data would be generated. I personally collected all data and conducted analyses of the data. I used reflexivity and triangulation to support the trustworthiness of findings in data collection and interpretation of the data, and to help prevent researcher bias. Reflexivity is making the study a focus of inquiry; being conscious of how procedures and results of the study affect me, thus, I bracketed myself within the study by revealing my experiences, biases, and presumptions, although it was impossible to remain entirely outside of the study (Creswell, 2013; Patton, 2002). I am very passionate about the well-being and provisions of student veterans with disabilities as I am a 100% disabled student veteran and I experienced many challenges while transitioning from the military to college and during reintegration into society.

As a participant and observer in the study, it enabled me to conduct a rigorous investigation in order to gather deep, rich, thick data about the participants’ transitioning and reintegration experiences as related to their college entry, coping strategies used, and perceptions of the accessibility of college resources, programs, and support services. Female student

veterans with disabilities have special needs and can require more assistance than other students, depending on the nature of their disabilities. I am an agent of change with the call to assist, share, and care about all people. I am aware of the need to be honest about my role and relationship with the participants as this could have affected my data collection, validity, and trustworthiness of findings. I actively listened to participants, stayed focused on the purpose of my study, and maintained my bearing while allowing participants to naturally tell their stories so that deep, rich, and thick data could materialize naturally. I brought personal bias and assumptions to the study which included a general knowledge of the military, previous transition, reintegration, and my own college entry and reentry experiences while reintegrating into society. According to Patton (2002), the researcher should “report any personal and professional information that may have affected data collection, analysis, and interpretation—either negatively or positively—in the minds of the users of the findings” (p. 566). I revealed personal apprehensions, assumptions, and military experiences to the participants and readers of my study. I bracketed (*epoche*) personal biases, apprehensions, and opinions from the study as much as was humanly possible (Creswell, 2013). I applied biblical principles during data collection, data analysis, and throughout the study.

### **Data Collection**

Multiple methods were used to collect data. The methods of data collection were a screening questionnaire, individual interviews, a focus group, and participant journaling. These methods were used to collect data about participants’ experiences and perspectives in response to the research questions of the study. Multiple sources of data collection allowed triangulation that helped to increase the credibility of findings (Moustakas, 1994). Triangulation is defined as the

combining of multiple and different sources, methods, and theories to provide corroborating evidence of findings (Patton, 2002; Schwandt, 2007).

### **Screening Questionnaire**

A screening questionnaire was used to screen and determine whether potential participants met eligibility criteria to participate in the study. The screening questionnaire was not intended to be used as a data collection tool. Data contained in the questionnaire were not used for data analysis or any other purposes except for initial eligibility screening to ensure only qualified female student veterans were selected for the study. The screening questionnaire included basic information and personal demographics about participants' military and college background.

The screening procedures consisted of emailing the recruitment letter and screening questionnaire to female student veterans inviting them to participate in the study. To maintain confidentiality of the student veterans, the staff at the Veterans' Center emailed female student veterans inviting them to participate as I was not provided access to email addresses or phone numbers. Participants were instructed to read and complete the informed consent form prior to completing the screening questionnaire as the questionnaire contained personal data. A link to access and submit the screening questionnaire and the informed consent forms online was also provided. Hard copies of the recruitment letter were also distributed throughout the Veterans' Center and veterans' organizations located on the campus. Pseudonyms were used for all participants, personal and institutional names, unless otherwise specified as recommended by Creswell (2013) and Glesne and Peshkin (1992). All participants exceeded the age of 18. Informed consent was obtained from participants prior to conducting the study.

## Interviews

Individual interviews were the primary method and first phase of data collection as it allowed data to be gathered in private sessions directly from the participants. The individual interviews consisted of semi-structured, open-ended questions. Kvale (1983) defined the research interview as “an interview whose purpose is to gather descriptions of the life world of the interviewee with respect to interpreting the meaning of the described phenomena” (p. 4). Each participant was asked the same interview questions, in the same order, and using the same probes. According to Patton (2002), if the researcher uses standard open-ended questions that are “focused and carefully worded in advance,” it will help to ensure that participants are “asked the same questions- the same stimuli- in the same way and the same order, including standard probes, and establishes priorities for the interview” (p. 344). Standard open-ended interview questions were used to help expedite data analysis by making it easier to locate and compare participants’ responses, organize similar questions and comparable responses, and allowed more efficient use of participants’ time as recommended by Patton (2002).

The individual interview questions sought to answer these four research questions:

1. What factors influenced the decisions of female student veterans with disabilities to enter or reenter college?
2. How do emotional and social needs of female student veterans with disabilities drive their perseverance to remain in college?
3. What coping strategies do female student veterans with disabilities employ in college as related to transitional and reintegration experiences?
4. How do female student veterans’ with disabilities identify the available college resources, support systems, and services as meeting their individual needs?

Seven of the individual interviews were conducted at the Veterans' Center of the Cumberline Community College. Two were conducted by phone and two were conducted at the participants' homes. The Veterans' Center had total privacy, locked doors, and was free from noise and interruptions. The average length of the interview sessions was approximately 30 to 40 minutes. The participants revealed information about their military and transition experiences, the administration of the Post-9/11 GI BILL, and veteran services that are available at their colleges. The participants eagerly and willingly responded to the questions. The participants found questions to be clear and understandable and responded to all questions. The responses given were appropriate and consistent with the intended design of the interview questions. Participants also explained their experiences of interacting with staff, faculty, and students. I inquired about the female student veterans' perspectives of their institution's services and support systems and whether they were appropriate to meet their needs. I applied integrity and biblical principles, and endeavored to remain neutral and considerate of participants' sensitivity and reluctance to reveal certain data.

Following is a list of the individual interview questions. These individual interview questions are also included in Appendix F.

#### Standardized Open-Ended Individual Interview Questions

##### *Military Background, Reintegration Experiences, and Perceptions of College Environment*

1. If you could have anything you desired, what would it be and why?
2. How does it feel being out of the military and on a college campus pursuing your degree?
3. How long did you serve in the military and in what branch of service?
4. What is your ethnicity and age?

5. Have you ever been exposed to combat?
6. Will you please describe your transitioning experiences after your left the military?
7. What was it like being a female in the military?
8. How do you identify with fellow students and other student veterans with disabilities?
9. What factors influenced your decision to enter or reenter college?
10. How did your emotional and social needs influence your perseverance to remain in college?
11. What factors have helped you to reintegrate back into society and life roles since being enrolled in college?
12. Do you feel that you have fully reintegrated into the normalcy of civilian life? Why or why not? Will you please explain in detail?
13. What is your perception of your college environment and overall collegiate experience?

*Challenges Faced, Coping Strategies, Accessible College Programs and Needed Improvements*

14. What challenges or problems have you faced while pursuing your education? How did you manage and resolve them?
15. What strategies did you engage in to help cope and persevere while juggling health issues, family obligations, coursework, and other tasks while reintegration into society?
16. What is your perception of the resources, services, and support offered to student veterans at your college? Do you feel these resources, services, and support are easily accessible and appropriate to meet your needs?

17. What classes, programs, services, and support systems do you feel need to be added or enhanced to meet the needs of female veterans with disabilities?
18. What do you think can be done to help faculty and administrators of your college to better understand and support the academic achievement of female student veterans with disabilities?

*Invitation to Participate in Other Phases of Study and Soliciting Additional Comments*

19. Would you like to participate in a focus group at a later date?
20. Do you have any questions, advice, or anything else that you would like to offer to other female student veterans concerning your college and reintegration experiences, or any other concerns?

The purpose of the individual interview questions was to collect data that described participants' lived experiences of transitioning from the military to the collegiate environment during reintegration into society. Questions 1 through 13 were designed to explore the military background, reintegration experiences, and participants' perceptions of their college environment. The intent was to delve deeply into participants' lived experiences and gather rich, thick data to help fill gaps in literature on female student veterans with disabilities. Researchers delve deeply into participants' experiences and stories of the phenomenon in a descriptive qualitative study as suggested by Strauss and Corbin (1990). Stories that speak about the transition and reintegration experiences of female veterans or female veterans with disabilities have been significantly invisible or do not exist as gaps in literature exist on female veterans. Approximately one in five veterans will be a female by year 2040, according to the Department of Veterans Affairs (2013b). An influx of veterans is enrolled in colleges using the Post-9/11 GI BILL to fund their education. Thus, colleges and universities need to be aware of student



veterans' diverse needs, potential challenges, PTSD, TBI, trauma, and other disorders that veterans incur while serving in the military. Most past studies concerning veterans' reintegration were conducted using a majority of male veterans although a little research investigated the reintegration of female service members or female veterans (Yan et al., 2012). Thus, exploring the transition, reintegration, and college entry experiences of female student veterans with disabilities can greatly serve to help fill gaps in current literature on female veterans.

Questions 14 through 18 addressed the challenges faced and coping strategies as related to participants' college entry to discover their perceptions of available veterans' services and programs at their colleges and their perceptions of needed improvements to help improve their academic success. Improving or adding more programs, services, and support could cause female veterans to have a smoother, quicker reintegration into the civilian sector. With the growing numbers of student veterans entering college, post-secondary institutions may not understand the difficulties and unexpected challenges that student veterans with disabilities may face while transitioning and reintegrating into society (Ostovary & Dapprich, 2011; Rumann & Hamrick, 2010). Past research has shown that veterans may experience unique social, physical, psychological, and medical challenges prior to entering college (Sander, 2012). Student veterans may need medical, social and mental health services, special transportation, and other services which can make these female veterans vulnerable if needed support and services are lacking.

Female student veterans may face different challenges more regularly than male veterans which has great implications for higher education institutions as they endeavor to support female veterans by providing appropriate services for them (Sander, 2012). Jones (2013) indicated that colleges and universities need a good understanding of the special needs of female veterans with disabilities in order to appropriately support them. After serving in combat, the stress and

anxiety experienced after combat exposure, past military experiences, and current academic responsibilities present great challenges for student veterans (Zinger & Cohen, 2010). Student veterans may possibly face many unique challenges, problems, stress, hardships, health issues, and other concerns and the lack of good, strong institutional support and services can make their worries greater (Baumann, 2013). To help prevent these aforementioned challenges, problematic stressors, overwhelming frustrations, and other concerns, conducting this study to deeply explore participants' experiences is crucial. Findings can serve to inform educational stakeholders of challenges and other issues that surface, and provide a better understanding of support and services needed, such as creating a veteran friendly campus, interacting with student veterans, and providing veterans overall support.

Questions 19 and 20 were designed to seek participants' continued participation in the last two phases of the study. Also, these questions sought to compel participants to reveal any additional data that they might have wanted to share with other female veterans. The study could inform fellow veteran and nonveteran classmates, family members, and friends of student veterans with hopes that they would reach out and help a veteran to have a smoother transition, increase their perseverance, and enhance their academic success.

A laptop voice recorder was utilized to record interviews and was later transcribed verbatim to ensure participants' responses were accurate, to maintain the integrity of their responses, and to increase the credibility of findings. The voice recorder enabled me to easily record all interviews and to conveniently store multiple recorded sessions on a hard disk drive for secure safeguarding. As a precaution, I ensured that the voice recorders on both the laptop and cell phone were functioning properly and kept needed items on hand in the event of equipment failure and settings that could have threatened the data collection process.

After the recorded interviews were transcribed verbatim, participants were contacted and asked to review transcriptions for accuracy. The participants reviewed their respective transcripts to ensure integrity and accuracy of the data. After completing transcript reviews, I emailed participants and expressed my gratitude for their participation in this phase of the study. An excerpt of an individual interview transcript is included in Appendix G.

### **Focus Group**

The second phase of this study was a focus group session. A focus group is a method of collecting ideas and thoughts from a small pre-determined group of individuals during group discussions on specific issues that may be utilized alone, but require thoughtful preparation, planning, maintaining control of discussions, and in-depth data analysis (Krueger & Casey, 2009, Patton, 2002; Schwandt, 2007). The structure, purpose, and data collection procedures of focus groups are different from other methods of qualitative research. The purpose of the focus group was to encourage participants to reveal their feelings and expound on the focus group questions, clarify any responses, and disclose any thoughts they did not reveal during individual interviews.

A focus group session consisting of four participants was conducted to focus on specific areas, collect additional data, and to clarify any commonalities discovered during individual interviews. According to Morgan (1997), using a small focus group may work better “when participants are likely to be interested in the topic, respect each other, and are more useful when the researcher desires a clear sense of each participant’s reaction” (p. 15). Patton (2002) indicated that a sample size of 6 to 10 individuals usually participate in a focus group, and no more than 10 major questions should be asked using 5 to 8 participants with one hour allotted to complete the session. I reserved the right to adjust the number of participants if they opted to quit the study, although they signed consent forms in advance of the study. Participants were

invited individually to participate in the focus group at the conclusion of each individual interview. I also emailed, sent text messages, and telephoned participants to remind them of the focus group session.

Nine guided open-ended interview questions were asked during the focus group after completion of all individual interviews. Very limited prompts were used to incite more conversation and interaction among participants in the focus group as suggested by Patton (2002). Participants were briefed and advised in advance to respect each other's confidentiality and to use their fictitious names throughout the study. Confidentiality of participants during focus group discussions was limited as I was not sure that participants would respect and protect each other's confidentiality during the focus group session. Participants consisted of mixed races and ethnicity. I sought to answer research questions one, three, and four only using focus group discussions. I felt that research sub-question two was inappropriate to discuss in a group environment. Asking these female veterans with different disabilities about their emotional and social needs and perseverance to remain in college in open forum might have opened old wounds and triggered such negativity that could prevent rich data collection. Thus, research sub-question two was only addressed during individual interviews and the journal entries.

I maintained control of the group discussions in order to successfully gather more rich, thick data, as this was the only method in which participants' unintentional responses could be utilized to delve deeper into participants' lived experiences (Greenbaum, 1999). I encouraged the participants to share their views and experiences and for this to spark others to do the same as participants became more attentive and engaged in discussions. I wanted them to challenge each other, yet maintain control so new, richer data would surface. At times, additional data were

generated as participants heard responses from each other, depending on the question. However, sometimes an idea was brought up and other participants just latched on and responded to it.

The session was audio recorded using the voice recorder on my laptop and cell phone for verbatim transcription and to ensure accuracy of transcriptions (Creswell, 2013). No videotaping was conducted during the focus group. Videotaping the session could have allowed more precise interaction and communication of the focus group to include facial expressions and conversation but participants could have received it to be intrusive and could have affected their spontaneity and reactions (Hennink, 2007). The focus group questions are included in Appendix H and are listed below.

#### Standardized Open-Ended Interview Questions

##### *Commonalities and Perceptions of Other Students and Affect on Participants' Perseverance*

1. Why did you decide to go to college?
2. What do you feel that you have in common with other student veterans with disabilities concerning transition and reintegration experiences as related to your college entry experiences?
3. How do you perceive the nonveteran and nondisabled population reacts to and respects you in comparison to other student veterans with disabilities?
4. What is your perception of your overall college entry experience, and in what ways has it changed your outlook and standards of living since transitioning from the military?
5. What do you perceive as not being adequately fulfilled in your life academically, personally, or socially?
6. What tactics have you implemented to self-manage stress, adapt to change, and to persevere through the challenges of college, life roles, responsibilities, and reintegration?

*How College Programs and Services Met Participants' Needs and Needed Improvements*

7. How do you perceive your college programs, services, and support systems as meeting your needs, and what improvements or changes, if any, do you feel is needed to help female veterans with disabilities excel academically and successfully reintegrate into society?
8. What do you feel that faculty, administrators, and other leaders within your collegiate environment can do to enhance the overall quality of the academic, personal, and social life of female veterans with disabilities?
9. Are there any further comments that you would like to add at this time?

The purpose of these questions was to encourage participants to reveal their feelings and provide more in-depth responses to the focus group questions. Questions 1 through 6 were designed to address commonalities and perceptions of fellow students, the effects on participants' perseverance and academic success, and how they managed stress, adapted, and persevered while still reintegrating into society. The origin of the challenges faced by female student veterans must be appreciated in order to fully understand veterans' setbacks and problems and to build trust although many of their challenges may surpass the scope of institutional leaders and other stakeholders (Kurzynski, 2014).

Student veterans may hide their medical ailments and symptoms that can go undiagnosed or untreated and may not seek medical care. Veterans fight an internal war within themselves and may struggle with numerous effects of war, such as anger, guilt, pride, embarrassment, and betrayal (Sherman, 2010). Social support or the lack thereof can impact the transition and college experiences of female student veterans with disabilities and past military experiences can cause them to perceive their social environment differently. Perceived social support can affect

veterans' readjustment to civilian life and involved supporting and permitting student veterans to reveal their stories so that they can receive some degree of recognition, reparation, resolution, and restoration (Ingala et al., 2013). However, strong social support can influence how female student veterans handle their frustrations, fears, and vulnerabilities and the impact on their lives (Ingala et al., 2013). Social support should be offered by colleges to enhance student veterans' adjustment to college life and to help increase their academic success (Baker & Robnett, 2012).

Ross-Gordon (2011) asserted that college students have responsibilities that should compel them to seek accessible services and support, convenience, and flexible times and locations to complete their courses. However, these female student veterans with disabilities have special needs that must be acknowledged by institutions. Faculty and stakeholders in higher education institutions that understand the issues that female student veterans with disabilities are currently facing on their college campuses can provide greatly needed assistance during their transition (Rumann & Hamrick, 2009). Because past studies of female student veterans with disabilities are limited and such a gap in literature exists on transition and reintegration experiences of these female student veterans, it is crucial that participants' lived experiences, perceptions, challenges faced, and other issues be explored and revealed. As a result, higher learning institutions can be informed of these findings and take action to establish adequate programs and services to adequately cater to their special needs.

Questions 7 through 9 were developed to delve deeper into how college programs and services met participants' needs, to gather more data on what improvements were needed to help participants cope, and what faculty could do to boost their academic success. Goodman and Bowman (2014) indicated that the more students engage in various courses and experiences with other students, the more advantageous it is for them to become more accountable, have more

positive attitudes toward learning, mental well-being, and critical thinking. Participants' perceptions of accessible programs and services could inform institutional stakeholders of female student veterans' special needs, how effective their programs and services are in serving their needs, and any needed improvements which could lead to increased academic success and a smoother, quicker reintegration (Persky, 2010).

I reserved the right to slightly modify the prompts based on data obtained from the pilot study and individual interviews. However, the wording of the interview questions was not changed and the prompts that I used did not grossly deviate from original interview questions. I used prompts to compel participants to reveal more in-depth, meaningful descriptions of their experiences by repeating the same question and sometimes added prompts of "why and why not" whenever they were silent or seemed confused. I would leave the floor wide open for more detailed responses and sometimes no new data were identified or there was total silence.

The focus group provided an important opportunity to learn more and better understand the military transition and reintegration experiences of the participants as related to their college entry and their perceptions of the programs, services, and support available at their colleges. I obtained a deeper understanding of participants' experiences and more detailed, meaningful data in one focus group session than several individual interviews (Hennink, 2007; Krueger & Casey, 2009). The strengths of the focus group allowed participants to observe research efforts, interact with each other, share feelings and perspectives that may not have otherwise been identified, and effectively generated data as the researcher tactfully addressed the group (Gall et al., 2010; Greenbaum, 1999). Data analysis may sometimes be based on the presumption that if focus group discussions are organized and conducted appropriately, participants will interact and



provide input, thus, the results will be very comparable to results of asking participants individually (Vicsek, 2010).

According to Hennink (2007), if recurring feedback is given, it could be difficult to verify which participants responded and also whether it reflected the perspectives, ideas, and opinions of the entire focus group. I remained focused, observed the consistency of participants' opinions and responses while each question was discussed, and kept reflective notes. The collected data were transcribed verbatim, read, interpreted, coded, and analyzed. I remained attentive and observant while analyzing data collected during the focus group session. Transcriptions were reviewed by participants for accuracy at a predetermined time and location. Within three days, I emailed all four focus group participants and thanked them for participating in the focus group session. Also, I emailed all 11 participants to invite them again to participate in the last phase, participant journaling. I attached a copy of the participant journals with instructions, explained the urgency of frequently recording journal entries, and expressed my appreciation for all of their outstanding participation.

### **Participants' Journaling**

Journaling is the "process of participants sharing thoughts, ideas, feelings, and experiences through writing and/or other media and has been accepted as a valid method of accessing rich qualitative data that has been used in phenomenological research" (Hayman, Jackson, & Wilkes, 2012, p. 27). Journaling has been a valid tool for documenting one's thoughts and experiences, and obtaining rich qualitative data for decades (Hayman et al., 2012). For purposes of the study, participants used journals to record their experiences and thoughts they might have remembered since the interviews in an effort to gather additional data related to the four research sub-questions, enhance, and clarify data collected from individual interviews

and the focus group. This posed a challenge to participants as it required a continual commitment to frequently record their perceptions, thoughts, and explanations of their military transition and college experiences. Journal entries enabled additional data to be obtained as participants could independently and privately record their experiences, thoughts, and comments.

Participants' journaling was the final phase of the data collection process. Seven participants completed the journals and each journal contained at least one entry under at least eight of the nine areas listed. The first section of the journal was provided for participants to add additional comments to any questions previously asked during individual interviews and the focus group session. Journals were categorized with nine headings based on research sub-questions and related statements provided from interviews and the focus group to stimulate participants' thoughts, move them to record more in-depth data, and to aid in data analysis. I provided clear, thorough instructions and expectations for recording in the journals as illustrated on the original journal exhibited in Appendix I. I continually offered support and followed up by email, phone, and text messaging, and frequently interacted with some of them at the Veterans' Center to encourage them to frequently record journal entries as recommended by Hayman et al. (2012).

Participants were allowed a four-week time span to complete their journals and were given the option to return a copy of the journal either in person or electronically upon its completion. All seven journals were received within four days after the end of allotted four-week time span. At least one entry was recorded in at least eight of the nine headings. I typed all handwritten journals for clarity during data analysis. No transcriptions or member checks of journals were needed. An excerpt of a typed journal is exhibited in Appendix J.

## Data Analysis

A methodical approach to analyzing data was used in this qualitative transcendental phenomenological study. Separate files were created and organized individually for the three sets of data. Multiple data collection methods of interviews, a focus group, and participants' journaling were used to allow triangulation that helped to increase credibility of findings as recommended by Moustakas (1994). Analyses of collected data were conducted using Moustakas' (1994) recommendations for a phenomenological study.

During the first step, my military experience and personal background were described to bracket (*epoche*) myself within the study and reveal past transition and reintegration experiences which naturally helped to shape descriptions of the study. Bracketing, also known as *epoche*, is when researchers set aside their preconceived notions in an effort to examine data from a pure state (Moustakas, 1994). Dukes (1984) stated that bracketing is "temporarily suspending any consideration of facts in order to uncover the essential principle of an experience" (p. 199). I focused on participants' experiences using reflexivity, strived to remain neutral, and not to include personal presumptions and biases into the study, although Creswell (2013) asserted that it is impossible for the researcher to keep completely out of the study.

Secondly, data collected from all individual and focus group interviews were transcribed verbatim after the respective sessions ended. Participants conducted member checks of their transcripts for accuracy within two weeks after transcriptions were completed and before I began data analyses. Member checks are vital to establish credibility and to ensure validity and reliability of findings (Lincoln & Guba, 1985; Merriam, 2009). I typed handwritten copies of journals to permit better clarity during data analysis. No journal transcriptions were needed.

I began data analysis using Atlas.ti7 software to analyze transcripts from individual and focus group interviews. Atlas.ti is the qualitative data analysis software program that provides the tools for researchers to identify, code, and interpret findings to assess their importance and to visually see the relationship of findings (Hwang, 2008). All transcripts of both sets of data were input into Atlas.ti7 software program for analysis and open coding. I repeatedly reviewed the coded transcripts for patterns and the number of codes listed for a more accurate interpretation. Rich, thick descriptions of significant statements, patterns, and commonalities were identified during horizontalization of both data sets and meaning units were listed (Creswell, 2013). As recommended by Moustakas (1994), “meaning units are clustered into common categories or themes, removing overlapping and repetitive statements” (p. 118). Overlapping and repetitive statements not relevant to interview questions were identified and deleted. Initially, nine themes were identified after rigorous data analyses, repeated reviews of significant statements, and thorough interpretations to ensure only themes were identified from significant statements that were more relevant to interview and research sub-questions. As a result of repeated analyses, interpretation, reducing significant statements, and reviewing frequency of codes, five themes were identified. Numerous subthemes were identified based upon the highest ranking of the frequency of codes. Samples of coded transcripts of individual and focus group interviews from Atlas.ti7 are included in Appendix K.

Data collected from participant journals were analyzed manually as it was difficult to use journal entries with Atlas.ti7 software. I repeatedly read and reviewed journal entries, interpreted, compared significant statements, and looked for patterns and commonalities using horizontalization to identify and openly code significant statements. I reviewed statements, analyzed, and interpreted data continually for accuracy. Three new codes were identified,

combined with identified codes from other two data sets, and added to the table of themes and codes. Several repetitive and overlapping statements were deleted. To help make more sense of the data, I created a Microsoft Excel document and displayed data by categories of pseudonyms, codes, significant quotes from journals, and the nine categories of journal entries to make it simpler to compare and synthesize all data sets. Bloomberg and Volpe (2008) and Merriam (2009) proclaimed that data analysis is necessary to make some sense out of it which necessitates interpretation of data, reduction of raw data, consolidation, identification of significant statements, and the essence of what data revealed. Thematic saturation was attained during analysis of journal entries. Raw data from all three sets of data were reduced and synthesized to identify significant codes and themes to reveal the essence of the phenomenon.

Textural descriptions of participants' experiences were developed from clustered themes and meaningful units. Textural and structural descriptions were written of the participants' lived experiences of the phenomenon. The textural descriptions reflected what participants experienced and the qualities of their experiences, while structural descriptions revealed how participants experienced the phenomenon, issues that influenced participants' experiences, and the composite descriptions were written in order to reveal the essence of the phenomenon (Creswell, 2013; Moustakas, 1994).

### **Trustworthiness**

Trustworthiness addressed the credibility, confirmability, dependability, and transferability of findings of the study. The trustworthiness of data was connected to the researcher's credibility that collected, interpreted, and analyzed the data, and the researcher's competence that was demonstrated by using proper validation strategies which are necessary to yield quality data analyses (Patton, 2002). Validation strategies used to increase trustworthiness

of the study were triangulation, prolonged engagement, audit trail, member checks, and rich, detailed descriptions as suggested by Creswell (2013) and Lincoln and Guba (1985).

Research needs credibility in order to be useful to others in the field. As the researcher, I remained neutral during the study and I bracketed myself throughout the study. I demonstrated professional integrity, methodological competence, intellectual rigor, perseverance, and biblical principles until completion of this dissertation. According to Patton (2002), professional integrity, intellectual rigor, and methodological competence are highly significant to having credible data, and there are no precise rules on how to conduct a trustworthy, first-class analysis. Lincoln and Guba (1985) recommended four constructs to measure trustworthiness and soundness of qualitative research design: credibility, confirmability, dependability, and transferability. Each of these four constructs was addressed separately below.

### **Credibility**

Credibility is a method of addressing the trustworthiness of findings and indicated how well participants in the study were accurately described (Lincoln & Guba, 1985). To increase credibility of findings, three validation strategies of prolonged engagement in the field, member checks, and triangulation among the three methods of data collection were used. These three strategies were addressed separately below.

Prolonged engagement is a validation method that was used to increase credibility of findings (Creswell, 2013). My prolonged engagement in the field involved frequent visits to the study site, spending ample time with participants to build trust, observe and learn more about the participants, increase awareness of programs and services offered at the Veterans' Center, and to overcome any distortions due to my presence at the study site. During the first six weeks of the study, I visited and observed different areas of the study site several times a week to become

more familiar with the college environment. I interacted often with different staff members and potential participants, and conducted the individual interviews at the site. I continued prolonged engagement with the participants as much as possible and rapidly gained their trust, established rapport, and built good relationships with participants.

Member checks are “the most critical technique for establishing credibility” and to ensure validity and reliability of findings whereas the researcher allowed participants to review their transcriptions of collected data for accuracy and to provide additional information (Lincoln & Guba, 1985, p. 314; Merriam, 2009). Member checks of transcriptions of all interviews were completed within two weeks of completing transcriptions to help ensure accuracy of data before proceeding with data analysis. Feedback was requested of participants to confirm accuracy, validity, and integrity of data. No errors were found and no additional data were offered (Lincoln & Guba, 1985; Schwandt, 2007). I conducted cross-checking of data interpretations, analyses, and conclusions of the study. Creswell (2013) suggested that instead of showing transcripts to participants, the preliminary analyses of identified themes can be shown to participants to determine discrepancies and missing statements. Direct quotes of some of the participants were used. Member checks of preliminary analysis of identifying themes and significant statements from data analysis were given to participants to review for the integrity and accuracy of findings. Participants found no discrepancies and provided no additional data or feedback during member checking of preliminary analysis of themes and significant statements.

Triangulation of findings from different sources and methods of data collected were completed to provide more insight on statements, themes, and other information to corroborate evidence, but there was only one researcher. Researcher bias was clarified by stating my biases and past experiences. Triangulation of data provided more validity to findings of the study.

**Confirmability**

Confirmability is another method used to establish trustworthiness of findings and was used to measure the objectivity of the researcher (Lincoln & Guba, 1985). To increase confirmability, an audit trail was performed. An audit trail enabled the auditor to become familiar with the study's methodological and analytical processes to confirm its findings as suggested by Lincoln and Guba (1985). The audit trail reflected on each phase of the research study "traced through the research logic, and helps other researchers determine whether a study's findings may be relied upon as a platform for further inquiry and as a basis for decision-making" (Carcary, 2009, p. 11).

An audit trail was performed to increase confirmability and dependability of findings by an expert in the field of education who was not connected to the study as recommended by Lincoln and Guba (1985). The expert reviewer holds a doctorate degree in the field of education. A record of the steps taken throughout the research process, raw data, field notes, transcriptions of interviews and the focus group, journal entries, and data analyses were reviewed by the expert reviewer during the audit trail. The safeguard and maintenance of all written, electronic, and any other physical data related to this study complied with the ethical considerations as stated in Chapter Three. The audit trail is exhibited in Appendix L.

**Dependability**

Dependability is an assessment of the researcher's ability to justify changes in the phenomenon to adjust research design by reexamining data for any errors, and the presence or absence of the phenomenon (Lincoln & Guba, 1985). Triangulation, an audit trail, and member checks were conducted to help ensure dependability of data and to increase trustworthiness of findings. Triangulation allowed deeper insight into participants' stories of their experiences and



checks for consistency in findings using the multiple methods of data collection. The audit trail was conducted to also ensure dependability and to increase trustworthiness of the findings as explained in above section under confirmability.

Member checks were also conducted to allow participants to review transcripts of statements provided during all three sets of data collection, to make corrections, and to offer additional comments (Lincoln & Guba, 1985; Merriam, 2009; Schwandt, 2007). Member checks of individual interviews and the focus group transcripts were conducted to ensure accuracy of statements. Participants were asked for additional feedback and data to confirm validity and integrity of data. No additional feedback was provided and no discrepancies were found.

### **Transferability**

Transferability is the applicability of findings to other settings or situations which can be achieved using triangulation of data (Lincoln & Guba, 1985). Rich, thick descriptions of themes, interpretations of data, and maximum variation sampling were used to increase transferability (Creswell, 2013; Lincoln & Guba, 1985). Detailed descriptions of the Veterans' Center located on Cumbersome Community College were provided. The qualifying criteria for participants in the study and their demographics were described. Rich, thick, and detailed descriptions of the lived experiences and perceptions of participants were provided. I established rapport and remained close to participants while in the field to increase accuracy and value of findings. Lincoln and Guba (1985) proclaimed that "it is not the naturalist's task to provide an index of transferability; it is his or her responsibility to provide the data base that makes transferability judgments possible on the part of potential appliers" (p. 316). Transferability of findings is limited due to the small sample size and because this study only explored a majority of

participants from one college. Findings may not be transferable to males and veterans with no disabilities.

Member checks and rich, thick, and detailed descriptions were the most popular and most economical strategies to use. Other validation strategies were reliable, but were more costly and time-consuming to use. I used reflexivity and triangulation to support the trustworthiness of findings and to help prevent researcher bias. Reflexivity is the process whereby I positioned myself in the study and examined my abilities as a researcher, the research relationship, and what I could gain from the research study (Creswell, 2013). Reflecting on the research relationship involved probing my own relationship to participants, and how dynamics of the relationship affected responses to the questions. I bracketed myself in the study, remained neutral, and strived not to include my opinions, biases, and personal presumptions in the study.

### **Ethical Considerations**

Ethical issues can occur before and throughout a research study. I used extreme caution to protect confidentiality of participants, and pseudonyms were used for all participants, personal, institutional, and location names, unless otherwise stated (Creswell, 2013; Glesne & Peshkin, 1992). Audio recordings were only used for educational reporting purposes. No video recording was conducted. All electronic data collected were password protected. All electronic files and physical data related to the study will be stored under lock and key for three years after the study is completed and afterwards these files will be destroyed in accordance with federal laws.

Prior approval was obtained to conduct the study from Liberty University's IRB and from appropriate staff at Cumbersome Community College. I was not in any position of authority over participants. Signed informed consent of participants was obtained prior to conducting the

study. I did not share personal experiences of the phenomenon with any participants at any time as this could have affected bracketing. Only positive findings were shared with participants. Security personnel were on-site at the Veterans' Center, but were not needed during the study.

One ethical concern was participants could have revealed sensitive or illegal information. If such data were collected during the interviews, it could have been excluded from the study and could have affected the findings. However, no sensitive or illegal information was revealed. Another ethical concern was participants' responses to the interview questions could have caused flare-ups and/or triggered frustrations and negative responses because all participants were veterans with disabilities that were not all known to me. Any of these occurrences could have created an undesirable environment, caused participants to quit the study, delayed, and/or prevented the collection of rich, thick data. Fortunately, this did not occur during any phase of the data collection process or throughout the study.

### **Summary**

Data collected from all three sets of data provided a deeper understanding of the transition and reintegration experiences of the female veterans with disabilities and challenges faced while attending college during their reintegration. Data were read, interpreted, analyzed, coded, and synthesized for all data sets. Atlas.ti7 was the software program used as the tool to help analyze data for this study. Perceptions of college programs and support for female student veterans with disabilities were described by participants. The lived experiences of female student veterans transitioning from the military to a college environment, challenges and problems they faced, coping strategies, how they persevered, and other perceptions of their colleges were explored and will be explained in the next chapter. Narrative descriptions of

participants, identified themes, answers to the research sub-questions, and results of the study are also presented in Chapter Four.

## **CHAPTER FOUR: FINDINGS**

### **Overview**

The purpose of this qualitative phenomenological study was to explore and describe the lived experiences of female student veterans with disabilities entering higher education in order to improve programs, services, and support available to female student veterans with disabilities. It was hoped that findings would identify accessible programs, services, and support systems that needed to be enhanced or added to better serve the needs of female student veterans with disabilities. This chapter presents a narrative description of the participants, results of the study, and identified themes along with respective research sub-questions. Findings are holistic analyses of the participants' lived experiences and perceptions revealed through individual interviews, a focus group, and participants' journaling. This chapter concludes with a summary.

### **Participants**

Participants consisted of all female student veterans with different disabilities. All participants completed two or more semesters of college (one graduated one month prior to the study), and everyone served five years or more in the military, except for one who served three and a half years. The participants were mostly minorities, primarily in their 20s, 40s, and 50s; each one served in the Army, and three served in both the Army and Army Reserve; four served in combat; and seven were never exposed to combat (see Table 1). Pseudonyms were used for all participants and the same pseudonyms were used in reporting data collected across all three sets of data so that the narratives would flow in a more natural context. Seven individual interviews and the focus group session were conducted at the Veterans' Center conference room at Cumbersome Community College. Four of the individual interviews were conducted away from the study site. Two interviews were conducted by phone and two were conducted at

participants' homes for their convenience. All participants were attending college using educational benefits of the Post-9/11 GI BILL or another source of veterans' educational entitlement of VR&E. Three participants, Cathy, Reatha, and Josie, each attended a different college away from the study site. Eight participants attended college at the study site. All participants were attending summer classes during the study, except for two, and they seemed eager to participate and share their experiences. Participants used the words staff and faculty interchangeably to refer to administrators, instructors, and employees at the study site.

I began the study with 14 participants, two more than my targeted maximum sample. However, three opted out of the study due to very hectic schedules with extreme family obligations and working up to two jobs; all three were single mothers; one started a new job, and they felt it would be too overwhelming to continue with the study. None of the three wanted their data to be used in the study. Data were collected from 11 participants through individual interviews; four participated in the focus group session (six participants were scheduled for the focus group; one was involved in a car accident while coming to the study site to attend the session, and one was called to work without advance notice) and seven completed the participants' journals. As a useful gesture to readers, all participant quotes were included verbatim, to include any spelling or grammatical errors, to more accurately depict the voices of participants. Following are narrative descriptions of participants in the study.

Table 1

*Demographics of Participants*

Pseudonym	Ethnicity	Age	Branch of Service	Years Served	Combat Exposure	Year of Discharge	Semesters of College
Jalisia	Pacific Islander	29	Army	7	Yes	2012	5
Jordyn	Caucasian	47	Army	6	Yes	2002	5
Celia	African American Haitian	22	Army	3	No	2014	2
Mona	Caucasian	33	Army	6	Yes	2012	3
Cathy	African American	52	Army and Army Reserve	13	No	1995	5
Renaë	African American	56	Army	7	No	1985	2
Neicey	African American	59	Army	14	No	1998	6
Laila	African American	25	Army	5	No	2012	3
Reatha	African American	65	Army and Army Reserve	25	No	2007	6
Mattie	Caucasian	46	Army	5	No	2014	2
Josie	African American	55	Army and Army Reserve	30	Yes	2010	Graduated May 2015

*Note.* Years served were rounded to whole years.

**Jalisia**

Jalisia was 29 years of age, Pacific Islander, a single mother of one young daughter, and relocated from California to this area after transitioning from the military over three years ago. She served in the Army for over seven years and served in combat in Iraq for 15 months. Jalisia was a fulltime student pursuing a degree in radiography at Cumbersome Community College. She performed work study at the Veterans' Center several times a week, and strongly felt that the Veterans' Center is a great asset to student veterans. Her transition from the military into college

was tough and challenging at first. She commented, “It wasn't the worst, but it wasn't the best either.” Having a good support system from her family and fellow student veterans helped her to cope with challenges and to persevere in college. Although her disabilities were invisible, she disclosed how she kept pushing despite her disabilities.

### **Jordyn**

Jordyn was 47, Caucasian, and was employed full-time as a veterans’ coordinator with the Veterans’ Services Office located at the study site. She was entering her fifth semester of college and she stated, “It’s a wonderful feeling being able to continue my education which is an endeavor I started many years ago.” Jordyn emphasized that she reentered college with disabilities because she desired to finish what she started and she wanted to be a positive role model to her children. She served six years in the Army, was exposed to combat during the Persian Gulf War, and has been discharged from the Army for over 20 years. Jordyn suffers from several disabling impairments and severe pain. Her responses and perceptions were great contributions to this study.

### **Celia**

Celia was one of the youngest participants, age 22, African American and Haitian, married with one child and was involved in a car accident while traveling to the focus group session. She served in the Army over three years, was never exposed to combat, and had only been discharged for one year prior to this study. Celia was enrolled in traditional college courses. She stated, “Transitioning out of the military was harder than I thought, and when I actually got out, it was very much different from what they described during ACAP” (mandatory employment and other training sessions for soldiers exiting the military). She revealed that she saw no gender difference or favoritism and was treated fairly while on active duty. Although she



said it was hard getting into college, completing the paperwork, and the certification process, Celia felt that the college campus is very nice, veteran-friendly, and she did not feel uncomfortable or ashamed trying to adapt to the environment.

### **Mona**

Mona was 33 years of age, Caucasian, married to an active duty service member, a mother of two sons, and attended work study at the Veterans' Center. During our prolonged engagement for the study, Mona revealed that she grew up in a less fortunate environment of low socioeconomic status. She had completed three semesters of traditional courses at the study site, earned an associate degree in health care from another institution, and a certificate in logistical management. She served in the Army for a total of six years which included combat service, and she exited the military over three years ago. Not only had Mona survived breast cancer, but she had PTSD and other health issues that often hindered her class attendance and work. In response to being a female in the military, Mona stated, "My experiences were all positive, there was not one time that one of my male friends didn't have my back and take up for me, or make sure that I was okay." Yet, she revealed that her transition from the military left her feeling unsafe and a sense of loss for her military family. Her PTSD is sometimes triggered by elements and people within the college environment which is quite challenging for her. Despite many challenges, juggling motherhood, family obligations, frequent doctor visits, health issues, and other life roles, she is determined to persevere and complete her education.

### **Cathy**

Cathy was 52 years of age, African American, married, and attended college both as a traditional and online student at a distant university, and was not enrolled at the same college as the study site. She served in both the Army and the Army Reserve for a combined total of 13

years and was never exposed to combat. Although she was discharged over 15 years ago, she provided rich data about her military transition and disabilities incurred during military service which included both MST and PTSD. Unlike other participants, she exited the military as the result of an involuntary reduction in force of service members which caused an extreme hardship on her family. She identified well with other student veterans, although at times heated discussions among the students brought on trigger factors due to her MST and PTSD. However, she believed that her spiritual beliefs, church attendance, counseling by her pastors, professional help received, resources from organizations have helped her to cope.

### **Renaë**

Renaë was an African American, age 56, married with grandchildren, and provided daycare services on a military installation. She recently began pursuing her education on campus at the study site to become more marketable, secure a better job, and have a better life. Renaë had only completed one semester of college. She was on active duty in the Army for over seven years and was never exposed to combat duty. Renaë revealed that she did not know about some of the different educational benefits and other services that veterans were entitled to receive when she exited the military. She has now become more knowledgeable of the benefits. Because she was an older student, Renaë felt that she identified better with student veterans who have disabilities and she could not grasp and understand like the younger student population. Renaë stated, "I've learned how to financially and emotionally stable myself so I can have a better life."

### **Neicey**

Neicey was 59 years of age, African American, married to a retired service member, and decided to pursue an education to be a role model to her children and grandchildren. She did

work study and was enrolled in online and traditional courses on campus at the study site. Neicey served on active duty over 14 years in the Army, was never exposed to combat, and exited the military over 22 years ago. She pursued another career in federal service and had retired from that job. She revealed that her transition from the military was rather smooth. During her military career, she had great leaders and she stated that “the military is what you make it, being military will never go away, it’s just different once you become a civilian.” Some of the problems that she had been coping with continually while in college were extreme hypertension, extensive bodily pain and frequent doctor appointments, coping with the effects of certain medications, and being able to go to work and attend classes. She had been able to cope and persevere because of the great support and understanding from the staff at the Veterans’ Center and other veterans’ service organizations that work through the Veterans’ Center.

### **Laila**

Laila was 25 years of age, African American, married to a service member serving in the Army, and worked two jobs to have a better life. She was a full-time student on campus at the Cumbersome Community College. Laila had completed three semesters of college since being discharged from the military. She served in the Army for over five years and had never served in combat. She identified better with fellow veterans and felt she could relate to and rely on them for their support because they knew what it was like serving in the military. Her transition into civilian life went fairly easy because she was prepared for civilian life. She knew the necessity of an education in securing a good job. She took classes on active duty, set goals, and knew what she needed to do after transitioning from the military. Laila believed that she could now breathe, live, and have more control over her life.

**Reatha**

Reatha was the oldest and most experienced participant, African American, married, age 65, and a military retiree with over 25 years of active service in both the Army and Army Reserve. She retired over seven years ago and never served in combat service. Reatha did not attend college on the same campus as the study site. She had been attending another university for over three years. Her reasons for reentering college were to get out of the house, stay busy, and stay active to help decrease the possibility of Alzheimer's disease. "Being older, I felt that learning would be a good experience to keep my mind active." She has faced many challenges to include the deaths of her daughter and grandson, an ill husband, an ailing mother with Alzheimer's disease, and several medical issues and disabling impairments of her own which required ongoing doctor visits, therapy, and other medical care.

**Mattie**

Mattie was Caucasian, 46 years of age, unemployed, and recently divorced with two adult sons. She served in the Army for nearly five years, had no combat service, and transitioned from the military less than one year prior to this study. Although she already had two associate degrees, she had been attending college fulltime for two semesters at the study site. She decided to reenter college to increase her knowledge and earn more money so that she could better support her family. Mattie underwent severe trauma from MST while on active duty that was sometimes triggered along with her PTSD and she isolated herself from society. Additionally, she had experienced extreme financial, emotional, social, and physical hardships since exiting the military. She stated, "College helps me to not be focused as much on the negativity I experienced in the Army." In an effort to become more integrated into society and cope with her MST, PTSD, and other problems, Mattie became an active member of the American Legion and

Disabled American Veterans' organizations to interact with veterans. She was undergoing psychological and psychiatric counseling. Mattie explained that reintegration into society was a work in progress.

### **Josie**

Josie was 55 years of age, African American, and unmarried. Josie graduated college in May of 2015 and was the only participant that had already graduated. She attended a different college than the study site. Since graduating from college, Josie stated that her confidence had increased and she felt more equal to her peers, although she struggled with assignments and often felt at a disadvantage to the younger students. Her college experience overall was positive and she loved the atmosphere. Josie served on active duty in the Army and in the Army Reserve for a total of 30 years before retiring from military service in 2010. She was exposed to combat while serving during Desert Storm, the First Gulf War lasting from August 2, 1990 to February 28, 1991. Josie emphasized that her major reason for reentering college was the attractive incentives of the Post-9/11 GI BILL, "which pays - pretty much paid for my education and gave me the desire you know um to obtain my learning at that point." She described her transition from the military as being emotional. She was unprepared, did not know what to do next, or where to go after exiting the military. She stated that the DVA gave her a hard time about things she was dealing with personally. Josie felt that she had fully reintegrated into civilian life.

### **Results**

The results were organized thematically and presented with respective research sub-questions. Data were transcribed verbatim, reviewed, analyzed, and interpreted by me as each set of data was collected. Significant statements, codes, and themes were identified. Five themes were identified using all three sets of analyzed data. The five themes are: (a) importance

of completing education; (b) strong desire to persevere; (c) coping strategies and managing responsibilities; (d) perceived need for institutional support of veterans; and (e) how services and programs met veterans' needs. All data were synthesized across the three methods of data collection: interviews, focus group, and participant journaling.

The one central question that guided the study was: What are the transition experiences of female student veterans with disabilities entering college during reintegration into society? This central question was answered from findings of the four research sub-questions that guided the exploration of the lived experiences and needs of female student veterans with disabilities enrolled in college during their reintegration (Creswell, 2013). The four sub-questions are:

1. What factors influenced the decisions of female student veterans with disabilities to enter or reenter college?
2. How do emotional and social needs of female student veterans with disabilities drive their perseverance to remain in college?
3. What coping strategies do female student veterans with disabilities employ in college as related to transition and reintegration experiences?
4. How do female student veterans with disabilities identify the available college resources, support systems, and services as meeting their individual needs?

### **Themes**

As a result of the findings, five themes and numerous sub-themes were identified. The five themes are: (a) importance of completing education; (b) strong desire to persevere; (c) coping strategies and managing responsibilities; (d) perceived need for institutional support of veterans; and (e) how services and programs met veterans' needs. Themes are addressed below along with subthemes and applicable research sub-questions. Participants used the words staff

and faculty interchangeably to refer to their instructors, administrators, and employees of the Veterans' Center at the study site where eight of them were attending college. An Enumeration Table of identified themes and codes is displayed in Appendix M.

### **Theme One: Importance of Completing Education**

This theme was identified during analysis of statements provided during discussions of interview questions related to Research Sub-Question One: What factors influenced the decisions of female student veterans with disabilities to enter or reenter college? Five sub-themes were also identified. Data analysis from the three data sets revealed why participants opted to enter or reenter college after exiting the military.

**Be a positive role model.** Three participants decided to enter college because of their desire to be a positive role model. Participants expressed a desire to set the bar and be a positive role model for their children, grandchildren, and other family members who played a large role in their decision to enter college. Even though some had no grandchildren, they indicated that completing college would drive their children to pass it on to the next generation. Neicey stated, "I want to continue to be a role model for my kids and my grandkids." Mona asserted, "I didn't want my children to grow up like I did so I decided [on college] like literally four days after I found out that I was pregnant, [and] I was in college." During moments of our prolonged engagement, Mona revealed to me that she grew up in a less fortunate environment of a low socioeconomic status, which she felt helped to motivate her to be a role model and to continue her education. This is another factor that influenced Mona to reenter college. Neicey and Mona's determination to be a role model also supported the first sub-question as to why they entered college. Baum et al. (2013) declared, "Without a college education, those born into the lower economic rungs are likely to stay there" (p. 9). Mona has increased her chances of a

higher socioeconomic status by earning an associate degree, a certificate in logistical management, and completion of three semesters toward another degree.

**Change of career.** Three participants responded that wanting a change of career was a deciding factor to enter or reenter college and the reason why college was important to them. Cathy stated, “I’m ready to just make a career change to do something um that I can do out of my home.” Renae insisted that a “better education always prompt better employment, better social status.” Laila stated, “I wanted to make sure I had the education aspect of whatever the— the career field I decided to get into...And, most-most careers you need a degree to get a good job so that’s what I wanted to do.” A review of literature has shown that a college education is essential for a more socially and economically stable life.

**Lifetime goal.** Three participants revealed that education was important to them and they opted to enter college because they wanted to fulfill their lifelong goal of completing college. Participants seemed determined and committed to achieving their lifetime goal. Jordyn responded, “I wanted to fulfill my goal of returning back to school after not being in school and being um in a depressive state and finish my degree.” Mona reported, “I am the first in my family to graduate college, my brother went, but he got a really good and high paying job before he graduated, and I like to rub it in his face that I got mine first.” Jalisia added, “It was something I need to do as a long time personal goal for myself.”

**Post-9/11 GI BILL to pay for college.** The Post-9/11 GI BILL offers very liberal educational entitlements to veterans. Three participants stated that the Post-9/11 GI BILL influenced them to enter college. Josie commented, “The military has the incentive program Post-9/11 GI BILL which pays - pretty much paid for my education and gave me the desire you know um obtain my learning at that point.” Mattie talked about what the future benefits of a



college education meant for her. She commented, “Money to better myself; by getting out and pursuing an education, I’m able to learn the whole dynamics of my job so that I can use the [communications field] work experience [from] the military.” Renae also reflected on how she enlisted into the military because of entitlements to college money using the Post-9/11 GI BILL and it increased her promotion opportunity.

**Education is important.** Only two participants openly admitted that they entered college because education was important to them. However, other factors revealed by all participants as to why they opted to enter college were a reflection of how they viewed education as being important. The participants revealed how they put their goals of pursuing a degree on hold to defend their country, despite their chances of returning home or being capable, especially after serving in combat which ultimately reflected on how they viewed education as being important. A college degree increases the possibility of gainful employment, higher wages, greater benefits, more employment options, greater socioeconomic success, and a more rewarding career. Celia stated, “So um, being that I got out of the Army, I said the first thing I was going to do was to fulfill my dream of going to school because education was very important.” Mattie also stressed the importance of an education and stated, “I need my education and certification to be able to support myself.”

Some revealed that they had fear, anxiety, and many emotions after transitioning from the military, wanting to fit in, adjusting to civilian life, and having to make different decisions. Participants expressed what factors influenced their decisions to enter college. Some wanted to be a positive role model, some wanted a career change, and others had a lifelong goal to attend college. Others wanted to use their Post-9/11 GI BILL benefits and they valued their education as important. All of these reasons supported sub-question one as factors which influenced them

to enter college. Participants seemed determined to complete their educational goals, regardless of their disabilities, ailments, and frustrations that evolved during their transition from military culture to a college environment. Observing the participants' emotions and enthusiasm while exploring factors that influenced their college decisions supported research sub-question one.

### **Theme Two: Strong Desire to Persevere**

This theme and five subthemes were identified as a result of responses to interview questions related to Research Sub-Question Two: How do emotional and social needs of female student veterans with disabilities drive their perseverance to remain in college? Data were collected only from individual interviews and journal entries to seek responses to questions related to this research question. This question was not appropriate to discuss in a focus group as it could have opened old hurtful wounds, triggered outbursts, and other negativity that could have prevented or hindered rich data collection. The five sub-themes are discussed below.

**Identify strongly with student veterans.** Ten of the eleven participants felt that they identified strongly with other student veterans at the study site which ranked as the highest of responses related to this sub-question. Participants felt they could relate better with other student veterans than nonveteran students because they felt more comfortable and accepted. Cathy was the only participant who reported she did not identify strongly with student veterans because she did not know any student veterans at her college away from the study site. Participants shared positive statements about how they identified with other veterans, such as similar hardships, health issues, reintegration experiences, challenges, and other concerns. This subtheme was the most significant and reflected the highest frequency number of statements from this theme.

Laila reported, "We kind of can relate [and] rely on one another for the support because we know how it was serving in the military." Participants felt they were better able to cope and

persevere with such support. Josie felt that because she had been rated as a disabled veteran, she knew how and what other student veterans feel and could relate to them. Being able to connect and share challenges they faced with other female veterans and the general population of veterans helped them to remain focused and persevere, especially within the Veterans' Center where veterans interact, de-stress, study, network, watch television, and access computers. Neicey disclosed how she observed and identified with veterans while working at the Veterans' Center. She commented, "I didn't realize how much I identify with them until I start going to school [and] working in the [Veterans'] Center and we all [were] expressing our needs and reactions [about] what happened when we were in the military." It was obvious from these responses and their emotions that connecting, bonding, and identifying strongly with other veterans could affect their desire to persevere and complete their educational goals as related to this sub-question. Neicey and Laila provided rich data in describing how veterans relate, identify strongly, and rely on each other for support which related to and supported research sub-question two concerning how the emotional and social needs of female student veterans drive their perseverance to remain in college.

**Shared common experiences with classmates.** Eight participants reported that they shared common experiences with other student veterans which greatly helped them to persevere in college. Shared common experiences with classmates ranked as the second highest number of significant statements from this theme. Participants explained how sharing experiences and problems with other veterans undergoing similar issues and using veterans' programs after learning of their availability helped them to persevere and continue their education. Participants felt that it was easier to relate and share with other student veterans because they were more at ease when around them and because they shared common experiences. Participants reflected on

the closeness and good camaraderie from fellow student veterans and how other classmates connected, motivated, and helped them to conquer their fears and anxiety, and to cope with the effects of PTSD, MST, and other trauma. Other veterans without disabilities and nonveterans generally helped them and fellow classmates showed concern when some participants were absent from classes, although they were not always viewed in a positive manner by everyone.

Mattie asserted, “It is like a family that you have something in common to talk about and share in [their] experiences and I actually enjoy being around my veterans a lot.” Jalisia remarked, “People share at the [Veterans’] Center and I guess I relate better with other female veterans [and] soldiers that are working, and I don’t think I could relate to younger students that are straight out of high school.” Reatha proclaimed, “With a couple [of] females that I have met, we all have the same problems adjusting to being moms, taking care of children, taking care of family members, and trying to go to school.” Mona shared that she was more comfortable around students sharing similar experiences as her. Celia said, “I can identify with them because we share certain experiences and when I see like another veteran you can automatically just tell they are ex-military almost like a telekinesis kind of thing.” Participants described their interaction with other veterans and provided rich data of how they shared similar experiences, challenges, setbacks, and bonded well with other veterans. Significant statements from these female student veterans with disabilities helped to further answer sub-question two.

**Support from veteran classmates.** Student veterans are accustomed to a close-knit community of soldiers who share common experiences that can last a lifetime. Past research showed that female veterans need to balance their responsibilities and life roles when readjusting from being a soldier to a student. Six participants reported their perceptions of how they were treated by classmates and how emotional and social support from their veteran and nonveteran

classmates helped them to tackle responsibilities, reintegrate back into society more smoothly, and to persevere in college. One revealed that constant interaction with civilian classmates and other civilians was helpful and they did not treat her differently. Some classmates showed concern over whether she had PTSD or any other disorder, checked to see how she was doing, and offered their support. Josie commented in her journal, “[I] asked for help when needed [and] classmates would help me.” Jalisia stated, “A strong support system, I think helps, and I have friends that were in classes with me that are also veterans and mothers, and also going through a similar situation as I’m going through.” Neicey stressed that some of her veteran classmates experienced similar issues as her. She stated, “It’s relieving knowing that I’m not the only one going through [while] trying to pursue a college education and still have everything going on in my personal life...So, that’s relieving and a little bit motivating as well.”

**Treated well and with respect by veteran and nonveteran classmates.** Four participants revealed that they were treated well overall and were respected by veteran and nonveteran classmates and fellow students which participants revealed as being key factors that influenced their perseverance in college. Revealing how well they were treated and respected by veteran and nonveteran classmates supported their strong desire to persevere. Cathy emphasized, “I was treated with respect...When I missed class, my fellow classmates showed their care and concern.” Mona stressed that she was treated well and declared, “I know this is a topic that a lot of people fight over, but I have seen some females that put themselves in places that they should not be in, then want to be treated with respect.” Renae declared, “I was treated fairly by both NDV [nondisabled veterans] and the NV, [nonveterans].” Reatha added that she was also treated with respect and was a role model for her classmates which she attributed to her being an older,

nontraditional student. She revealed how she dealt with specific issues to help motivate and encourage younger classmates and veterans.

**Veterans' services.** This subtheme was identified from four participants' statements and was an overlapping sub-theme. Veterans' services were viewed as a vital benefit to female student veterans with disabilities especially since their disabilities were all incurred while serving in the military and they need access to specific services. This is evident because criteria of the study required all participants to have at least a 20% disability rating by DVA. The focus of this subtheme was available overall veteran services and how these student veterans were affected.

Mattie revealed,

I joined the vets [veterans] and the DAV to get me out of the house for social support and [become] more integrated, even though it's being integrated with you know vets, people that's been through the same thing I have...Um, it's helping me to get out there you know to be more active.

She further disclosed that getting out and using some of the veteran services enabled her to better cope, persevere, and continue her education so she could have a better life. Three other participants also perceived veterans' services and benefits as being available and were glad to know programs were available for them. They also expressed appreciation for the many military students attending college at the study site. Mona attended other colleges and used their services and programs. She proclaimed, "If it wasn't for the VA representative being here and for the other - other veterans being here, I'm not sure I would." Renae emphasized, "I can be financially and emotionally stable and have a better life now using the um veterans programs I found out about."

Support from veteran and nonveteran classmates and others at their colleges helped the participants to respond positively to challenges and problems faced during transition and within their colleges. Participants revealed how they were better able to cope, persevere, manage responsibilities, excel in college, and reintegrate back into society more smoothly. These female veterans felt that as females and being able to talk to other females helped them to realize that they were not alone in their feelings and situations. Veterans are bound by strong esprit de corps which was evident in their descriptions of how they identified strongly and shared common experiences as related to their strong desire to persevere. The strong support and cohesiveness between these veterans, their support of each other, and how they respected and treated each other were factors that increased their desire to persevere and supported sub-question two.

### **Theme Three: Coping Strategies and Managing Responsibilities**

This theme was identified from responses of participants' statements to interview questions related to Research Sub-Question Three: What coping strategies do female student veterans with disabilities employ in college as related to transition and reintegration experiences? Six sub-themes were identified from the findings and are discussed below. Findings from all three sets of data collected were used to answer this research sub-question.

**Nice environment.** Six participants disclosed that the nice environment at the Veterans' Center located at the study site was motivating and had helped them to cope and manage to excel academically while reintegrating into society. Celia disclosed, "I'm happy with it [college] so far." "It looks like a great place to further [my] education, they are very veteran-friendly, and it doesn't make me feel um uncomfortable or you know ashamed trying to get back in the flow." Jalisia commented, "My experience with the college has been very well." "I really like the Veterans' Center here." Josie stressed, "I really loved the atmosphere." "It's been a very good

experience.” Others felt that it was a good environment, very veteran-friendly, enlightening, and being around the Veterans’ Center and seeing other veterans in college showed that they were not alone.

**Still use military training to help reintegrate.** Six participants revealed how they still use the skills and training they acquired in the military and shared how they had a military mindset and used their military skills on a day-to-day basis. Some of these skills are being a role model, discipline, and being accountable. Six participants affirmed that they had fully reintegrated back into the normalcy of civilian life although they still used military training and skills. Five stated they had not reintegrated and Mona felt as if she may never fully reintegrate back into the civilian life mostly because of her disabilities. “I feel like there is always gonna be that one piece of me like the other half of me still knows so much more than what the average civilian person knows,” remarked Mona. Reatha asserted, “Once a soldier, always a soldier.” “You’ve been kind of acclimated to doing things a certain way for so long.” Four participants stressed that college life was like family, how nice it was to be in college, and indicated that they loved most aspects of college life.

**Prioritize self over school.** Participants’ revealed several strategies they utilized to cope with the challenges of juggling class assignments, personal and family obligations, doctor visits, therapy, managing daily responsibilities, and various other life roles while still reintegrating into society. Four participants shared their coping strategy was to prioritize and place taking care of themselves as their first priority in order to manage responsibilities and cope with their transition, college requirements, and reintegration. Laila proclaimed, “I handled everything one at a time from the most important aspect to the least.” Laila further added that her schedule was very hectic as she attended college full-time and worked two jobs so she had to prioritize her



daily tasks. Reatha had several medical issues and disabling impairments which demanded constant doctor visits and other medical care. Yet, she attended college, cared for her ill husband and an ailing mother with Alzheimer's disease, and managed other responsibilities. Reatha stated, "In order for me to maintain and do all the things like help work, deal with my health issues, family, work, and other tasks, I had to first take care of number one, me." Cathy and Neicey divulged that they must prioritize and take care of themselves first before home, life roles, and everything else. Neicey just wanted her civilian counterparts to understand why she frequently visited the doctor and sometimes could not come to work due to effects of her medications. One participant disclosed that her special counseling offered through veterans' services was her most beneficial coping strategy because of suffering endured from traumatic experiences and difficulty from taking classes on campus. Mona revealed, "Working out really helps; breathing and some yoga; I like to go to group meetings; and I think it is really important to have someone to talk to." Participants' quotes of how they coped and managed responsibilities supported sub-question three as they also revealed strategies that they used.

**Planning and journaling.** This sub-theme was also identified from statements recorded in four participants' journals, individual interviews, and the focus group. Four participants stressed that extensive planning and journaling helped them to cope during transition and tackling college assignments by using a combination of sticky notes, a calendar, and recording different tasks and events. Some used such planning strategies as a daily planner and/or their cell phones to manage their schedules, as well as rising early in the morning to plan their day. Cathy stated that she plans around her work and personal endeavors. Renae reported that she used planning strategies to manage her schedules, such as a calendar, daily planner and/or her cell phone to track events, appointments, and other tasks. Renae expressed that she coped by

rising early to plan and prepare for her day. Celia asserted that her strategies involved considerable planning. She stated, “I actually kept a journal and um sticky notes, and calendar posts, and um, calendar posts, to you know to um plan through my day.” Celia had already persevered through two semesters of college. Mona replied, “A calendar – I [keep] writing things down [and] writing things down, making sure I have dates and times.”

**Determined to persevere.** Three participants revealed that their coping strategy was being determined to persevere with their education despite the challenges they faced and the lack of adequate accessible programs and support for their diverse needs. These female veterans indicated that their main strategy was the need to persevere in college. Jordyn shared that she just used perseverance and “I try to maintain positivity in both my personal life as well as professional.” Mattie revealed that she suffered from both MST and PTSD. She stated, “I see a special counselor now. It hasn't been easy, but I've been doing it.” Her strategy was special counseling to help her cope with personal issues, medical issues, college requirements, manage her responsibilities, and to persevere. Despite her traumatic experiences and other disabling impairments, seeking ongoing health care and counseling, caring for her son as a single mother, and attending classes on campus had been quite difficult for her. Thus far, Mattie had persevered for two semesters. Renae disclosed that her determination to persevere was also her way of coping and managing a busy schedule, family obligations, schoolwork, a full-time job, and other responsibilities. Renae disclosed that she continued to [persevere] and work whenever she could as she got up early and planned her day.

**Individual support systems.** Three participants revealed that they used individual support systems of support to cope, manage daily commitments, and to persevere. Support systems consisted of encouragement and support from family members, veteran and nonveteran

classmates, and friends who helped them to cope with their frustrations, struggles, and other challenges. Participants stated that support of church family and relief from attending church was their coping mechanisms. Jalisia responded, “I talk to my mother, or my sisters or you know a close friend that’s going through something similar...There’s a lot of time when I wanted to give up but having you know a strong support system I think helps.” Jalisia explained how her family and friends supported and inspired her to persevere and remain in college. Renae pointed out that her support system was the military people that she knew within her circle and her spouse. Josie indicated, “I went to church and I allowed my spirituality to really just help calm the stress...I joined the YMCA to help with my health issues and it seemed to help out a lot with the stress and my other medical issues.”

Veterans were groomed to be resilient and strong-willed. Participants provided rich data on how they coped and managed in college, and this related to sub-question three. These female veterans exposed coping strategies used as related to their transition and reintegration. Their strategies consisted of a nice environment at the Veterans’ Center, using military training, prioritizing and putting themselves first, good planning, keeping journals, and encouragement and support from family and friends. The strategies revealed by participants supported research sub-question three as to their coping strategies used and how they managed responsibilities.

#### **Theme Four: Perceived Need for Institutional Support of Veterans**

This theme and four sub-themes evolved from responses to questions related to Research Sub-Question Four: How do female student veterans with disabilities identify the available college resources, support systems, and services as meeting their individual needs? It is crucial that colleges ensure appropriate services and programs are easily accessible and geared toward the special needs of female student veterans with disabilities to motivate their perseverance,

increase their academic success, and reintegration into society. Both negative and positive responses were provided during the interviews when asked their perceptions of the resources, services, and support available for student veterans on campus, and whether they were easily accessible and appropriate to meet veterans' needs. The four focus group participants perceived programs and services at the Veterans' Center and the college as being good and well-established, and they stated that their needs were being met, although all four perceived that more support was needed specifically for females. Nearly all of the recorded entries were repetitive and some statements were overlapping. I repeatedly reviewed, analyzed, and cautiously interpreted data from journals due to the overlapping and repetitive statements and I did not want to destroy significant statements that were the most relevant to interview and research sub-questions. Thematic saturation was attained during data analysis of the journals.

**Need female-specific support and programs.** Based upon synthesized data from all three sets of data, nine participants responded that more support was needed specifically for female veterans. This sub-theme was identified from its high frequency ranking among participants' significant statements, and various responses from these nine participants were significant in supporting the fourth sub-question. Participants stressed the need for female staff, such as female counselors and veterans' representatives because they felt they could better relate to females and would be more comfortable talking to a female. Participants oftentimes felt they were categorized the same as males in regard to college programs and services as if their institutions thought they all had the same needs and problems. Participants reflected in their journals that female veterans with disabilities have different needs than male veterans, although they share similar problems and challenges as male veterans.

Even though the substantial resources and support offered at the Veterans' Center met some of their needs and participants were appreciative, they felt the programs and services were not specifically designed for female student veterans with disabilities. Participants deeply felt that their disabilities caused them to have more special needs requiring more available services and support overall. Only one participant felt services and programs were adequate and geared toward female student veterans who have disabilities. Participants revealed they needed someone to really understand their needs as females because their bodies are different than males. Jordyn explained that her college needs to understand that females have special needs and are different from males, especially female student veterans with disabilities. Celia stated, "We just need someone to really understand um where we are coming from being female." Mona pointed out that services and support are not easily accessible for veterans as access is needed 24 hours a day. Mona declared, "We need to be able to get help 24/7...I don't mean calling and leaving a message for a doctor and wait 24 to 48 hours for him to respond...Our issues are beyond those of a civilian ER [emergency room] DOCTOR!!"

During the focus group session, all four participants repeatedly stated the need for female support and programs which overlapped subthemes identified from other questions. Three participants, Mattie, Neicey, and Mona recorded the need for female-specific services in their journals. Participants attending college at the study site felt the Veterans' Center offered good services and support for veterans that helped them to persevere and remain in college. The participants highly esteemed the center's director, Mr. Mack (pseudonym), for his compassion, hard work, and concern for the welfare and needs of veterans. It was revealed that Mr. Mack was instrumental in establishing available resources and services for veterans at the Veterans' Center wherein staff will assist veterans with class registration, applications, administration of

the Post-9/11 GI BILL, and other services. However, they still perceived the college as lacking adequate programs and support to meet the diverse needs of female veterans.

Ten of the eleven participants voiced the need for programs specifically designed for all female veterans in order to be more connected with them and to have available support specifically for female veterans. A majority revealed that they would like to have monthly meetings to come together to vent, share experiences, de-stress, and support each other. Neicey declared, “There should be a program [for] the female veteran as to when they feel the need to talk to someone or just blow off steam.” “There should be a hotline or just someone to call and talk to.” Jalisia insisted, “It will be nice to have more female like mentorship um you know a group or something or um where you can interact with other female veterans...I’m actually enjoying this focus group.” Participants felt that creating greater connectedness among all female student veterans would tremendously benefit them by helping them to better cope, persevere, increase their academic success, and have a smoother reintegration. These statements tremendously helped to answer research sub-question four.

**Need faculty understanding and support of veterans.** Nine participants gave both negative and positive responses when asked their perceptions of the resources, services, and support provided to student veterans, and whether they were easily accessible and appropriate to meet veterans’ needs. Jalisia boldly stated, “I perceive that the college here, the services, programs, and support systems meet my needs um as far as you know veteran programs and helping to integrate veterans into college life.” Other focus group participants, Neicey, Reatha, and Jordyn agreed that services and programs at the Veterans’ Center and their colleges were good and well-established. The perceptions of participants supported how they perceived

institutional programs and services as meeting their special needs as related to the fourth research sub-question.

Participants felt that faculty still needed a better understanding of veterans and should express to student veterans that they really care about them. Nearly every participant stated that it would be beneficial if all staff would learn more about veterans' programs. Josie asserted, "The faculty and administrators, they need to learn more about the uh veterans' programs." Cathy added, "[The faculty could] use some kind of training to help them to better understand what student veterans with disabilities go through." Jordyn expressed, "With regard to faculty, a lot of them follow the same federal guidelines and the faculty [should be] shall I say more user-friendly specifically for female veterans." Neicey stated, "The faculty of the school, a lot of them are civilians and they can't relate to what we're going through." Celia indicated, "Faculty [should] have classes just to enlighten them on questions that they should ask." Mattie stated, "Let them know that you really care and part of really caring I think is having enough counselors to be able to come in there and talk to the soldiers." Cathy voiced, "I'm just not sure how much training that the staff is getting with regard to handling veterans, especially ones that have PTSD and MST, military sexual trauma."

Reatha, who attended a college other than the study site reported that staff at her college "is very knowledgeable and very good at coping with student veterans who have disabilities." These female student veterans reiterated how they wanted someone to listen to them face-to-face in privacy and show them some compassion. Moreover, these female student veterans with disabilities felt that faculty should care enough to provide needed support, such as guidance and knowledge on classwork as well as challenges they face and what services are available for these student veterans. The participants expressed a need for counselors and veteran representatives to

be accessible on campus and to be knowledgeable of their needs, benefits, programs, and services available for veterans in order to answer their inquiries and assist them when needed.

**A man's world.** Five participants indicated that the military was male-dominated. These female veterans revealed how they were mistreated by males in the military and some had negative experiences with males while in college. The participants felt that female veterans should receive the same services and opportunities as male veterans, although they revealed that female-specific programs were needed. Josie asserted, "There were lots of harassment; male soldiers acted unethically; and the military was male dominated." Mattie proclaimed, "Women neglect to get everything they are entitled to." Reatha expressed, "It's a man's world, and little by little we just have to wait and hope for the best for females, whether we're able or disabled." On a more positive note, one participant, Mona, asserted that she experienced no male dominance in the military or college and male classmates befriended and helped her.

**More support needed for veterans overall.** Three participants revealed that more support overall was needed for veterans across the campus, not just within the Veterans' Center. Jordyn, who worked full-time at the Veterans' Center emphasized, "There's not a whole lot of services that are available for disabled veterans or even veterans period outside of the special populations department [Veterans' Center]...Several things are available for all students, but not specifically geared toward the veteran population." Mona perceived there was a need for "support programs [and] more directions for appropriate rooms, and so forth on campus for disabled veterans." Mattie felt there may be resources available, but many veterans are unaware of where to find them. Several participants stressed that the college needs to have a veteran representative accessible that can answer any questions from veterans in person. It was also mentioned that colleges should ensure entrances to buildings, restrooms, and classrooms are



accessible for veterans with disabilities in wheelchairs and/or scooters which supported sub-question four as to how available services and support met or did not meet their needs.

Participants suggested feedback surveys be offered for veterans to complete which would allow them to voice their comments about what is or is not working for them and other issues. Others felt professional training should be offered to faculty and administrators on the needs of female veterans with disabilities and how to relate to them. Laila pointed out, “I honestly don’t think everything should be geared toward females, but once people go into the school atmosphere they don’t know how to switch over from military to civilian life.” These perceptions and feedback from participants reflected how their responses helped to answer research sub-question four. Participants provided their perceptions of more needed institutional support and services, such as more female-specific programs were needed; although many programs were available for all veterans, faculty needed a better understanding and more support of veterans. Further, more support was needed for veterans overall, and all of these perceived needs for veterans’ services and programs supported the fourth research sub-question.

#### **Theme Five: How Services and Programs Met Veterans’ Needs**

This theme and three subthemes were identified from analysis of synthesized data from all three sets of data related to Research Sub-Question Four: How do female student veterans with disabilities identify the available college resources, support systems, and services as meeting their individual needs? Participants provided their perceptions of the accessibility of programs, resources, and services offered by the Veterans’ Center and across their college campuses. The participants disclosed their perceptions of how available resources and support systems met their special needs, and what improvements or additions were needed.

**Lots of programs.** Seven participants reported their college offered numerous programs, brochures, workshops, and classes for veterans, but most of the participants revealed that available programs were not geared toward females, and nine stated earlier that more female-specific programs are needed. Only one participant perceived that some programs were geared toward veterans' needs. Although seven participants perceived that numerous programs were available, the majority of the participants' perceptions were of services and support offered by the Veterans' Center. Participants felt that more programs and services were needed across the campus for female veterans, not just within the Veterans' Center. Participants also perceived that more accessible services were needed for the handicapped in wheelchairs to meet their special needs and colleges should ensure entrances to restrooms and classrooms are wheelchair accessible. Student veterans may need special support to include wheelchair access across campuses, elevators, desks to accommodate their wheelchairs and/or scooters, and good, quiet study areas for students with PTSD or other disorders.

Jordyn worked full-time at the Veterans' Center and knew more about available programs and services than other participants in the study. This Center provided veterans a host of services and support ranging from assistance with GI BILL applications, inquiries, and other administration, on-site visits by representatives from DVA and service organizations, study areas, a lounge with televisions and computers, and snacks for veterans. I spent many hours there over a four-month period and observed some of the staff working at the center. During every interview, participants articulated their appreciation of Mr. Mack, the director of the center, who was a strong advocate of veterans' welfare and their needs. These female veterans highly esteemed the center and were satisfied with its services and resources. However, a few

participants revealed they disliked some administrative processes and had unmet needs from other services provided by the college.

The four focus group participants perceived programs and services offered at the Veterans' Center as being good and well established. Three of the seven journals reflected positively that some veterans' programs and services were appropriate, although they recorded some services that needed to be added. Reatha's journal entries stated that appropriate programs and services were "good tutoring, being kept informed of campus events and use of the computer lab." Cathy recorded that appropriate programs and services at her college were "wheelchair accessibility, elevators in colleges, desks to accommodate individuals in wheelchairs/motor scooters, and quiet study areas for students with PTSD/MST." Cathy further stated, "The resources, services, and support are easily accessible and they are appropriate to meet my needs at this time." Cathy attended a college away from the study site.

**Staff is helpful.** Four participants revealed more positive responses during the individual interviews that staff was helpful to veterans. All four were enrolled on campus at the study site. Mona asserted, "There is an entire center there solely to help veterans." "All we have to do is to just come up here and someone will help us...It's really nice." Participants enthusiastically voiced their feelings about the resources available at the Veterans' Center and commented on some of the services rendered. These four participants stated that great resources were available for veterans, numerous brochures and information posted around the campus and on the website about services and programs, and staff were available. Jalisia stated,

The people working here work very hard you know to meet students' needs and it's convenient for students when services are brought to you...There hasn't been a time where I um asked a question and somebody said I don't know.

**Staff is not helpful.** On a negative note, four participants revealed that staff was not helpful. Of the four, two of them attended college outside the study site which may have some bearing on the difference in responses. In general, participants felt there was not a sufficient amount of information available to veterans across the campus. Even though many workshops, classes, and other resources may be available, some veterans may not know how or where to go, or may not be physically able to access needed services. Reatha declared, “I don’t feel that the services are easily accessible...It would be a lot better if the students could go in and talk to someone in person.” These student veterans with disabilities realized that other veterans who have disabilities have special needs and may need special assistance to access resources and services which could be partly why participants feel staff is not always helpful. Mona summed it up with these remarks:

A lot of these vets [veterans] are still in soldier mode...There are so many things that could be fixed, things that could really help, but there isn’t enough funding or money in our pockets to really take care of all the veterans.

Although participants felt that substantial programs and classes were currently accessible for veterans, they revealed that programs were not geared specifically to serve the needs of female veterans. Many veterans’ programs were provided by the highly esteemed Veterans’ Center, but not across the campus as needed. About half of the participants felt staff was helpful and the other half felt staff was not helpful in providing veterans’ services. Revealing their perceptions of how programs and services met or did not meet female student veterans’ needs, strongly supported answers to research sub-question four.

Other support and services were perceived as needed for veterans, but were not discussed as subthemes which included more one-on-one interaction between staff and veterans, job

placement services, hands-on help, and improved administrative procedures. It may be helpful to readers to know that more codes evolved from participants' statements about their experiences as related to this phenomenon of female student veterans. Some codes were not explained in-depth because the frequency of codes used was not high enough to justify using them as subthemes. Some codes were less relevant to the interview or sub-questions that guided the study. It should not be assumed that participants' statements were not significant to the well-being, perseverance, academic success, and reintegration of these female student veterans with disabilities.

### **Summary**

This chapter presented a description of participants, results of data analyses, and identified themes. Data analyses of the three sets of data collected from individual interviews, a focus group, and journaling resulted in five themes being identified. The themes were presented and explained with the applicable research sub-questions. Findings synthesized from all three sets of analyzed data provided answers to the four sub-questions and the central research question: What are the transition experiences of female student veterans with disabilities entering college during reintegration into society?

Deeper insight of the perceptions and experiences of participants evolved throughout all phases of the study. Participants experienced challenges with transitioning, college entry, and managing life roles, and also suffered reintegration pains. Some of these student veterans were single moms and juggled family commitments, school requirements, doctor visits, and other life roles while still reintegrating. The participants stated that they had special needs specific to their gender because their bodies are different than males which warranted specific services and support from faculty and other student services. Every participant attending Cumbersome Community College, except for one, stated that staff needed to interact with veterans, better

understand them, and learn how to support them. Chapter Five presents a summary and discussion of the findings, answers to the four research sub-questions, implications and limitations of the study, recommendations for future research, and concludes with a summary of the chapter.

## **CHAPTER FIVE: DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS**

### **Overview**

The purpose of this qualitative transcendental phenomenological study was to explore and describe the lived experiences of female student veterans with disabilities entering higher education during reintegration in order to improve programs, services, and support available to female student veterans with disabilities. This chapter presents a summary of findings, a discussion, theoretical and practical implications for practice in higher education, limitations of the study, and recommendations for future research. The chapter concludes with a summary.

### **Summary of Findings**

Data were read, transcribed verbatim, interpreted, and coded separately for each of the three sets of data. Significant statements were identified and coded separately for all data sets collected through individual interviews, a focus group, and journals. Five themes and numerous sub-themes were identified from responses to questions guided by the four research sub-questions during all phases of data collection. The central question of the study was: What are the transition experiences of female student veterans with disabilities entering college during reintegration into society? Each of the four sub-questions are presented and briefly answered.

### **Research Sub-Question One**

Several factors evolved that influenced participants to enter or reenter college. Factors that influenced these female veterans with disabilities were the desire to be positive role models for family members, change of careers, lifetime goals, educational entitlements of the Post-9/11 GI BILL, and education was viewed as important. Some participants stated more than one factor influenced them to enter college and some duplicated responses given by other participants as motivating them to pursue an education.

Three participants stated their desire to be a positive role model and to set the bar for family members to pass onto future generations influenced them to enter college. Others entered college because they wanted a career change, and not just another job. Completing their education was important and had been a lifelong goal for some others. Being determined to finally finish what they started was identified from significant statements and also in response to a different interview question. Participants were full of excitement and their positive moods were quite obvious as I observed these female veterans with disabilities express such enthusiasm when responding to the interview questions. Surprisingly, only three participants decided to pursue an education to use the generous educational benefits of the Post-9/11 GI BILL. One could presume that the Post-9/11 GI BILL would be a great motivator for veterans to enter or reenter college. This GI BILL attracted a flood of veterans to pursue a college degree.

### **Research Sub-Question Two**

I explored how the emotional and social needs of female student veterans with disabilities affected their perseverance to remain in college. Participants voiced that their own strong determination to persevere coupled with social support from other nondisabled student veterans, veterans with disabilities, and nonmilitary classmates motivated them to persevere and remain in college. These female veterans voiced how they related better with other student veterans than nonveteran students because they were accepted and more comfortable being around them.

Ten of the eleven participants identified strongly with other student veterans and eight shared similar experiences with classmates. Participants described how using veterans' programs and sharing their experiences and personal issues with other veterans that had endured similar experiences helped them to cope and persevere in college. Over half of the participants reported they received emotional and social support from veteran classmates and four others stated they



were treated well-respected by veteran and nonveteran classmates. Four reported that the various veterans' services offered at the Veterans' Center had helped them to persevere while reintegrating into the civilian sector. Three female student veterans stated that having satisfaction from finishing something motivated them to persevere and continue their education. One revealed that constant interaction with civilian classmates was very helpful and she was not treated differently. Her classmates showed concern over her having PTSD and other medical issues, checked to see how she was doing, and offered their support. Participants' provided intense responses of how their social and emotional needs were met through the support of nonveteran and veteran classmates. They were inspired to persevere in college while reintegrating back into society which supported and answered research sub-question two.

### **Research Sub-Question Three**

I explored the coping strategies that female student veterans employed as related to their transition and reintegration. Females who transition from the military to college campus need a balance between academic requirements, work, and personal responsibilities which corroborates some of the findings in the literature about challenges and problems faced by female student veterans. Participants revealed several coping strategies they employed to juggle parenthood, work, health care needs, stress, and other responsibilities while fulfilling school requirements. Using such strategies as prioritizing and putting their well-being first, venting and pampering themselves, nice environment at the center, use of military training to help them reintegrate, and having a strong determination to persevere were good strategies that they employed. Using support systems, on-campus veterans' services, good planning and journaling, special counseling, and managing time more wisely helped them to better cope and persevere despite their disabling impairments, pain, stress, and other issues.

While six participants stated they had fully reintegrated, five disclosed they had not totally reintegrated into civilian life. Some felt as if they may never reintegrate or it could be a long time because of past trauma, the nature of their disabilities, psychological, social, and physical problems. Yan et al. (2012) suggested female veterans “are more likely to report negative reintegration experiences than men and it may be more complicated for female veterans due to having multiple life roles” (p. S549). As indicated by findings of my study, participants experienced different challenges and issues, and they reported negative college and reintegration experiences which could have been the result of fulfilling multiple life roles as corroborated in the review of literature.

#### **Research Sub-Question Four**

An exploration of how participants identified available college resources, support lots systems, and services as meeting their needs resulted in both negative and positive responses throughout the data collection process. Participants felt a substantial number of programs for student veterans were available through the Veterans’ Center, but not across the campus, as I intended to gather descriptions of all available services on campus. Further, participants felt the available programs were not specifically geared toward female student veterans with disabilities. Seven participants positively voiced the college environment was nice, enlightening, and veteran-friendly, and staff was helpful, while some responded negatively that staff was not helpful, faculty needed to better understand and support veterans, and military and college life was male-dominated. Nearly every participant stated it would be beneficial for all staff to learn more about veterans’ benefits and available programs. These female veterans felt their needs were greater as female veterans with disabilities which required more resources, services, and

support. The responses provided were helpful and supported the identification of this theme and helped to answer this sub-question.

Some female veterans with disabilities have greater needs than others depending upon the nature of their disabilities, personal problems, past experiences, and other issues. Nearly all participants voiced their desire to establish greater connectedness among female veterans. The participants articulated a need to hold monthly support meetings to allow female veterans to gather and vent, de-stress, build camaraderie, and to support each other. They felt generating a greater sense of community and connectedness among female veterans would tremendously benefit them by helping them to better cope, persevere, increase their academic success, and possibly have a smoother, quicker reintegration.

Some student veterans with disabilities require special assistance and handicap accessible services. Some participants stated wheelchair access across campuses, desks to accommodate wheelchairs and scooters, and good, quiet study areas were needed. Participants disliked some of the administrative procedures, and some felt challenged from being older, nontraditional students. Some participants felt that faculty do follow rules and they received good support overall from faculty. However, they all voiced their admiration and high esteem of the services and support provided by the Veterans' Center and its director who was a highly committed advocate for all veterans' well-being. Participants stated colleges should offer social and academic support to enhance female veterans' adjustment to college and to boost their perseverance and academic success. Colleges should improve and/or add appropriate services, programs, and support systems and evaluate them regularly to ensure they meet physical, social, psychological, and academic needs of female student veterans with disabilities and all student veterans.

## Discussion

The goal of the study was to identify accessible services, resources, and support systems that need to be enhanced or added to better assist female student veterans with disabilities and to inform stakeholders in higher learning institutions of these findings. The participants of the study consisted of a homogenous group of 11 female student veterans with disabilities that were not easily visible as compared to the person with the more obvious disabilities of a missing limb or loss of an eye. The type or nature of participants' disabilities was not a factor in this study. Some veterans voluntarily self-identify their disabilities, traumatic experiences, and disorders that occurred in the military which can range from PTSD and MST to physical injuries and illnesses. Less is known about PTSD in female veterans than male veterans who served in support OEF/OIF because of scarce research (Carlson et al., 2013). Most participants revealed they had a disability but did not disclose the nature of their disability. No veteran should have to deal with conflict about their military experiences or be intimidated to respond to questions about those experiences, regardless of their disability, military status, or position (Ackerman et al., 2009).

I examined factors that influenced female student veterans with various disabilities to enter college, sometimes as older, nontraditional students, how their emotional and social needs drove them to persevere in college, coping strategies, and how they perceived college programs and services as meeting their needs. Some factors that motivated these female veterans with disabilities to enter college were to be a role model for family, change their careers, use benefits of the Post-9/11 GI BILL, lifetime goals, and education was important. Moreover, past research showed that the Post-9/11 GI BILL played a role in veterans' decision to enter or reenter college as it still offers extremely liberal educational benefits to qualifying veterans (Cook & Kim, 2009;

Stripling, 2010; Vacchi, 2012). A review of literature showed different factors can affect a person's decision to enter college to include finances, accessibility, family obligations and background, college demographics, type of college, and quality of life (Lee et al., 2013). Burnett and Segoria (2009) and Ostovary and Dapprich (2011) indicated some of the challenges student veterans may face upon college entry were tedious administrative tasks, inadequate access to educational benefits and aid, delays in GI BILL payments, and stressful environments.

I explored how emotional and social needs of female student veterans with disabilities could drive their perseverance to remain in college. The participants' strong determination to persevere along with social and emotional support from other student veterans with and without disabilities and nonmilitary classmates supported and motivated them to persevere in college. The camaraderie that exists among veterans because of commonalities and experiences they shared can compel a strong united force of never-ending friendships among veterans. The female veterans related better with other student veterans than nonveteran students as they were accepted and more comfortable around each other. The student veterans strongly identified with other student veterans, shared similar experiences and received their support, were treated well, and were respected by veteran and nonveteran classmates, all of which inspired them to persevere and continue their education.

I examined coping strategies employed by female student veterans in college as related to their transition and reintegration experiences. The challenges faced while transitioning from the military and entering college are many, and the special needs of student veterans may vary based on their interests, qualifications, and academic goals (SVA, 2012). Participants voiced how they identified strongly with other student veterans, shared similar experiences, and veteran and some nonveteran classmates respected and supported them. Past research showed that student veterans

can face problems upon entering college, such as family hardships, financial worries, anxiety, health care, PTSD, and issues stemming from multiple life roles (Baumann, 2013; Rumann & Hamrick, 2009). Despite the challenges, female veterans still managed to persevere and juggle school, work, doctor visits, parenthood, and other obligations.

Findings from my study corroborated past research about females facing challenges and problems as participants described some challenges and problems that they faced. The lack of strong support from post-secondary institutions can increase worries and negatively impact student veterans' perseverance. Participants revealed coping strategies they employed to manage life roles and other responsibilities while fulfilling college requirements. These strategies consisted of prioritizing and putting their well-being first, venting and pampering themselves, being in a nice environment, using military training to help them reintegrate, good planning, time management, a strong determination to persevere, support systems, and veterans' services. As my findings indicated, participants experienced different challenges and issues and they reported negative college and reintegration experiences. According to Yan et al. (2012), female veterans are "more likely to report negative reintegration experiences than men, and it may also be more complicated for female veterans due to fulfilling multiple life roles" (p. S549). These findings revealed a need for further investigation of female veterans and female student veterans with disabilities. This area of focus should undeniably be further explored, and female active duty service members should also be included in future research.

Lastly, I examined how female student veterans with disabilities identified available college resources, support systems, and services as meeting their individual needs. Females are quite different from males with their own special needs and studies have shown that female veterans' college experiences are usually different from male veterans (Patillo, 2011). Learning

participants' perceptions of available programs and services could disclose which programs and support systems are appropriate to meet student veterans' needs and could also lower retention troubles (Rumann & Hamrick, 2010). Informing faculty, policymakers, and other stakeholders of improvements needed for current services and programs can also inform them of programs and services needed to attract, retain, and serve student veterans.

The support of both military and civilian classmates and the availability of services and support at the Veterans' Center tremendously helped most of them to adapt and attempt to reintegrate into civilian life. Participants strongly emphasized the need for female veterans' representatives and female-specific programs geared toward the needs of female veterans. Participants felt faculty and staff needed professional training. However, Cook and Kim (2009) reported that less than half of post-secondary institutions with veterans' programs provided professional development activities for staff. Student veterans perceived more support, counseling, and face-to-face interaction and communication between faculty and female student veterans are needed to assist veterans. To enhance student veterans' adjustment and to be more academically aligned, colleges should provide more social support for female veterans with disabilities as suggested by Baker and Robnett (2012). Higher learning institutions need to improve and/or establish appropriate programs and services for female veterans with disabilities and assess them regularly to ensure they meet the psychological, social, physical, and academic needs of female student veterans with disabilities and all student veterans.

### **Theoretical Implications**

Findings of the study can inform practices of post-secondary institutions and provide a better understanding of the diverse needs and hardships faced by female student veterans who have disabilities. The Four-S System of Schlossberg's transition theory is consistent with

participants' transition experiences as reported in findings of the study. Following is a brief explanation of these implications.

### **Transition Theory and Four-S Model**

Schlossberg's transition theory of her Four-S model provided a framework to explain female student veterans' transition and their ability to cope with changes resulting from a transition. The Four-S model identified four key factors that affect one's transition: situation, self, support, and strategies. A person's own features within these four factors determine how they cope with transitioning which can vary with each individual based upon their perceptions, setting in which it occurs, and how their lives are affected (Anderson et al., 2012; Schlossberg, 1981). These student veterans' situations, their individual stress and challenges faced, level of support received, and strategies used influenced how they coped and how their routines, relationships, and roles in life changed with their transitions.

As emphasized by Anderson et al. (2012), transitions can cause stress, uncertainty, anxiety, and confusion influenced by the extent of the person's coping sources. These conditions were reported in the findings of the study. Following are brief descriptions of the four factors, their effects on an individual's transition, and their influence on the college environment.

**Situation.** The intensity of stress, feeling of isolation, challenges, past experiences, and other events occurring in one's life while undergoing a transition can affect its success. Some of the participants were either single mothers or their spouses were deployed which can be stressful and challenging in and of itself. Participants indicated how current life events, personal issues, financial problems, health concerns, and the stress incurred with transitioning from the military posed more challenges for them. Some participants divulged that some of these issues still existed which could negatively impact their coping, perseverance, academic success, and



reintegration. What generated the transition, the amount of and whether the veteran has control over the transition, and the length of the transition are elements that affect how one copes and perseveres, and how veterans may change with the transition.

**Self.** The female veterans' own personal resources, assets, demographic qualities, and other characteristics can affect how they deal with transitioning. These factors can also affect their desire to persevere. Participants shared some commonalities in that they all had disabilities, most of them were single mothers, juggled life roles, family obligations, worked one or two jobs, and they had health issues. The college environment can pose challenges and when coupled with other factors, student veterans' academic success can be negatively impacted.

**Support.** The level and different types of social support received can positively influence how well female student veterans with disabilities cope and respond to the transition. Social support may be provided by classmates, faculty, or others within the college environment or from family, friends and other loved ones. Participants discussed how their family members, and veteran and/or nonveteran classmates supported them when needed. Thus, it is crucial that colleges have adequate support systems accessible for veterans.

**Strategies.** Coping strategies employed can influence how these female student veterans cope and manage their responsibilities and what changes occur in their routines, relationships, and life roles after the transition (Anderson et al., 2012). As stated in the summary of findings, female student veterans used various coping strategies that they believed helped them to persevere and manage their responsibilities. Some of these strategies were: setting priorities, placing their well-being first, pampering themselves and venting, a strong determination to persevere, use of past military training to help reintegrate into society, support systems, veterans' services, good planning, and managing time wisely. The accessibility to appropriate college

resources and programs and using good strategies helped these female veterans to better adapt, persevere, and attain their educational goals despite the changes in their routines and life roles after transitioning.

### **Social Cognitive Theory (SCT)**

Bandura's SCT theory of observation and social modeling suggested that individuals learn by observing the actions of others and the consequences of their actions, but may not model the actions or behavior until it will result in the most favorable outcome (Malone, 2002). A person's skills, knowledge, and values can be transferred by social modeling thereby promoting personal and shared efficacy; while observation can influence one's self-development and adaptation, they learn self-efficacy, values, and self-regulated principles that can build their self-worth and self-assurance (Bandura, 2003). Participants responded that they observed, understood, identified, and interacted with other veterans, and the support of other veteran and nonveteran classmates attributed to their coping and perseverance in college. Thus, Bandura's SCT theory of observation and modeling can be instrumental in helping female student veterans to better cope with the demands of college as with those they observed so they can persevere until their goal completion, and have a smoother reintegration.

### **Practical Implications**

The increased enrollment of veterans necessitates that higher education institutions better understand the importance of veterans' perceived support and service, and respond to their special needs and disabilities in order to adequately support and retain them, and increase their academic success (Ingala et al, 2013). Findings can serve to inform college administrators, faculty, student services, veterans' services, and other stakeholders on what services and support systems are needed to better support female student veterans with disabilities to help increase

their perseverance and academic excellence. Findings can also provide stakeholders in higher education institutions an understanding of the problems these student veterans face to compel them to take action to assist these student veterans and ease their transition from the military, increase their persistence, and completion of their education (Ackerman et al., 2009). A major implication that applies to all stakeholders in educational institutions is female veterans should be respected, appreciated, and treated equally as male veterans and the general population of students as they articulated their desire to be respected and acknowledged as women. Following are specific recommendations for offices of veterans' affairs and veterans' centers, faculty, administrators, student affairs, and disability services based on themes identified during data analysis.

### **Recommendations for Offices of Veterans' Affairs and Veterans' Centers**

It is not intended for readers to perceive that on-campus Veterans' Centers and/or Veterans' Affairs Offices have to assume sole responsibility and accountability for ensuring the needs of female student veterans are met because of the focus of the study. The themes revealed that participants highly esteemed and expressed their appreciation of Mr. Mack, director of the Veterans' Center at the Cumbersome Community College. These female student veterans voiced their appreciation and satisfaction with accessible services and resources provided at the center. However, participants felt specific programs should be established that are geared more toward females and strongly expressed a need for female-specific programs. Participants expressed a desire to hold monthly meetings for all female veterans to come together on campus to relax, vent, share experiences, and build camaraderie among the female veterans. It is recommended that veteran representatives and counselors be accessible on campus and learn the available

veteran benefits and program in order to answer veterans' inquiries and to adequately assist them as needed.

### **Recommendations for Faculty**

Four participants reported the staff as being helpful and four stated that staff was not helpful. Only a few participants reported they liked the instructors. Faculty need to understand student veterans' needs, problems, and disabilities, such as effects of PTSD, and memory, awareness, and attention difficulties. These participants reported they need someone to really understand their needs as females, and counselors are needed because some veterans are still in soldier mode and pretend they are normal. Findings showed that faculty needs to be more patient, listen to veterans, and frequently communicate and interact with female student veterans with disabilities face-to-face to help motivate them to persevere and ensure they are provided appropriate support when needed. Findings disclosed that some participants were sensitive and fragile psychologically with more traumatic experiences than others, while some were stronger physically even though they all suffered with disabling impairments and pain. Hence, it is imperative that faculty is cautious of what they say about veterans and their military service and be sensitive to the needs and feelings of veterans with disabilities to prevent possible outbursts due to PTSD or effects of other trauma (DiRamio et al., 2008). Professional training and development should be offered to faculty and administrators on the special needs, disabilities, and health issues of student veterans in order to better understand and relate to them.

### **Recommendations for Administrators**

Although administration was not the focus of my study, participants were asked their perceptions of resources, services and support at the college, whether they were easily accessible and appropriate to meet their needs, and any needed improvements. Participants perceived the

collegiate environment as being nice and comfortable. Findings revealed that participants did not like the administrative process required to enroll in college and some admitted the Post-9/11 GI BILL application was difficult to complete. It is recommended that administrative processes of college enrollment and GI BILL applications be reviewed and that staff assist student veterans with administrative requirements that are tedious and difficult to complete.

### **Recommendations for Office of Student Services**

The Office of Student Services should be familiar with the problems and special needs of female student veterans with disabilities to provide them with the best possible assistance when needed. Participants need to be respected and understood as females, and for faculty, administrators, and policymakers to know that their bodies and needs differ from males. Single female veterans with children also need more understanding, patience, and assistance, such as childcare and facilities equipped to provide care for children. Further, the Office of Student Services should consider the feasibility of sponsoring a system of outreach services to interact with student veterans.

### **Recommendations for Offices of Services for Veterans with Disabilities**

The themes identified reflected that colleges need to ensure that main entrances to buildings, classrooms, restrooms, and service areas, such as bookstores and cafeterias, are accessible for all nonveterans and veterans with disabilities in wheelchairs and/or scooters. Participants voiced their opinions and suggested that feedback surveys for veterans be offered so they could disclose what is or is not working for them and also other issues. Participants felt more assistance was needed for single female veterans with children. Some felt professional training should be offered to faculty and administrators on the needs of female student veterans and how to better relate to them. Findings of the study indicated participants faced challenges,

problems, and frustrations, and revealed that they had special needs which are consistent with past research shown in the literature review. Nonveteran and veteran students with disabilities both pose major challenges for higher learning institutions that provide programs and support services designed more for traditional students. Institutions may have to redesign their programs and services for female veterans with disabilities and additional services and support programs may be needed to ensure their needs are appropriately met.

Participants stated they have different needs, experiences, and perspectives than traditional students that require special services and support systems as suggested by Burnett and Segoria (2009) and Madaus et al. (2009). It is recommended that institutions of higher education support female student veterans by deliberately establishing services and programs, creating female student veterans' support groups on campus, and cohesively working with faculty and support services to connect females with female-specific programs. It is also recommended that programs be created to engage and support more female student veterans with and without disabilities to promote more awareness of their needs, problems, and challenges faced, and to provide a greater sense of community among female veterans.

### **Limitations**

Limitations of a study are factors that could influence the results of the study and affect the generalizability of the findings. Limitations of the study are:

- Findings may not be generalized to certain veteran student populations. The experiences of female student veterans with disabilities were explored at one community college campus, even though three participants' experiences were explored who were enrolled at three different community colleges.

- Findings may not be generalized to some other colleges, especially four-year colleges and universities.
- Findings may not be transferable to males and veterans who have no disabilities as only the experiences of female student veterans with disabilities were explored.
- Some participants may not have reported the whole truth about their military and transition experiences or true perceptions of college services and support. This could have occurred due to past traumatic experiences, might have been too painful to discuss or could not recall because of lapsed time since exiting military.
- Possibly some researcher and/or participant bias because as the researcher, I am a 100% disabled veteran and I am well aware of the effects of veterans' disabilities.

### **Recommendations for Future Research**

Future research to explore female student veterans who have disabilities of PTSD, MST, or other psychological disorders, ongoing college perseverance, and reintegration into society needs to be conducted. These institutions should be prepared not only to attract veterans to enroll in their institutions, but have a good understanding of their special needs as females and the psychological, physical, and social disorders of all veterans that can develop while in the military. The effects of PTSD, MST and other disorders, injuries, and combat experiences of their perseverance and academic success could cause ongoing problems with veterans, faculty, and other students. The lack of adequate services, support and resources to serve all female student veterans can affect their behavior, ability to cope, responses to daily situations, academic success and hinder their reintegration into society. Understanding their special needs will help institutions to design the appropriate services, programs, and support systems to accommodate all student veterans. Thus, it is critical that further research be conducted in an effort to better

support and inspire these student veterans to learn coping tactics and persevere in college so they can excel academically and socially and have a smoother, quicker reintegration into society. In regard to findings, limitations, and delimitations of the study, following are recommendations for future research.

- Conduct further research of college programs, services, and support systems provided for veterans to determine their effectiveness and influence on students' perseverance, performance, and academic success.
- Conduct research to explore PTSD of female student veterans who served in support of OEF/OIF wars and how it affected their reintegration into society.
- Explore the physical, psychological, and social problems experienced by female veterans after transition to determine how their perseverance and academic achievements were affected.
- Further explore female student veterans' perceptions of institutional programs, services, and support systems to ensure they are appropriate and effectively serving the needs of all female veterans.
- Conduct research of institutions of higher education to determine if they effectively support female student veterans' complex transition from the military to college.
- Conduct further studies of female veterans with disabilities attending two-year and four-year educational institutions to better understand their complex transition from military service to college, their perseverance, and reintegration experiences.

### **Summary**

My intent was to provide a worthy contribution to the field of education. Female veterans have different needs because of the physiological composition of their bodies that are



unique to males and nonveterans. The 11 female veterans with disabilities in the study provided several lenses through which to explore their transition to college experiences, perceptions of their college environment, its services, programs, and support, and challenges and problems encountered while reintegrating into society. Readers should understand the participants' experiences and perceptions presented are not exclusive and representative of all female veterans with disabilities.

Past studies have shown there can be many problems, stressors, and effects of PTSD, other disorders, trauma, and injuries incurred while serving in the military of which veterans entering college can also suffer from these issues according to Carlson et al. (2013) and Graf et al. (2011). After entering college, these female student veterans faced new challenges that added to their struggles which could have tremendously impacted their perseverance and completion of educational goals. However, as Bandura (2003) proposed in his SCT theory of social modeling and observation, the interacting, observing, and sharing common experiences of other veterans, could help to provide strategies to persevere. Schlossberg's Four-S system presented four key factors: situation, self, support, and strategies to explain how one's features of these four factors can reflect how female veterans with disabilities cope with transitions depending on their perceptions, circumstances, and how their lives are affected.

Implications for practice specifically for faculty, administrators, and offices of veterans' affairs, student services, and disability services were presented. Future recommendations were also presented to assist higher education institutions in evaluating their programs and services to determine their effectiveness and whether they can appropriately accommodate the needs of female student veterans with disabilities. These student veterans indicated they had accessible and appropriate services provided by the Veterans' Center at the study site, although they all

highly stressed the need for female-specific support and services. Because of limited recent studies on female student veterans with disabilities, findings of the study can serve to inform higher learning institutions of veterans' special needs and the services and support needed to appropriately accommodate them, help them to persevere, and to attain their educational goals.

These female student veterans voiced their needs for specific services and programs that they deserve after making personal sacrifices, leaving their families behind, and putting their personal needs, dreams, and goals on hold to defend their country. As emphasized by Baechtold (2011), "female veterans want to be appreciated, respected, and acknowledged as a person; and recognized as the women they are" (p. 80). The participants wanted to pursue their education to become more marketable because they also gave of themselves and paid a price far greater than anyone might be able to imagine. These female student veterans with disabilities expressed a desire to come together and create a sense of community and connectedness to share experiences, vent, and gather strength from each other so they can be more successful academically and perhaps, totally reintegrate into the normalcy of civilian life.

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## **APPENDIX A: Researcher Personal Transition and Reintegration Experiences**

I am a 100% disabled veteran. I served in the United States Army and Army Reserve for nearly 31 years which was instrumental in motivating me to choose this phenomenon for my dissertation research. I counseled hundreds of soldiers prior to exiting the military and also many veterans that were members of the National Guard and Army Reserve as part of their pre-deployment and post-deployment briefings. I experienced many challenges and had to overcome many obstacles during my military service. Some of these challenges included: competing for rank and duty positions; harassment from male superiors and peers; gender and racial biases; learning new jobs and duty responsibilities for career progression; and loss of many military friends and families. However, I strongly believe that these experiences made me stronger and more persistent to endure the challenges that I faced when I transitioned from the military to the college environment. I enrolled in college after exiting the military while still reintegrating into society following both of my discharges from military service. I had some positive experiences, and I was allowed to nurture and assist others in need of which I feel have enhanced my capabilities, integrity, resilience, perseverance, and respect for others, and greatly benefited me throughout the study. I am grateful to God for providing me the courage, strength, and ability to persevere, and for showing me my strengths and weaknesses. For that which hindered me temporarily, did not stop me, it truly made me much stronger and more determined to persevere.



**APPENDIX B: Liberty University IRB Approval Letter**

May 22, 2015

Beverly T. Williams

IRB Approval 2193.052215: Exploring the Experiences of Disabled Female Student Veterans Entering Higher Education during Reintegration: A Phenomenological Study

Dear Beverly,

We are pleased to inform you that your study has been approved by the Liberty IRB. This approval is extended to you for one year from the date provided above with your protocol number. If data collection proceeds past one year, or if you make changes in the methodology as it pertains to human subjects, you must submit an appropriate update form to the IRB. The forms for these cases were attached to your approval email.

Thank you for your cooperation with the IRB, and we wish you well with your research project.

Sincerely,

**Psy.D.***Professor, IRB Chair***Counseling** 

*Liberty University | Training Champions for Christ since 1971*

## APPENDIX C: Recruitment Letter to Invite Potential Participants

Date \_\_\_\_\_

[Name of Potential Participant]

[Address 1]

[Address 2]

[Address 3]

Dear Participant:

As a graduate student in the School of Education at Liberty University, I am conducting research as part of the requirements for a Doctorate of Education degree. The purpose of my research was to allow female veterans with disabilities to speak out and share their experiences of transitioning from the military into college while reintegrating into society. I am writing to invite you to participate in my study.

To participate, you must be a female, student veteran, with at least a 20% disability rating approved by the Department of Veteran Affairs; have completed at least one semester of college, or have recently graduated within six months of the study, or, if no longer enrolled, and were enrolled within six months prior to the study. No combat service is required and active duty service members are excluded in the study. If you are 18 years of age or older and willing to participate in the study, you will be asked to attend an individual interview, a focus group discussion, and maintain a journal over a four-week time span. It should take approximately four to five hours for you to complete the research procedures. Your name and/or other identifying information will be requested as part of your participation, but your identifying information will not be used in the dissertation.

To participate, please read and sign the attached informed consent document or complete it online and return both of these documents *to me by email to:* [REDACTED] You may access the consent document online at: <https://docs.google.com/document/d/1lyk-WaDiGZtItFHWm5YWtQz58VVtz6hWuIZdFveS5HI/pub>

The consent document contains additional information about my research. Next, you should complete the attached screening questionnaire or complete and submit it online using the following website: <https://docs.google.com/forms/d/15BqqEFRWckNmIAGMDXuSwhX-20MIb6ufQiJwhU48uVs/viewform>

Please remember to complete and return the consent document before completing the screening questionnaire. You may contact me to schedule your individual interview at [REDACTED] or email me at [REDACTED]

Sincerely,

[REDACTED]

Liberty University Graduate Student, Researcher

BSBA, MPA, Ed.S

## APPENDIX D: Screening Questionnaire for Participants

(The informed consent form must be completed prior to completing this questionnaire.)

1. Are you a student in any institution of higher education? If so, what is the name of your institution?
2. Have you completed at least one semester of college?
3. What is your academic status and college major?
4. What is your race and ethnicity?
5. What branch of service did you serve in and how many years did you serve?
6. Were you ever exposed to combat?
7. Are you willing to voluntarily participate in the study of the military transition and college experiences female veterans with disabilities?
8. Are you willing and able to share your transitioning and college entry experiences while reintegrating into society?
9. Would you like to share what it was like being a female in the military?
10. Have you ever desired to express your perceptions about your military experiences?
11. Are you willing to speak out and help make college life better for other females and veterans?
12. Do you have a disability rating of at least 20% that has been approved by the Department of Veterans Administration?

You may opt to complete this questionnaire online at: <https://docs.google.com/forms/d/15BqqEFRWckNmIAGMDXuSwhX-20MIb6ufQjJwhU48uVs/viewform>

Additional Notes:

Your signature below acknowledges that you agree to participate in all phases of the study and grant permission to audio or videotape interviews, observations, and focus group sessions.

Your response is needed as soon as possible. You may reply to my email address above or return this completed form to the Students Veterans Services Center. You should keep a copy of this consent form and any fact sheets that you may receive about female veterans with disabilities.

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature of Participant \_\_\_\_\_

Email address (voluntary) \_\_\_\_\_

Sincerely grateful,

\_\_\_\_\_

Liberty University Graduate Student, Researcher  
BSBA, MPA, Ed.S

## APPENDIX E: Informed Consent Form

The Liberty University Institutional Review Board has approved this document for use from May 22, 2015 to May 21, 2016 Protocol # 2193.052215

Exploring the Experiences of Disabled Female Student Veterans Entering Higher Education during Reintegration: A Phenomenological Study

Beverly Williams  
Liberty University  
School of Education

You are invited to participate in a research study of your experiences transitioning from the military and entering college during reintegration into society. You were selected as a possible participant because you are among a group of veteran peers whose participation is crucial to this study. I ask that you read this form and ask any questions you may have before agreeing to participate in the study. Beverly Williams, a doctoral candidate in the School of Education at Liberty University is conducting this study.

### **Background Information:**

The purpose of this study is to explore and answer the primary question: What are the experiences of disabled female student veterans entering college during reintegration? The purpose of this research is to allow disabled female student veterans to have a voice and speak out about their transition from military service and decision to enter college while reintegrating into society.

### **Procedures:**

If you agree to participate in this study, I would ask you to do the following things: First, read and sign this consent form to acknowledge that you understand the purpose of the study and other terms stated on the form. You must complete the screening questionnaire at least one week prior to the study. You will be interviewed initially at your college or another convenient location, and the interview should last from 30 to 45 minutes. The interviews will be audio recorded and later transcribed. You will have the opportunity to review the transcript of your interview for accuracy and your feedback. You will be asked to participate in a focus group discussion, which may last approximately one hour and also to record entries in a journal for up to four weeks. All phases of the research should take approximately four to five hours and will occur at different times.

### **Risks and Benefits of being in the Study:**

The study has several potential risks but does not involve more than minimal risks. The risks to you in completing this study are no more than what you would encounter in everyday life. While collecting data during the study, personal information could be revealed to the researcher that necessitates specific reporting requirements. Should the researcher become privy to information that

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triggers the mandatory reporting requirements, such as child abuse, child neglect, elder abuse, or intent to harm self or others, the researcher will protect participants' safety and confidentiality; and will report such information to the Director of Veterans Services on campus and comply with their guidelines. Depending upon its seriousness and nature of the information, I will report it to appropriate authorities. Some psychological risks could evolve. If significant psychological risks to participants should evolve during the study, I will terminate the respective participant from further involvement in the study.

There are no direct benefits for your participation in the study. However, this study can provide a unique opportunity for you to share your input, which could influence other disabled student veterans to persevere and increase their academic excellence, helping them to have a smoother reintegration and a better life style. Findings from this study can also lead to improved services, programs, academic support, and other benefits to student veterans, colleges, and to society.

**Compensation:**

You will receive no financial compensation for participation in this study.

**Confidentiality:**

The records of this study will be kept private. In any sort of report I might publish, I will not include any information that will make it possible to identify a subject. Research records will be stored securely and I will be the only person with access to the records.

Your name will not be associated with the research findings, and pseudonyms will be used for all names and sites. All written documents will be assigned a code to protect your confidentiality. If you participate in the focus group, confidentiality will be limited, but I will encourage all participants to maintain confidentiality and privacy of participants as much as humanly possible. All data related to this study will be maintained at a secure location and electronic files will be password protected. All audio and videotaped recordings will be used only for educational research purposes and will be destroyed after completion of the study. No future use of data is anticipated.

**Voluntary Nature of the Study:**

Participation in this study is voluntary. Your decision whether or not to participate will not affect your current or future relations with Liberty University. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

**How to Withdraw from the Study:**

The participant should contact me immediately if she desires to withdraw from the study and inform me if she is willing to permit me to continue any other phase of the research as outlined on the informed consent form. The researcher is allowed to keep, use, analyze, and study data already collected prior to removal from the study to protect the integrity of the research unless the participant

The Liberty University Institutional Review Board has approved this document for use from May 22, 2015 to May 21, 2016 Protocol # 2193.052215

requests that collected data be destroyed or excluded from data analysis (U.S. Department of Health & Human Services, 2010). If the participant requests that collected data be destroyed or excluded from data analysis, data collected from the participant will not be used, and the researcher will delete the data and destroy the audio and video recordings of the participant upon completion of the study.

### **Contacts and Questions:**

The researcher conducting this study is Beverly Williams. You may ask any questions you have now. If you have questions later, you are encouraged to contact her at [REDACTED] or at her email address, [REDACTED]. The faculty advisor is Dr. Rebecca Burton, and her email address is [REDACTED].

If you have any questions or concerns regarding this study and would like to talk to someone other than me, you are encouraged to contact the Institutional Review Board, 1971 University Blvd, Suite 1837, Lynchburg, VA 24515 or email at [REDACTED].

**Please notify the researcher if you would like a copy of this information to keep for your records.**

**Please email this form to the above email address or deliver it to the Director of Veterans Services prior to completing the screening questionnaire.**

### **Statement of Consent:**

I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.

(NOTE: DO NOT AGREE TO PARTICIPATE UNLESS IRB APPROVAL INFORMATION WITH CURRENT DATES HAS BEEN ADDED TO THIS DOCUMENT.)

\_\_\_\_\_ The researcher has my permission to audio-record or video-record me as part of my participation in this study.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Investigator: \_\_\_\_\_ Date \_\_\_\_\_



## **APPENDIX F: Individual Interview Questions**

I will present an introduction before the interview: The purpose of this interview is to collect data on your transition and reintegration experiences as related to your college entry. You will use only a fictitious name instead of your actual name to protect your confidentiality. After completing all interviews, a focus group will be conducted in order to focus on specific areas and to collect additional data. At the end of the interview, you will be asked if you would like to voluntarily participate in the focus group.

1. If you could have anything you desired, what would it be and why?
2. How does it feel being out of the military and on a college campus pursuing your degree?
3. How long did you serve in the military and in what branch of service?
4. What is your ethnicity and age?
5. Have you ever been exposed to combat?
6. Will you please describe your transitioning experiences after your left the military?
7. What was it like being a female in the military?
8. How do you identify with fellow students and other student veterans with disabilities?
9. What factors influenced your decision to enter or reenter college?
10. How did your emotional and social needs influence your perseverance to remain in college?
11. What factors have helped you to reintegrate back into society and life roles since being enrolled in college?
12. Do you feel that you have fully reintegrated into the normalcy of civilian life? Why or why not? Will you please explain in detail?
13. What is your perception of your college environment and overall collegiate experience?

14. What challenges or problems have you faced while pursuing your education? How did you manage and resolve them?
15. What strategies did you engage in to help cope and persevere while juggling health issues, family obligations, coursework, and other tasks while reintegration into society?
16. What is your perception of the resources, services, and support offered to student veterans at your college? Do you feel these resources, services, and support are easily accessible and appropriate to meet your needs?
17. What classes, programs, services, and support systems do you feel need to be added or enhanced to meet the needs of female veterans with disabilities?
18. What do you think can be done to help faculty and administrators of your college to better understand and support the academic achievement of female student veterans with disabilities?
19. Would you like to participate in a focus group at a later date?
20. Do you have any questions, advice, or anything else that you would like to offer to other female student veterans concerning your college and reintegration experiences, or any other concerns?

**APPENDIX G: Excerpt of Individual Interview Transcript**

Me: Ok, next question: What factors influence your decision to enter or reenter college?

Laila: Because I knew that I didn't want just any job. So, in order for me to secure my future I wanted to make sure I had the education aspect of whatever the - the career field I decided to get into. And, most- most careers you need a degree to get a good job so that's what I wanted to do.

Me: Next question: How did your emotional and social needs influence your perseverance to remain in college? Would you like for me to repeat it?

Laila: Uh, Um, at first I was uh really scared and nervous because I didn't know what to expect because I felt like I was too old to come back to school although I'm young. But, still though I felt like that. So, but once I got in the atmosphere of coming to school and being around other veterans that were experiencing the same thing that I was experiencing it kind of eased my and anxiety anxiety that I had about school coming back to school.

Me: What factors have helped you to reintegrate back into society and life roles since being enrolled in college?

Laila: The fact that I do work at the Veterans' Center and everybody here are willing to help or have any questions that I have uh every everybody you know is there for you or supportive of you know all the students all the veteran students that go here. We have a place that you know is set for people to help.

Me: Ok. Do you feel that you have reintegrated into the normalcy of civilian life? That's Part One and Part Two- Why or why not and will you please explain in detail. And I'll repeat it once you answer I'll repeat the second two parts - Ok? I'll repeat it. Part 1 is Do you feel that you have reintegrated into the normalcy of civilian life?

Laila: Yes, I have because at first when I first got out I had trouble like sleeping and so on and so forth, so a lot of things that I had anxiety about when I first got out I don't have anymore because I'm comfortable now at being a civilian. So, things are at first it wasn't, but now that you know I'm getting the swing of things and got kind of a schedule, it's easy to um be comfortable now.

Me: Ok. Why or why not and please explain in detail. I – I know you answered a portion of it but remember it's a second part - why or why not, and please explain in detail.

Laila: I think so because I - I'm just comfortable now like I'm not so on the go, and just being patient now that I'm out like I can breathe and live not doing what I want, but I have more control over my life.

Me: Excellent. What is your perception of your college environment and overall college experience?

Laila: Um, my experience so far has been great. Uh, I haven't any trouble that I thought I would have being in the classroom setting. But, I like, I love every aspect of it um especially getting help whenever I need it.

Me: Ok, next question: What challenges or problems have you faced while pursuing your education? There's a part two - How did you manage and resolve them? But I can repeat as you answer.

Laila: One issue that I had was in my first semester. I'm really not used to studying so that's something that I had a hard time doing. So, I had to kind of reevaluate um my time management and things I spend time on to actually get - get how to study correctly and effectively.

Me: And how did you manage and resolve this?

Laila: Time management.

Me: What strategies did you engage in to help cope and persevere while juggling health issues, family obligations, coursework, and other tasks while reintegration into society?

Laila: I handled everything one at a time from the most important aspect to the least. I had to prioritize basically to figure out what and how to spend energy on or what I was going to put my energy into.

Me: What is your perception of the resources, services, and support offered to student veterans at your college? Do you feel these resources, services, and support are easily accessible and appropriate to meet your needs?

Laila: I like the fact that we have a place where veterans can come to feel comfortable at because most people don't understand what people go through in the military and to have a place where they can feel comfortable at is a plus. And, I think and I like the environment because of that.

Me: Ok. And the second part of that is - Do you feel these resources, services, and support are easily accessible and appropriate to meet your needs?

Laila: Yes, because it's - it's posted all over the campus and on the website and we get emails about it. We keep getting up-to-date notices about what's going on for the veterans. I like that aspect that they care enough to make sure that we are comfortable and being it's college.

Me: Ok. Thank you for that. What classes, programs, services, and support systems do you feel need to be added or enhanced to meet the needs of female student veterans with disabilities?

Laila: Uum

Me: You want me to repeat it?

Laila: No, I understand the question. Um, I honestly think that I don't think everything should be geared toward females, but a lot of people once they get into the school atmosphere they don't know how to how to how to um switch over from um to are military excuse me to civilian life.

And, I think there need to be a class as far as that. But I think everybody all the veterans need to go through that class, not just get one geared to females.

Me: Uum, Ok. What do you think can be done to help faculty and administrators of your college to better understand and support the academic achievement of student veterans with disabilities?

Laila: Um, other than what they already do now, I think that we can have more um, one-on-one sessions for veterans that may need a little extra help and maybe some - some kind of seminar at the beginning of each semester so that veterans can know how to um what is expected of them as a student now.

Me: Ok. That's it?

## **APPENDIX H: Focus Group Interview Questions**

The researcher will present an introduction: The purpose of this focus group is to focus on specific areas and to collect additional data. Fictitious names will be used to protect your confidentiality and everyone is asked to respect each other's privacy by not revealing what was discussed in the focus group session. Each participant will introduce themselves using their pseudonym name, branch of service you served in, disability rating, and length of military service. To ensure accuracy of verbatim transcriptions, participants will be instructed to state their pseudonym name each time input is given.

1. Why did you decide to go to college?
2. What do you feel that you have in common with other student veterans with disabilities concerning transition and reintegration experiences as related to your college entry experiences?
3. How do you perceive the nonveteran and nondisabled population reacts to and respects you in comparison to other student veterans with disabilities?
4. What is your perception of your overall college entry experience, and in what ways has it changed your outlook and standards of living since transitioning from the military?
5. What do you perceive as not being adequately fulfilled in your life academically, personally, or socially?
6. What tactics have you implemented to self-manage stress, adapt to change, and to persevere through the challenges of college, life roles, responsibilities, and reintegration?
7. How do you perceive your college programs, services, and support systems as meeting your needs, and what improvements or changes, if any, do you feel is needed to help

female veterans with disabilities excel academically and successfully reintegrate into society?

8. What do you feel that faculty, administrators, and other leaders within your collegiate environment can do to enhance the overall quality of the academic, personal, and social life of female veterans with disabilities?
9. Are there any further comments that you would like to add at this time?

## APPENDIX I: Excerpt of Original Journal

Time Span for Completing Journal: July 8 through August 6, 2015 Pseudonym: Cathy

**Instructions:** Whatever you write in your journal is another technique to assist in gathering additional data that will add purpose and direction to my study. Journals are labeled using headings based on prior interview and focus group questions to stimulate thoughts, feelings, and experiences. Participants will record any comments or questions that they may feel a need to clarify or add to data collection. Participants should attempt to record any small amounts of information frequently and as soon as they remember anything that they want to record or any encounters or thoughts you may recall since interviews were conducted. Each labeled page may or may not be filled entirely, or additional spaces can be added as needed.

Participants will maintain journals until collected by the researcher. The researcher will send email and/or text alerts to remind participants to continually record in their journals throughout the four-week time span and will provide any other necessary assistance. Please feel free to add a topic if there is not a topic related to your experience or perception. Journals must be returned to me by 6 August. Participants may contact the researcher, Beverly Williams at any time at [REDACTED] or by email at [REDACTED]

2

**Additional Comments to past interview questions** (include a brief description of the question)

Number	Date	Time	Additional Comments to add (may add more lines as needed)
1	Aug 5, 2015		I wish that there had been a more hands on approach when I had to get out of the military due to reduction in force. I truly felt forgotten.
2			
3			

**Specific Transitioning Experiences** (occurrences after you left the military)

Number	Date	Time	Experiences, thoughts, feelings, and/or perceptions of participants
1			No follow up after having to leave the military due to the reduction in force act. I was left to my own devices with applying for a job and looking for housing.
2			
3			
4			

**Male Dominance, Unfair, and/or biased treatment** (or other issues related to being a female in the military)

Date	Time	Experiences, thoughts, feelings, perceptions of participants
1	July 8, 2015	Some male veterans made their feelings and opinions known stating that females did not belong or be allowed to be in the military.
2		
3		
4		

**How you were treated by fellow students (nondisabled veterans and nonveteran students)**

Number	Date	Time	Experiences, thoughts, feelings, and/or perceptions of participants
1	Aug 4, 2015		I was treated with respect. When I missed class my fellow classmates showed their care and concern.
2			
3			
4			

**Factors that influenced your decision to enter/reenter college** (Include any social, emotional, psychological or financial needs that influenced your perseverance)

<u>Number</u>	<u>Date</u>	<u>Time</u>	<u>Experiences, thoughts, feelings, and/or perceptions of participants</u>
1	8 Jul 2015		She need to increase my income and complete my goal of graduating from college.
2			
3			
4			

**Factors that influenced you to persevere in college** (Include any social, emotional, psychological or financial factors that influenced your perseverance)

<u>Number</u>	<u>Date</u>	<u>Time</u>	<u>Experiences, thoughts, feelings, and/or perceptions of participants</u>
1	9 Jul 2015		Went through a marital separation in 2004, father died of tumor on the brain, and in March 2004 my then husband filed for a divorce. In spite of these situations, I determined and purposed in my mind to complete my goal.
2			
3			
4			
5			

**What resources, services & support do you feel are appropriate for disabled female student veterans? Are they easily accessible and suitable? Please describe.**

<u>Date</u>	<u>Time</u>	<u>Experiences, thoughts, feelings, perceptions of participants</u>
1	July 30, 2015	Wheelchair accessibility, elevators in colleges, desks to accommodate individuals in wheelchair/motor scooters.
2		Quiet study areas for students that have PTSD/MST.
3		
4		

**Coping strategies used to cope with juggling your job, transitioning, college, health issues, and other daily stressors**

<u>Number</u>	<u>Date</u>	<u>Time</u>	<u>Experiences, thoughts, feelings, and/or perceptions of participants</u>
1	July 15, 2015		Planning around my work schedule, church, and volunteer activities.
2			Easily frustrated when I show up for an appointment and don't get seen/or notified in a timely manner.



## APPENDIX J: Excerpt of Typed Journal

Time Span for Completing Journal: July 8 through August 6, 2015 Pseudonym Cathy

**Instructions:** Whatever you write in your journal is another technique to assist in gathering additional data that will add purpose and direction to my study. Journals are labeled using headings based on prior interview and focus group questions to stimulate thoughts, feelings, and experiences. Participants will record any comments or questions that they may feel a need to clarify or add to data collection. Participants should attempt to record any small amounts of information frequently and as soon as they remember anything that they want to record or any encounters or thoughts you may recall since interviews were conducted. Each labeled page may or may not be filled entirely, or additional spaces can be added as needed.

Participants will maintain journals until collected by the researcher. The researcher will send email and/or text alerts to remind participants to continually record in their journals throughout the four-week time span and will provide any other necessary assistance. Please feel free to add a topic if there is not a topic related to your experience or perception. Journals must be returned to me by 6 August. Participants may contact the researcher, Beverly Williams at any time at [REDACTED] by email at [REDACTED]

### Additional Comments to past interview questions (include a brief description of the question)

<u>Number</u>	<u>Date</u>	<u>Time</u>	<u>Additional Comments to add (may add more lines as needed)</u>
1	Aug 5, 2015		I wish that there had been a more hands on approach when I had to get out of the military due to reduction in force. I truly felt forgotten.

### Specific Transitioning Experiences (occurrences after you left the military)

<u>Number</u>	<u>Date</u>	<u>Time</u>	<u>Experiences, thoughts, feelings, and/or perceptions of participants</u>
1			No follow up after having to leave the military due to the Reduction in Force Act. I was left to my own devices with
2			applying for a job and looking for housing.

### Male Dominance, Unfair, and/or biased treatment (or other issues related to being a female in the military)

<u>Number</u>	<u>Date</u>	<u>Time</u>	<u>Experiences, thoughts, feelings, perceptions of participants</u>
1	July 8, 2015		Some male veterans made their feelings and opinions knowing stating that females did not belong or be allowed to be in the military.
2			

### How you were treated by fellow students (nondisabled veterans and nonveteran students)

<u>Number</u>	<u>Date</u>	<u>Time</u>	<u>Experiences, thoughts, feelings, and/or perceptions of participants</u>
1	Aug 4, 2015		I was treated with respect. When I missed class, my fellow Classmates showed their care and concern.

**Factors that influenced your decision to enter/reenter college** (Include any social, emotional, psychological or financial needs that influenced your perseverance)

<u>Number</u>	<u>Date</u> <u>Time</u>	<u>Experiences, thoughts, feelings, and/or perceptions of participants</u>
1	8 Jul 2015	The need to increase my income and complete my goal of graduating from college.

2

**Factors that influenced you to persevere in college** (Include any social, emotional, psychological or financial factors that influenced your perseverance)

<u>Number</u>	<u>Date</u> <u>Time</u>	<u>Experiences, thoughts, feelings, and/or perceptions of participants</u>
1	9 Jul 2015	Went through a marital separation in 2004, father died of tumor on brain, and in March 2004 my then husband filed for a divorce. In spite of these situations, I determined and purposed in my mind to complete my goals.

2

**What resources, services & support do you feel are appropriate for disabled female student veterans? Are they easily accessible and suitable? Please describe.**

<u>Number</u>	<u>Date</u> <u>Time</u>	<u>Experiences, thoughts, feelings, perceptions of participants</u>
1	July 30, 2015	Wheelchair accessibility, elevators in college, desks to accommodate individuals in wheelchairs/motor scooters.
2		Quiet study areas <del>for</del> -for students that have PTSD/MST.

**Coping strategies used to cope with juggling your job, transitioning, college, health issues, and other daily stressors**

<u>Number</u>	<u>Date</u> <u>Time</u>	<u>Experiences, thoughts, feelings, and/or perceptions of participants</u>
1	July 15, 2015	Planning around my work schedule, church, and volunteer activities. Easily frustrated when I show up for an appointment and don't get seen/or notified in a timely manner.

2

## APPENDIX K: Sample Coded Transcripts of Individual and Focus Group Interviews (from Atlas.ti7)

My Study Analysis - ATLAS.ti

Project Edit Documents Quotations Codes Memos Networks Analysis Tools Views Windows Help

P-Docs P 1: Interview Tran: Quotes 1:4 the job was so Codes BIASED TREATMEN Memos Codes List (0-0 Commentary)

P 1: Interview Transcript\_Celia.doc

029 Me: How do you identify with fellow students and other disabled student veterans?  
 030 Celia: Um, I'm able to identify with them because we share ah certain experiences and it's uh kind of funny because when I see like another veteran like posture wise and things just like it you can automatically just tell that they are you know ex-military almost like ah a teleconnection kind of thing you know that everyone has.

031 Me: Ok. What factors influenced your decision to enter or reenter college?  
 032 Celia: Um, well, when I was in high school I said I wanted to join the military. While I was in the military I said that oh well I'm a go to school while I'm in the military. But, the job was so demanding and um I had to learn classes and certain things for the Army it was almost impossible trying to take up classes and do the uh military only for me. So, um, being that I got out of the Army, I said the first thing I was going to do was to fulfill my dream of going to school because education was very important.

034 Me: How did your emotional and social needs influence your perseverance to remain in college?  
 035 Celia: Um, it was kind of hard but um being that I'm out of the military and having military training um I had to go to college and emotionally emotional wise, it was a hard transition because you know I thought I would be able to find a job easy being I was military. And, socially it was even harder because it's it's like a barrier between you know veterans vs. civilians and you know it's kind of like a shell shock feeling um being on campus and having to transition back into a civilian. It's almost like I'm learning another language.

037 Me: What factors have helped you to reintegrate back into society and life roles since being enrolled in college?  
 038 Celia: Well, the things that have helped me was a constant interaction um with civilians and my uh civilian classmates. They didn't treat me any different and um they also try to understand like you know if I'm feeling a certain way or they were concerned like if I did in fact have like PTSD or you know something of that nature, they actually

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Codes: # IDENTIFY STRONGLY, SHARED EXPERIENCES  
 # GOAL, EDUCATION IMPORTANT-  
 # DIFFICULTY FINDING JOB-  
 # CIVILIAN CLASSMATES-

My Study Analysis - ATLAS.ti

Project Edit Documents Quotations Codes Memos Networks Analysis Tools Views Windows Help

P-Docs P16: FocusGroup T Quotes Codes BIASED TREATMEN Memos Codes List (0-0 Commentary)

P16: FocusGroup Transcripts.doc

008 Jordyn: I wanted to fulfill my goal of returning back to school after not being in school and being um in a depressive state and finish my degree.

009 Q2 - Me: Okay, next question: **What do you feel that you have in common with other nondisabled student veterans concerning transition and reintegration experiences as related to your college entry experiences?**

010 Reatha: I feel that what I have in common with the little bit I got from the classrooms that I been in, I think that the people who been the military are a little more disciplined and take things a little bit more seriously when the instructor give you an assignment. I watch my military comrades too, and we do what we're supposed to do. A lot of my fellow students, (she chuckles) they don't turn their work in on time like they're supposed to do. It's always an excuse. Military people, I guess, are more regimented. We follow through and do what we're supposed to do.

011 Me: Okay

012 Jalisia: Um, I fill like what I have in common with other nondisabled student veterans concerning transition and reintegration um into the entry, college entry experiences, um I don't feel like you know just because when you do come to college you have any type of favoritism or anything you know being nondisabled or disabled. I feel like the entry process is pretty much the same across the board, whether you're a spouse, or dependent, or a veteran. But, in the classroom um you know I do feel like you know and from personal experience as well when you know you have somebody else paying for your tuition or what not like mom and dad or something like that, you don't tend to take college seriously. Whereas when you worked for your entitlements you know even though third parties paying for your education, you almost feel like it's your duty to get good grades and not to just slack off.

013 Jordyn: Um, I feel that there is no difference in transitioning between my fellow nondisabled or nonveteran students because for the most part um there's a lot of student population that is transitioning from hypothetically civilian working every day. And, they transition into making school your everyday work. So, they there's really

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Codes: # GOAL-  
 # SOMETHING TO DO-  
 # RESPONSIBLE-  
 # DISCIPLINED-  
 # RESPONSIBLE-  
 # DISCIPLINED-  
 # NO DIFFERENCE-

**APPENDIX L: Audit Trail**

STUDENT NAME: BEVERLY T. WILLIAMS

<b>DATE COMPLETED</b>	<b>SPECIFIC TASKS</b>	<b>FIELD NOTES/ REFLECTIVE NOTES</b>
April 18, 2015	Proposal Defense	Committee gave positive feedback and emailed me necessary revisions; I made revisions. Approval granted to submit IRB application.
April 29, 2015	Received approval from study site	Informed my chair. Sent copy of approval to IRB.
April 16, 2015	Requested IRB approval	
May 22, 2015	Received IRB approval	Approved with only one revision needed. Emailed my chair.
May 25, 2015	Visited study site to inform Veterans' Center staff of IRB approval to begin study. Emailed to director the Recruitment Letter to invite participants, Screening Questionnaire Form, Informed Consent Form, and links to access forms online. Recruited three participants for pilot study.	Spoke with Director of Veterans' Center, Mr. Mack (pseudonym). Had briefed him weeks earlier and he had briefed his staff of my study. Stated he would have staff immediately email my recruitment letter, questionnaire, and consent forms to invite potential participants. Briefly talked and gave some information to them and thanked the staff and him for their cooperation and expediency.
May 27, 2015	Began pilot study. Three participants total.	First interview at home of pseudonym HR1. I was nervous. Earned her Master's from Liberty University. Relaxed atmosphere; extremely cooperative. Pursuing Ed.D. Used more prompts.
May 28, 2015	Completed second pilot study interview.	Interviewed second participant (EML) at home. Used more prompts. Very cooperative; detailed responses to questions.
May 28, 2015	Visited site to follow up with staff to ensure emails had been sent out.	Talked to Director of Veterans' Center and some of the staff. Informed me that several hundred student veterans were emailed questionnaire inviting them to participate in my study.
May 29, 2015	Completed pilot study. Began data transcriptions for all participants.	Last interview (GPP) of pilot study. Used more prompts; got rich data. All agreed to focus group.
June 3, 2015	Visited site to follow up because no response to emails sent to student veterans inviting	Talked to Director of Veterans' Center and some of staff. Told me several questionnaires were emailed to invite student veterans. Staff was

	participants. Staff had some respondents.	shocked at no zero responses. Staff gave me names and contact information of those who responded in person.
June 5, 2015	Conducted focus group of pilot study; only two participants. Reviewed their transcripts of individual interviews afterwards.	Great cooperation (HR1 and EML); should have used more prompts for more interaction. Expected more data. Everyone agreed transcripts were accurate. GPP later reviewed her transcripts.
June 7, 2015	Emailed pilot study participants to thank them for cooperating.	Positive replies – said were glad to help out and be able to voice their experiences.
June 8- 12, 2015	Visited site to recruit participants for actual study. Made contact with some; signed informed consent forms and scheduled interviews.	Talked to several female student veterans in Veterans' Center as staff sent them to me; some were email responses; others from snowball sampling.
June 14- July 2, 2015	Signed informed consent forms. Conducted individual interviews. Asked to participate in focus group at conclusion of interviews.	Some signed consent forms in advance. Conducted five interviews at study site; three in their homes; two by phone; and one away from site. Six agreed to participate in focus group with three maybes.
June 20 – July 5, 2015	Transcribed recorded interviews.	Difficult; very time-consuming. Transcribed some manually; used Dragon Naturally Speaking for seven transcripts. Somewhat simpler and faster.
July 3, 2015	Sent email to inform participants of possible dates and times to choose for focus group session	Only nine agreed, but emailed everyone. Just a gesture to attract more participants.
July 6, 2015	Emailed Director of Veterans' Center asking permission to use conference room for focus group.	Mr. Mack approved use and reserved conference room for focus group session 11:00-12:00 a.m. on Wednesday, July 8, 2015.
July 7, 2015	Emailed nine participants.	Six replied by email/texts. Agreed to meet on July 8 <sup>th</sup> for the focus group session.
July 8, 2015	Conducted focus group with four participants. Invited to participate in journaling at conclusion of the session. Gave out some journals.	Enthusiastic, interactive. Expected more data. Used prompts; all seemed to respond to others, instead of stating own experiences. Some came early to review transcripts.
July 9, 2015	Emailed journals to all 11 participants with instructions.	Gave option to complete and return to me electronically.
July 10-15, 2015	Transcribed focus group data. Emailed participants about time to meet and review of transcripts.	Emailed and sent text messages reminding participants of need to review transcriptions for accuracy and return.
July 20 - 29,	Sent emails and text messages to	Reminded participants to record entries often to

2015	participants.	add meaningful data. Deadline was approaching.
July 22, 2015 - August 31, 2015	Analyses and synthesis of all three sets of data.	Used Atlas.ti7 software and Excel spreadsheets to sort and organize data. Journals analyzed manually and posted in Excel spreadsheets.
August 14, 2015	Total of seven journals received.	Several entries recorded by all participants. Not very much new data were identified as expected.
September 4 – Oct 12, 2015	Developed manuscript.	
October 19, 2015	Submitted manuscript to committee.	As directed by chair. Copied my chair.
October 26, 2015	Audit trail conducted.	Conducted by expert reviewer. Satisfactory audit.
November, 2015	Revisions to manuscript.	Recommended by chair and committee.
January, 2016	Chair sent copy to Liberty SOE to forward to research consultant.	New step in dissertation approval process as directed in 2015 Dissertation Handbook.
February, 2016	Made necessary revisions.	Recommended by research consultant.
February, 2016	Submitted manuscript to chair	Chair must forward to SOE Gate
March, 2016	Submit to professional editor.	APA and grammatical editing - TBA
	Prepare for Pre-Defense	TBA
	Dissertation Defense.	TBA
	Make recommended revisions.	TBA
	Become Dr. Williams.	Can rejoice and praise God! TBA
	Prepare for graduation	Comply with graduation requirements. TBA

*I conducted audit of Beverly Williams' methodology for dissertation research, satisfied with methodology and documentation.*

*[Redacted Signature]*  
 Ed.D. Curriculum and Teaching  
 10/26/15

**APPENDIX M: Enumeration Table of Identified Themes and Codes**

Table 2

*Enumeration Table of Identified Themes and Codes*

Open Codes	Frequency of Codes
<b>Theme #1: Importance of completing education</b>	
Be a positive role model	3
Change of career	3
Lifetime goal	3
Post/911 GI BILL to fund college	3
Education is important	2
Finish what started	2
Maintain mental acuity	1
<b>Theme #2: Strong desire to persevere</b>	
Identify strongly with student veterans	10
Shared common experiences with classmates	8
Support from veteran classmates	6
Treated well and with respect by veteran and nonveteran classmates	4
Veterans' services	4
Satisfaction from finishing something	3
Church	2
Spousal and family support	2
Support from nonmilitary classmates	1
Keeping busy	1
Do not identify with	1
<b>Theme #3: Coping strategies and managing responsibilities</b>	
Nice environment	6
Still use military training to help reintegrate	6
Prioritize self over school	4
Planning and journaling	4
Determined to persevere	3
Individual support systems	3
Study hard and stay focused	3
Sought help	3
Time management	2
Veterans' services	2
Leave class session	1
Do not feel ashamed	1
Know I am not alone	1
<b>Theme #4: Perceived need for institutional support of veterans</b>	

Need female-specific support and programs	9
Need faculty understanding and support of veterans	9
A man's world	5
More support needed for veterans overall	3
More support and interaction needed from faculty	3
More support for PTSD	2
Job placement	1
Faculty good with veterans	1
Faculty want to help	1
Like the instructors	1

**Theme #5: How services and programs met veterans' needs**

Positive, lots of programs	7
Positive, staff is helpful	4
Negative, staff is not helpful	4
Negative, need handicap accessible resources	2
Positive, programs geared toward veterans	1
Positive, faculty follow rules	1
Positive, good classes	1
Positive, good support overall	1
Negative, programs not geared toward veterans	1
Negative, need more hands-on assistance for veterans	1
Negative, dislike administration	1

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*Note.* Codes and themes include data synthesized across interviews, focus group, and journals.