Female Veterans Transition to College

Diane Recinos
St. John Fisher College, dmr06262@students.sjfc.edu

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Female Veterans Transition to College

Abstract
The purpose of this qualitative phenomenological study was to examine the transition experience of female veterans into college. The participants of the study were eight female veterans, receiving veteran benefits and that have completed at least one year of college. Four of the participants were combat veterans. Female veterans bring with them not only their individual experiences, but also challenges and problems they observed or experienced in the military. The female veteran population attending college continues to increase and there is limited research regarding their transition experience as they pursue their college degree. The researcher utilized Schlossberg’s (1988) transition theory and the 4Ss model by developing interview questions that focused on self, situation, supports, and strategies for coping of female veterans. Findings included the development of five major categories that focused on the female veteran’s individuality, education, lifestyle choices, support, and mental health. The researcher developed institutional recommendations to support the female veterans’ transition into college.

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Female Veterans Transition to College

By

Diane Recinos

Submitted in partial fulfillment
of the requirements for the degree
Ed.D. in Executive Leadership

Supervised by
Dr. Richard Maurer

Committee Member
Dr. Gilbert Louis

Ralph C. Wilson, Jr. School of Education
St. John Fisher College

August 2016
Dedication

This has been a phenomenal journey. I dedicate this dissertation to my husband Edwin and my son Tyler who have provided love, patience, and support every step of the way. You have kept me grounded and offered me words of encouragement when I needed it most. To my parents, and family, thank you for your unconditional love and support throughout this process.

This journey would not have been possible without the support from the female veterans I had the opportunity to interview. I greatly appreciated your stories and your passion to want to help other female veterans. I would like to take this opportunity to thank all servicemembers and veterans for their commitment to protecting our country.

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Finally, yet importantly, Cohort 6, I could not have done it without you. I have learned so much from each of you. To my group, Doctors of Diversity, thank you!
Biographical Sketch

Diane Recinos is currently the Senior Vice President, Enrollment Management, at Berkeley College. In this role, she oversees the departments of Enrollment, Financial Aid, and Military and Veterans Affairs. She has over 25 years of higher education experience. Ms. Recinos holds an M.B.A. from Wagner College and a B.S. degree from Davis and Elkins College. She began her doctoral studies in May of 2014 with St. John Fisher College in the Ed.D. program in Executive Leadership. Ms. Recinos pursued her research exploring Female Veterans Transitioning to College under the direction of Dr. Richard Maurer and Dr. Gilbert Lois and received the Ed.D. degree in 2016.
Acknowledgement

I would like to express my appreciation to my employer, Berkeley College, for the support I received during this doctoral program.
Abstract

The purpose of this qualitative phenomenological study was to examine the transition experience of female veterans into college. The participants of the study were eight female veterans, receiving veteran benefits and that have completed at least one year of college. Four of the participants were combat veterans. Female veterans bring with them not only their individual experiences, but also challenges and problems they observed or experienced in the military. The female veteran population attending college continues to increase and there is limited research regarding their transition experience as they pursue their college degree. The researcher utilized Schlossberg’s (1988) transition theory and the 4Ss model by developing interview questions that focused on self, situation, supports, and strategies for coping of female veterans. Findings included the development of five major categories that focused on the female veteran’s individuality, education, lifestyle choices, support, and mental health. The researcher developed institutional recommendations to support the female veterans’ transition into college.
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Chapter 1: Introduction

Veterans transitioning to college is more prevalent now than ever (O’Herrin, 2011). The former Director of the American Council on Education, O’Herrin (2011), expressed that the passage of the Post-9/11 GI Bill, which went into effect August 1, 2009, was the largest change in military educational benefits since the GI Bill of 1944. The Post-9/11 GI Bill has funded education and training for over a million veterans or their dependents, since August 2009, and has invested in over $30 billion dollars in educational related benefits (U.S. Department of Veteran Affairs, 2013). Eligible candidates to receive the Post-9/11 GI Bill are veterans and servicemembers, who have served 90 or more days on active duty since September 10, 2001. The number of days served on active duty determine the benefits for National Guard and Reserve members (U.S. Department of Veteran Affairs, 2015a). The benefits are transferrable to immediate family members. The benefits include up to tuition and fees at a state college, or a capped amount of $21,084 per academic year for private colleges, monthly housing allowance (based on zip code of the college), a stipend up to $1,000 for books, work-study program, and the Yellow Ribbon Program (U.S. Department of Veteran Affairs, 2015a). The Yellow Ribbon Program is a provision of the law that created the Post-9/11 GI Bill. The Yellow Ribbon Program is available for institutions of higher learning (degree granting institutions) in the US, or at a branch of such institution located outside the US. The program allows approved institutions of higher learning and the U.S. Department of Veteran Affairs (VA) to partially or fully fund tuition and fee expenses
that exceed the established thresholds under the Post-9/11 GI Bill. Veterans who qualify for the Post-9/11 GI Bill have up to 15 years to use their education benefits (U.S. Department of Veteran Affairs, 2015a).

In July 2009, the American Council on Education (ACE) published a study in collaboration with Service Members Opportunity Colleges, the American Association of State Colleges and Universities (AASCU), Student Affairs Administrators in Higher Education (NASPA), and the National Association of Veteran Program Administrators (NAVPA). The study was a survey regarding the preparedness of colleges to serve the increased veteran population.

The author distributed the survey to all colleges in the United States. The survey resulted in 723 respondents from all sectors in higher education, including public 2-year and 4-year colleges, private not-for-profit colleges, and for-profit colleges. More than half (57%) of the colleges that responded indicated they currently provide programs specifically for veterans, and roughly 60% said it was part of their long-term strategic plan. The survey revealed that over the next five years, 57% of the responding colleges indicated that they would provide professional development for faculty and staff, 17% would establish a veteran center, and 13% would have an established department dedicated to veteran students. The study also indicated that 29% of the colleges would increase staff, 43% would increase the number of services and programs, 27% would increase their budget for services and programs, 43% would train staff to assist students with post-traumatic stress disorder (PTSD) and 52% would explore state and federal funding sources. Some of the colleges stated they took action after September 11, 2001 to improve services for the veterans. Fifty-one percent of the colleges that responded
increased counseling, 32% increased staff, 58% established marketing and outreach strategies, 63% established new programs or services, and 38% appointed committees to develop action plans (American Council on Education, 2009).

In addition to the survey, the researchers conducted focus groups with veterans. Several concerns emerged from the focus groups, which included a lack of flexibility of some programs due to unpredictable deployment, lack of transfer credits taken during the military, earned college credits not recognized by higher educations, and the lack of guidance regarding military benefits (Cook & Kim, 2009).

They identified the following three major concerns colleges are facing to support the veteran’s needs: financial aid, persistence/retention, and healthcare issues. The survey results also identified additional work that could be done in the following areas: developing peer networks, sensitivity training for staff and faculty, and locating additional funding sources for campus programming (Cook & Kim, 2009).

Rumann and Hamrick (2010) revealed how critical research regarding veterans will be, especially as trends in military recruitment and deployment continue to evolve, and more and more students are using their educational benefits. For example, in the National Survey for Veterans (NSV) 2010 Final Report, more than 73% of veterans who took advantage of their VA education benefits indicated that the benefits were extremely important or very important in assisting them to meet their educational goals and preparing them for the workforce. The survey asked veterans that did not take advantage of their benefits why they did not use them. More than 36% said they were not aware of the VA education and training benefits (Westat, 2010).
Whalen (2013) explained, through research on student veterans, one must understand the characteristics of student veterans in order to begin to know what support would be required. They include understanding of military populations, military culture, education benefits, post deployment issues, mental health issues, current support at colleges, and transition from service. Other areas of focus would be to identify what type of support is necessary in the classroom and how a college campus can create a veteran friendly environment (Whalen, 2013).

A recent survey, published in February 2014, conducted by the U.S. Department of Education, National Center for Education Statistics (2014), sent to 1,650 public and private postsecondary degree granting institutions, sought information on veteran support services provided during the 2012-13 academic year. The response rate was 90% (1485 colleges responded) and the college’s areas of focus specifically for veterans were social supports, customized information, courses and credits, customized admissions events and student orientation, mentoring and group counseling, off campus health services, staff training, communication methods, events for prospective students, veteran work study, and enrollment of veterans and dependents. These results and recommendations were in line with the researcher’s findings.

A veteran is more likely to obtain a high school diploma compared to the average nonveteran, but less likely to earn a college degree. Ninety-two percent of veterans 25 years or older have at least a high school diploma and 26% of veterans 25 years or older have a bachelor’s degree (U.S. Census Bureau, 2012). Student veterans are likely to have difficulty adjusting to a classroom environment, being social with classmates, understanding assignments, and passing courses (Hermann, Raybeck, & Wilson, 2008).
Griffin & Gilbert (2012) noted, as President Barack Obama’s goal of becoming the world’s leader in terms of college completion by 2020, it is essential to recognize the needs of an increased veteran population. Developing strategies that increase the probability of veterans graduating and earning their degrees will have a positive impact on this goal, while promoting a nation of competitiveness, as well as properly rewarding veterans for their service.

According to the Department of Veteran Affairs (2015), female veterans between the ages of 17 – 34 are not completing a bachelor’s degree at the same rate as non-veterans. Approximately 37.5% of female veterans had earned a bachelor’s degree compared to 47% of non-veteran females (U.S. Department of Veteran Affairs, 2015a).

DiRamio, Jarvis, Iverson, Seher and Anderson (2015) conducted a mixed methods study to investigate help-seeking attitudes of student veterans, particularly females. The researchers approached the study by considering the following:

Colleges and universities are devoting resources to support students who have military experience. However, evidence suggests veterans may not be using services. Since resources are available, this begs the questions “why not?” and “what are the help-seeking attitudes of veterans for psychological and academic assistance?” It is also timely to consider female veterans in college. What needs and concerns do they have? Are they different from men? (p.49)

None of the studies, American Council on Education (2009), Cook & Kim (2009), Rumann and Hamrick (2010) and Whalen (2013), focused on gender differences. DiRamio et al. (2015) stressed the importance of colleges being proactive about the services offered to veterans and the communication of the availability of those services.
The data also showed veterans would be less likely to avail themselves to the services, especially females with military experience who are now attending college (DiRamio et al., 2015).

The decrease of troops from the wars in Iraq and Afghanistan combined with the new and revised GI Bill, have led to the increase of veteran students into higher education (Coll, Oh, Craig, & Coll, 2009). The veterans will need to translate their military experiences into a college environment (Griffin & Gilbert, 2012).

According to the United States Census Bureau (2012), as of 2010, there were approximately 1.4 million active duty military personnel and approximately 21.8 million veterans: 20.2 million (93%) were male and 1.6 million (7%) were female. The overall active duty military population has decreased from 1,458,697 in 2010 to 1,429,877 in 2012, a 2% decrease or a difference of 28,820. The Army had the largest decrease from 561,979 in 2010 to 546,057 in 2012; a 2.9% decrease, or a difference of 15,922. The Navy decreased from 323,139 in 2010 to 314,339 in 2012; a 2.8% decrease or, a difference of 8,800. The Marine Corp decreased from 202,612 in 2010 to 198,820 in 2012; a 1.9% decrease or, a difference of 3,792. The Air Force had a small decrease from 329,640 in 2010 to 328,812 in 2012; a .025% decrease, or a difference of 828. The Coast Guard is the only branch that had a small increase from 41,327 in 2010 to 41,849 in 2012; a 1.2% increase or, a difference of 522. The Reserve and Guard have also decreased from 857,261 in 2010 to 848,302 in 2012; a 1% decrease or, a difference of 8,959. There are 202,876 (14.6%) active duty females and 1,185,152 active duty males. The education level for active duty members is this: 1,089,763 (78.6%) have a high school diploma and some college; 162,723 (11.7%) have a bachelor’s degree and 101,948
(7.3%) have an advanced degree (Office of the Deputy Assistant Secretary of Defense, 2012).

**Problem Statement**

There is little research regarding the transition of female veterans from the military into college. The Post-9/11 GI Bill has funded education and training for over a million veterans or their dependents since August 2009 (Department of Defense, 2012). As veterans’ enrollment into college continues to increase, clarity of veteran support is required as well as the demand to examine transitional services. The overall support colleges provide becomes a priority. Researchers have agreed veterans transitioning to college require additional support and services while pursuing their education (Cook & Kim, 2009; Griffin & Gilbert, 2012; Jones, 2013; Vacchi, 2012). Vogt, Pless, King, and King (2005) conducted a study focusing on deployment stress measures. The findings showed that exposure to war zone activities has a negative implication for post deployment transition of veterans (Vogt et al., 2005). The researcher will focus on female veterans and their transition experience from the military into college. A female veteran for this study is a person who has served active duty in the armed forces, is eligible to receive GI Bill benefits, and enrolled in college at least one year. (U.S. Department of Veteran Affairs, 2013).

The passage of the Post-9/11 GI Bill is what influenced the increase of veterans in colleges today (O'Herrin, 2011). Bichrest (2013) indicated that there is not a one size fits all approach for veterans to transition into an educational setting. Nor are there simple explanations to overcome, added obstacles they may encounter. Therefore, the continued need for research studies to identify services that can support veterans transitioning into
college is warranted. Without providing adequate services to veterans to develop coping methods as they transition into a college environment, student veterans will not achieve graduation (Briggs, 2012). Student veterans struggle to integrate into a college environment without the appropriate transitional services and support services to help them succeed (American Council on Education, 2008).

From a transitional perspective, veterans mostly experienced problems when adjusting to college life (Ackerman, DiRamio, & Mitchell, 2009). The U.S. Department of Veteran Affairs (2013) emphasized that student veterans need to have complete support services that would provide avenues for developing coping mechanisms. Many institutions offer limited support services for students and few have specialized student veteran services available (Ryan, Carlstrom, Hughey, & Harris, 2011). The sudden increase of veterans into college and the lack of readiness of higher education institutions forced Congress to implement new legislation. Congress passed H.R. 4057, Public Law (PL) No. 112-249, “Improving Transparency of Education Opportunities for Veterans Act of 2012,” which became effective on January 10, 2013 (U.S. Department of Veteran Affairs, 2013). As a result, all colleges must now examine their support services and provide information regarding the status of these services.

**Theoretical Rationale**

Schlossberg studied life transitions for work in areas of retirement, career development, and intergenerational relationships. Schlossberg’s (1981) transition theory originated because she believed a need existed to develop a framework that would enable an understanding of adults in transition, and guide them to find the help they needed to cope with the “ordinary and extraordinary process of living” (p. vii).
The researcher used Schlossberg’s transition theory to interview female veterans and their transition experience into college. Schlossberg’s (1981) theory expanded, as she wanted to understand how people, and those with whom they are connected, cope with change. Schlossberg (1981) described “the extraordinarily complex reality that accompanies and defines the capacity of human beings to cope with change in their lives” (p.3) and captured the individual characteristics and external occurrences embedded in the transition process. Schlossberg’s (1981) primary focus was to study human adaptation to transition. Comprehending adaptation to transition was beneficial to discussions of Schlossberg’s conceptualization of these two terms (adaptation to transition). Schlossberg used the works of life-course theorists Lieberman (1975) and Lowenthal, Thurnher, and Chiriboga (1975).

Schlossberg et al. (1995), explained that in order to comprehend the effect on a person, you first have to consider the type, context, and impact of the transition. Schlossberg’s theory describes three different types of transitions: anticipated, unanticipated, and non-events. Anticipated transitions are expected to happen and include such events as graduating from high school. Unanticipated transitions are not expected and not scheduled; events of this type include a sudden death of a family member or being fired from a job. Nonevent transitions are an anticipated event expected to occur but does not. An example would be a marriage that never took place, or a child who was never born. Transitions may provide opportunities for growth with resulting success, as well as failure. Schlossberg et al. (1995) supported the idea of transitions having three phases; called “moving in,” “moving through,” and “moving out.” People moving into a situation need to acquaint themselves with the guidelines, standards, and
expectations of a new system. An individual will need to learn how to balance their activities once in a new situation as they move through the transition. Moving out is seen as ending one transition and determining what comes next.

As the transition theory continued to evolve, Schlossberg (1995) explained a transition is “any event or non-event, which results in changed relationships, routines, assumptions, and roles” and the four factors that influence the quality of transitions: situation, self, supports, and strategies for coping (p. 27). The four factors referred to as the 4Ss and the strength and weaknesses in each of the areas determine the effectiveness of the transition.

Sargent and Schlossberg (1988), explained the basic idea of mastering the process of change is to take charge and take stock. The first three of the 4Ss, situation, self, and supports, assist adults in taking stock. Situation identifies the type of transition, whether or not it is positive or negative, did it come at a good time, was it voluntary or imposed, and at what point is the person in the transition. Self looks at the characteristics of the person, their strengths and weaknesses, what they bring to the situation, whether they are optimistic and can handle ambiguity. Supports focuses on the people around the person and the help or lack of help they would have gotten through the transition. The last of the 4Ss, strategies for coping, is the plan to boost the person’s strengths and skills in order to cope with the change (Sargent & Schlossberg, 1988).

The utilization of the 4Ss model will be applied as a framework to understand the needs of female veterans’ transition experience into college. The reason why this theory can be so beneficial to the researcher is that it provides a complete or additional understanding of a veteran’s transition to college, based on situation, self, supports, and
strategies for coping. By utilizing this approach, the researcher will identify additional areas of support that can be used during the female veterans’ transition into college.

**Statement of Purpose**

As the veteran population continues to increase in colleges, the purpose of this study is to examine the transition experience of female veterans from the military into college. The study used the phenomena of female veterans’ transition from military to college by focusing on four components: themselves, their situation, the support that they may have and their coping mechanisms. The intent of this study was to use findings to understand the transition to college and make recommendations for colleges to support female veterans during this transition.

Vacchi (2012) stated, “Student veterans are a diverse subpopulation on campus, and we should not expect universal comprehension of, or blanket policies for these students” (p. 15). Vacchi (2012) further explained that veterans have a difficult time adjusting to civilian life. Veterans have also learned a high level of responsibility, discipline, training, and competence while being in the military. When in a classroom setting, veterans need to overcome a reluctance to asking for help, and to understand that it is not a burden to others. Vacchi (2012) expressed how important it is not to overlook those characteristics. Research conducted by Rumann and Hamrick (2010) discovered through interviews with veterans that veterans look for transition strategies such as seeking out other veterans, attempting to form student veteran groups, disclosing experiences in supportive environments, and embracing self-discipline and structure.
Research Questions

1. What personal characteristics did the female veterans use when deciding to go to college?

2. How did the female veterans’ personal situation influence their transition into college?

3. What support services did the female veterans find in the transition to college?

4. What coping strategies did the female veterans use during their transition into college?

Potential Significance of the Study

The scholarly studies reviewed focus on the characteristics of veterans, transitioning into higher education, and services provided for academic success (O’Herrin, 2011; Vacchi, 2012; Wilson, 2014). This study is important because there is very little research regarding female veterans and their transition into college and it purports to extend the existing research on how the application of transitional services can influence a student’s success in college. Finally, given the lower rate of graduation of female veterans from college studying their transition may shed light on institutional and personal factors that may need remediation to increase success.

Definitions of Terms

Active duty military - A person who is serving in a military force during the Iraq and Afghanistan wars and is currently designated by the military as being in an “active duty” status (U.S. Department of Veteran Affairs, 2013).

Depression - Depression is an illness that causes you to feel sad, lose interest in activities that you have always enjoyed, withdraw from others, and have little energy. It
is different from normal feelings of sadness, grief, or low energy. Depression can also cause people to feel hopeless about the future and even to think about suicide (U.S. Department of Veteran Affairs, 2016).

*Military Friendly* - Schools that welcome veterans through the existence of VA approved programs and services; some feel this label needs to involve more consistency in programs and services (college credit for military service, set policies, the acceptance of non-traditional education sources, flexibility in delivery, etc.) (U.S. Department of Veterans Affairs, 2014).

*Operation Enduring Freedom (OEF)*: Joint combat operation (United States, United Kingdom, and Afghan) in Afghanistan, meant to provide stability and inhibit further terrorist development (Department of Defense, 2012).

*Operation Iraqi Freedom (OIF)*: Mission’s (U.S. led) goal was the removal of Iraqi leader Saddam Hussein as well as the use and trafficking of weapons of mass destruction; mission changed to help with the development of a new, more effective Iraqi government and economy (Department of Defense, 2012).

*Post-traumatic stress disorder (PTSD)* - A traumatic event is something terrible and scary that you see, hear about, or that happens to you, like: combat exposure, child sexual or physical abuse, terrorist attack, sexual or physical assault, serious accidents, like a car wreck, natural disasters, or earthquake. During a traumatic event, you think that your life or others' lives are in danger (U.S. Department of Veteran Affairs, 2014).

*Post-9/11 GI Bill* - Effective August 1, 2009, individuals who have received an honorable discharge from the armed forces and have at least 90 days of aggregate service, or discharged with a service connected disability after 30 days since September 11, 2001,
are entitled to financial support for education and housing. Tuition payments are determined based upon the highest in-state tuition (U.S. Department of Veteran Affairs, 2013).

**Servicemember** - An active duty member of the “uniformed services,” consisting of the armed forces (Army, Navy, Air Force, Marine Corps, and Coast Guard), the Commissioned Corps of the National Oceanic and Atmospheric Administration (NOAA) and the Commissioned Corps of the Public Health Services (U.S. Department of Veteran Affairs, 2013).

**Transition** - A change in assumptions about oneself and the world (caused by event or non-event) that entails behavioral and relationship changes (Schlossberg, 1981).

**Traumatic Brain Injury** - Traumatic brain injury (TBI) is a sudden jolt to your head that changes the way your brain works. The jolt could be caused by a blow to your head, a blast, or an object like a bullet or fragment entering your brain. For people in the military who are deployed, blast injuries are the most common cause of TBI. Falls, fights, sports, and motor vehicle accidents are other common causes.

**Veteran** - A person who served in the armed forces and is eligible to receive GI Bill benefits (U.S. Department of Veteran Affairs, 2013).

**Yellow Ribbon Program** - The Yellow Ribbon Program is a provision of the law that created the Post-9/11 GI Bill. The Yellow Ribbon Program is available for Institutions of Higher Learning (degree granting institutions) in the U.S. or at a branch of such institution located outside the U.S. The program allows approved institutions of higher learning and the VA to partially or fully fund tuition and fee expenses that exceed
the established thresholds under the Post-9/11 GI Bill (U.S. Department of Veteran Affairs, 2013).

**Chapter Summary**

According to the research, (National Center for Educational Statistics, 2014; O'Herrin, 2011; & Vacchi, 2012), there is an overarching theme that the veteran population requires additional guidance when it comes to attending college. Vacchi (2012) explained there is a significant difference in socialization and culture between an academic setting and being in the military.

Wilson (2014) stated, it is the culture of a college to demonstrate support for veterans and their dependents, not a single office of military support services. Veteran students are combining their military training and skills and transitioning them into an academic setting (Wilson, 2014).

There is very little research specifically focused on female veterans and their transition into college. DiRamio et al. (2015) stated, “Because female student veterans can sometimes exist on the fringes of the general student population, or perceive themselves in that way, such a plan should be widespread and include the entire campus community in order to be most effective” (p. 62). This strategy will assist female veterans and their right to receive educational benefits (DiRamio et al., 2015). Due to the lack of data, this study focused on female veterans and their transition experience into college to determine what services are required to support their transition. In Chapter 2 the literature review and theoretical framework are provided. Chapter 3 provides the methodology for the study. Chapter 4 presents and analyzes the results of the study. In Chapter 5 the implications and conclusion for this study are discussed.
Chapter 2: Review of the Literature

Introduction and Purpose

Since there is little research regarding female veterans and their transition into college the researcher focused on literature about female veterans. As a result of the passage of the Post-9/11 GI Bill, veteran enrollment into college will continue to increase and the need for support during the transition into college is necessary (Department of Defense, 2012).

Review of Literature

Veterans transitioning to college is more prevalent now than ever (O'Herrin, 2011). The Post-9/11 GI Bill has funded education and training for over a million veterans or their dependents since August 2009 and has invested over $30 billion dollars in educational related benefits (U.S. Department of Veteran Affairs, 2013).

Eligible candidates to receive the Post-911 GI Bill are veterans and servicemembers who have served 90 or more days on active duty since September 10, 2001. The number of days served on active duty determines the benefits for the National Guard and Reserve members. The benefits are transferrable to immediate family members. The benefits include tuition and fees at a state college or a capped amount of $21,084 per academic year for private colleges, monthly housing allowance, and a stipend up to $1,000 for books, work-study program, and the Yellow Ribbon Program (U.S. Department of Veteran Affairs, 2015a).
As the VA and Department of Defense continue to strengthen programs for a new generation of returning veterans, gender differences are an important consideration (Maguen, Ren, Bosch, Marmar & Seal, 2010). Tamez and Hazler (2014) stated, “It is clear that further research is needed to expand understanding of the unique challenges female veterans returning from deployment face during their process of reintegration” (p. 55).

**History of women in the military.** Women have officially been a part of the U.S. Armed Forces since the beginning of the Army Nurse Corps in 1901, but have unofficially served since the beginning of our United States military. The transition to the all-volunteer force in 1973 proved to significantly increase the opportunities available for women to serve in the military (National Center for Veteran Analysis and Statistics, 2011). New legislation enacted by Congress and new Department of Defense policy after the Gulf War eased regulations excluding women from combat-related positions. The regulatory changes caused over 90% of military occupations to be available to women (Donegan, 1996). Women are more involved and have a larger role in the U.S. military than in the past, with a large amount of women sent to Iraq and Afghanistan. There were 154,536 women deployed at least one time to Iraq or Afghanistan between October 2001 and December 2009 (Armed Forces Health Surveillance Center, 2011). Even though women are barred from direct combat positions, they are still exposed to combat situations (Hoge, Clark, & Castro, 2007). Some of the positions women now hold are military police, intelligence, pilots, mechanics, and convoy transportation medics. These positions put the women at risk of being exposed to combat. The number of women
serving has increased from 2.5% in 1973 to 9% in 2013 and is expected increase to nearly 17% by 2043 (Office of the Actuary, Department of Veterans Affairs, 2014).

**Female veteran characteristics.** According to the U.S. Department of Veteran Affairs (VA) (2015b), most female veterans alive today served during the Gulf War from August 1990 to the present. The VA defines the Gulf War Era as pre and post 911. Pre 911 was from August 1990 to August 2001 and post 911 is from September 2001 to the present (U.S. Department of Veteran Affairs, 2015b). The following characteristics will provide information that will help to understand the female veteran population.

**Age and ethnicity.** As of 2014, the median age of female veterans was 49 and non-veteran females was 46. The median age of male veterans was 64 years old. Compared to non-veteran females, female veterans are more likely to be white, non-Hispanic. Overall, female veterans are more ethnically diverse than male veterans. Male veterans are more likely to be white, non-Hispanic. Both female and male veterans are less likely to be Hispanic (National Center for Veterans Analysis and Statistics, 2016).

**Marital status.** Female veterans tend to get married at a younger age than non-veteran females (National Center for Veterans Analysis and Statistics, 2016). Female veterans are less likely to get married and more likely to get a divorce as compared to male veterans. However, female veterans are more likely to be married and not get a divorce as compared to non-female veterans (National Center for Veterans Analysis and Statistics, 2016).

**Working females and children.** The percentage of working-age women with children under 18 years old increases until the age of 44 and then it decreases. Female
veterans appear to have more children under 18 years old than non-veteran women through the age of 34 (National Center for Veterans Analysis and Statistics, 2016).

**Higher education.** According to the National Center for Veteran Analysis and Statistics (2016), the older female veterans become, the more likely they are to hold a bachelor’s degree as compared to non-veteran females. The data also shows that female veterans are more likely to be enrolled in college, complete some college, complete a bachelor’s degree or an advanced degree as compared to male veterans. Approximately 7% of 17- to 24-year-old and 30% of 25- to 34-year-old female veterans had completed a bachelor’s degree or higher, compared with 10% and 37% of non-veteran females of the same ages. A higher percentage of female veterans ages 35 and older completed a bachelor’s or advanced degree as compared to similar non-veteran women. The difference varied based on age group: 39.5% of female veterans between the ages of 35-44 have a bachelor’s degree as compared to 35% of non-veterans, 36.7% of female veterans between the ages of 45-54 have a bachelor’s degree as compared to 29% of non-veterans, and the percentage continues to increase for female veterans and continues to decrease for non-veterans through the age of 75. A higher percentage of female veterans (46%) has some college experience as compared to male veterans (36.4%). A higher percentage of female veterans (34%) held a bachelor’s degree or an advanced degree as compared to the male veterans (25.9%). The female veterans across all ages showed a higher percentage of attaining a degree compared to male veterans (National Center for Veterans Analysis and Statistics, 2016).

**Poverty.** The U.S. Census Bureau uses income thresholds that vary by family composition and size to determine who is in poverty. When a family’s total income is
less than their threshold, then that family and every individual in it is considered to be in poverty. The poverty thresholds are updated annually for inflation using Consumer Price Index and do not vary based on geography (U.S. Census Bureau, 2015). Female veterans are less likely than non-veteran females to live in poverty. Approximately 9% of all female veterans and 16% of all non-veteran females are in poverty (National Center for Veterans Analysis and Statistics, 2016). Poverty rates are highest for the youngest female veterans between the ages of 17-24. A higher percentage of female veterans (9.4%) lives in poverty as compared to male veterans (6.7%) (National Center for Veterans Analysis and Statistics, 2016).

**Household income/personal income.** The median household income for all female veterans is $54,993 compared to $44,999 for non-veteran females (National Center for Veterans Analysis and Statistics, 2016). Median household incomes are highest for female veterans between 35-44 year-olds ($65,463) and between 45 and 54 years of age ($64,937). The median household income for non-veteran females for those age ranges are $58,465 and $61,482. The median household income for a male veteran is $56,995 as compared to female veterans with a median household income of $54,993. Both female ($54,993) and male ($56,995) veterans’ median household income is higher than non-veteran females ($44,999) (National Center for Veterans Analysis and Statistics, 2016).

**Employment and occupations.** The percentage of female veterans working in management and professional occupations is approximately nine percent higher than that of non-veteran females. A smaller percentage of female veterans (15%) work in service occupations, such as food service, janitorial, and childcare, than female non-veterans
Approximately 36% of female veterans work for local, state, or federal government, as compared to 16% of non-veteran females. Female veterans also have a higher percentage (50%) in management positions, professional sales, and office occupations as compared to male veterans (35%) (National Center for Veterans Analysis and Statistics, 2016).

**Selected characteristics of veterans.** Female veterans (19.1%) are more likely to have a service-connected disability compared to male veterans (16.0%). The percentage of female veterans (24.7%) using VA Health Care is less than the male veterans (29.2%). Female veterans (7.7%) are more likely not to have any health insurance coverage as compared to male veterans (5.7%) (National Center for Veterans Analysis and Statistics, 2016).

**Academic outcomes of veterans.** The Million Records Project (MRP) released in March 2014 conducted by the Student Veterans of America in collaboration with the National Student Clearing House (NSCH) and the U.S. Department of Veteran Affairs focused on veteran achievement in higher education. The Million Records Project is the first national analysis of post 9/11 veterans who used their educational benefits to attend college (Student Veterans Of America, 2014).

The MRP was a quantitative analysis that looked at graduation rates of veterans and determined that veterans using their GI Bill benefits between 2002 and 2010 and finishing their degree by June 2013, had a 51.7% completion rate as compared to non-veterans at 54% (Student Veterans Of America, 2014). There were 898,895 student veterans in the sample and the NSCH identified 859,297 that had degree data (95.6% coverage rate). The other 39,598 may have been from institutions that do not report
academic outcomes. The research found approximately one in five (21.1%) student veterans were female. This is not surprising considering the Department of Defense reports that 14.6% of current active duty military are female (Department of Defense, 2013). The MRP study also suggested that if the study had more female student veterans the completion rate would be higher since females generally have a higher completion rate than males. The data revealed that 79.2% initially enrolled in a public college, 10.7% in a private nonprofit college and 10.1% in a proprietary college/school (Student Veterans Of America, 2014).

The Million Records Project focused on postsecondary completion to measure veteran completion. Out of the 859,297, they were able to use 788,915 records. The other 70,382 had postsecondary enrollment before January 1, 2011. The majority (407,483) of the 788,915 attained a postsecondary degree ranging from a certificate to a doctorate, representing an overall completion rate of 51.7%. The research looked at whether or not the student veteran used their GI Bill benefit. Of the records reviewed 407,483 (79.5%) earned a certificate or a degree after enrolling in VA benefits. More than a third, 166,073 (40.8%) completed at least a postsecondary program prior to using their GI Bill benefits. The researchers used an artificial cutoff date to determine if the student veterans earned a degree. This may have caused an overestimate of students receiving a degree after enrolling in the benefits and an underestimate of those that completed their degree prior to the GI Bill.

The researchers also reviewed the time to completion for the student veterans’ initial degree to their final degree. The average number of years for an associate’s degree was 5.1 years and 6.3 years for a bachelor’s degree. More than half (52.6%) of the
students earned an associate’s degree within four years and the majority (50.5%) completed a bachelor’s degree within five years (Student Veterans Of America, 2014).

Several demographic independent variables were used to explore different veteran subgroups, which included GI Bill eligibility and the criteria for different VA benefits, individuals that may have received a degree prior to using their benefits, educational institutional demographics, and the branch of service in which they served. The MRP eliminated the assumption that the majority of student veterans were using their educational benefits on vocational certificates or on-the-job training programs. The MRP findings indicate that a majority of the student veterans are attaining bachelor’s or graduate degrees. The data suggest that these levels of degree attainment, combined with the skills developed in the military, position student veterans to become strong leaders in numerous fields such as public service, business, science, and engineering (Student Veterans Of America, 2014).

**Exposure to combat.** The changes in the military increase opportunities for women and the ideal of more women in combat is more and more a reality. Street, Vogt, and Dutra (2009) proposed research models examining gender differences after deployment into war zones and subsequent post-traumatic stress disorder (PTSD). Street et al. (2009) focused on Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) and the issues males face after being exposed to combat. Sexual assault, interpersonal stressor, pre and post- military interpersonal trauma, homecoming transition, and a discussion of future direction were included. The data show that the challenge is to apply models that concentrate on males in relation to PTSD and combat trauma to include today’s OEF/OIF women veterans (Street et al., 2009). The study
revealed females (38%) are more likely to handle human remains than males (29%). In contrast, 47% of males compared to 36% of females reported being in firefights and 15% of males compared to 7% of females reported shooting at the enemy. Street et al. (2009) proposed the necessity for research geared towards the prevention of trauma and challenges in mental health issues for both male and female veterans (Street et al., 2009).

Seelig et al. (2012) completed a longitudinal quantitative study focused on the relationship between the mental health of female veterans that deployed after September 11, 2001 and their exposure to combat. Seelig et al. (2012), evaluated survey responses from the Millennium Cohort questionnaire to be included as part of a 7-year longitudinal study, with a baseline and one or two follow-up surveys. They also used military and demographic data to assess the 17,481 female participants and their relationship to PTSD, anxiety disorders, and depression. During the study timeframe, approximately 25% of the females in the study were deployed and experienced combat like situations or combat exposure. Fifteen percent of the population indicated a prior mental illness diagnosis and approximately 4% screened positive for PTSD, depression, or anxiety disorders during the baseline survey (Seelig et al., 2012).

The results of the study showed that exposure to combat increased the probability of a female veteran experiencing mental health symptoms of PTSD more so than anxiety disorders or depression. The results showed the opposite about education and National Guard or Reserves. Symptoms were less probable to transpire if the female veteran had higher education experience and participated in the National Reserves or Guard (Seelig et al., 2012). The mental health issues; PTSD, depression and anxiety disorders significantly increased with the presence of prior exposure to combat. There were
noticeable differences with women participants depending on the location of their deployment (Seelig et al., 2012). Female veterans deployed to Iraq had a greater chance of reporting PTSD symptoms and females deployed to other areas other than Iraq and Afghanistan had increased odds of reporting PTSD symptoms or anxiety disorders compared to females not deployed (Seelig et al., 2012)

Seelig et al. (2012) concluded that deployment experience and exposure to combat, or lack thereof, directly affects the probability of mental health issues when compared directly with non-deployed women. Limitations of the Seelig et al. (2012) study includes self-reported data, potential to misclassify mental health issues and a non-representative sample. The strength of the findings was that females in the millennial cohort study represented approximately 30% and included females from all branches of service. Seelig et al, (2012) believes their research is the first to focus on mental health challenges of female service members who have served in the current era.

**Mental health issues.** The Society for Women’s Health Research (SWHR) held a one-day conference and Resnick, Mallampalli and Carter (2012) studied information from the conference regarding the health of female veterans. They recognized, as female veterans roles were changing in the military, so were their health issues. Female veterans’ exposure to trauma and injury presented new health risks; especially the female veterans deployed to and that have returned from Iraq or Afghanistan. The health issues identified in their report focused on research related to mental health (post-traumatic stress disorder and depression), urogenital health, musculoskeletal health, and traumatic brain injury (TBI).

The researchers defined PTSD symptoms as a re-experiencing traumatic event
that lasts greater than a month (Resnick et al., 2012). Presenting at the SWHR conference, a doctor from the Medical University of South Carolina, Kathryn Magruder, M.P.H., Ph.D., found that men were more likely to be exposed to a wider variety of trauma; however, PTSD is twice as prevalent in women. The data presented a PTSD contradiction considering men had a wider variety of trauma. Magruder (2011) further explained that this may have been caused by the following three reasons, women are at higher risk of PTSD because they experience trauma, specifically sexual assault or abuse; PTSD symptoms last longer in women, and women have stronger reactions to traumatic events. In reviewing Macgruder’s research, Resnick et al. (2012) expressed that as the female population in the military increases, biomedical research and health policies need to be at the forefront. They further stressed that access to gender appropriate care and a progressive understanding of the distinctive needs of female veterans is essential.

Resnick et al. (2012) also found that depression was more prevalent in women than in men. Kristin Mattocks, PH.D., M.P.H., from Yale University spoke at the SWHR 2011 event and discussed mental health conditions among OEF/OIF women veterans. Mattocks (2011) focused her discussion on two research projects she conducted using the Women Veterans Cohort Study (WVCS) from 2007. Her first study reviewed gender differences related to healthcare costs, use of services, and health outcomes among OEF/OIF veterans receiving VA care. The second study conducted by Mattocks et al. (2010) examined pregnancy and mental health among OIF/OEF female veterans. Mattocks et al. (2010) used OEF/OIF veterans from the Northeast and Midwest. Their cohort consisted of 550,849 men and 74,535 women. They used a prospective survey to collect her data regarding combat exposure, non-VA care, reproductive health history,
MST, pain, and quality of life. The study revealed most of the pregnant female veterans experienced mental health issues before their pregnancy, however, they were twice as likely to be diagnosed during their pregnancy compared to non-pregnant veterans. The research showed that untreated mental health during a pregnancy could lead to low birth rates, infant abuse or neglect, and maternal depression. The implications of the study of Mattock et al. (2010) recognized OIF/OEF female veterans suffer from substantial mental health problems and it is not clear if it is a direct result of combat exposure. Patterns of VA and non-VA care among OEF/OIF female veterans are not clearly understood. The coordination between the VA and other private mental health systems and obstetrics is crucial and private providers should inquire about a veteran’s status as it relates to combat exposure, PTSD or other mental health conditions (Resnick et al., 2012).

Christine Sears, M.D., spoke at the SWHR event regarding urogenital health disorders (urinary tract infections (UTIs), pelvic organ prolapse (POP), bladder pain syndrome, (BPS) and urinary inconsistencies. Sears (2011) explained in a study of 841 deployed female veterans that 18.4% experienced UTIs during deployment. Another study revealed a higher prevalence of UTIs in women (4.3%) compared to men (1.7%). “POP is defined as the descent of the bladder, uterus, and rectum because of weakening of the muscles and connective tissue within the pelvic floor” (Resnick et al., p. 897). Through an observational study, Sears presented data on 116 females at the United States Military Academy and 50% showed some loss of pelvic support after training. There was a significant correlation found in a follow up study between POP and paratrooper training.
Sears identified that the strenuous military training of female veterans influenced future pelvic health; however, she also recognized additional research was needed in this area. (Resnick et al., 2012). At the SWHR event, Barbara Boyen, Ph.D., presented on musculoskeletal health. She stressed the importance of advance technology for wounded veterans. The injuries veterans sustain during deployment are much more complex and involve, muscle, skin, nerve, tendons, ligaments and bones. Boyen spoke about a study involving OEF/OIF veterans and pointed out that 54% of the injuries were to the extremities and 29% were to the neck and head. She further expressed the need to look at new technologies from a gender difference perspective. Most of the studies to date were designed to treat wounds of males using male animal models. She stressed that by focusing on the gender based differences the long term regenerative strategies could improve, and for optimum results the technology must be responsive to sex based differences (Resnick et al., 2012).

Gutierrez et al. (2013) conducted a qualitative descriptive study of female veterans’ deployment related experiences and the potential risk of suicide. The research completed was an extension of work by Gutierrez, Brenner, and Huggins (2008) that involved mostly male combat veterans. Interviews were conducted with 19 female veterans (18 OIF/1 OEF) between the ages of 24 and 52 (average age 34.7) deployed to Iraq and Afghanistan combat zones. The researchers used structured open-ended questions to elicit information for the study (Gutierrez et al., 2013).

The data identified emerging themes of female veterans’ deployment and related stressors being a minority in their environment. The interview questions focused on three concepts, perceived burdensomeness, failed belongingness, and acquired ability for
Additional themes emerged during the interview process that did not fit into the three prescribed constructs. The female veterans spontaneously brought up suicide when being asked about coping with feeling like a burden or belonging. Suicide was mentioned as an abstract in all of the discussions with the female veterans. The female veterans mentioned many challenges they faced in their lives and not all limited to the military (Gutierrez et al., 2013). Some of the challenges the female veterans faced in the military were the need to prove themselves and the fact that that they were tough enough to be in the military. Other challenges outside of the military included their transition back to civilian life as it related to their veteran status (Gutierrez et al., 2013). The data for perceived burdensomeness revealed that female veterans felt that asking for help was a sign of weakness, the concern of not pulling their weight was constant, their performance compared to their male counterparts was being judged, they were concerned with the idea of not living up to others expectations, and they set very high expectations of themselves (Gutierrez et al., 2013). The data for failed belongingness showed that female veterans felt they were living in a man’s world and they were not feeling connected when they returned home as a civilian after being deployed (Gutierrez et al., 2013). The researcher also noted that symptoms of PTSD contributed to feelings of being an outsider. The female veterans that experienced a traumatic loss in the military, from combat casualties or the ending of an intimate relationship, led to a sense of failed belongingness post deployment. The data for acquired ability for suicide through habituation to pain disclosed female veterans that discuss their war experiences lead to increased emotional sensitivity, which triggered abnormal coping mechanisms (Gutierrez et al., 2013). Serving in the military and their
Combat experience was explained as both emotional and physical pain. Some of the coping mechanisms included substance abuse or feelings of engaging in violence. Additional themes identified were female veterans’ feeling a loss of identity, self-worth, and grief (Gutierrez et al., 2013). Gutierrez et al. (2013) concluded that more attention needs to be given to women currently serving in the military and to female veterans to better understand their mental health.

Feczer and Bjorklund (2009) completed a case report that examined a female veteran combat nurse of Operation Iraqi Freedom (OIF) who experienced post-traumatic stress disorder (PTSD). The case report data was acquired through an interview with the participant and a review of her records. She was deployed to Iraq for 19 months in 2003 and 2004 and her service included working at the Abu Ghraib prison. The study of the nurse included barriers to treatment through the Veteran Administration (VA) outpatient clinic and the roles she played during her recovery. The researchers concluded that PTSD in female veterans is a significant problem and that diagnosis and treatment may be complicated because of gender (Feczer & Bjorklund, 2009). The researchers encouraged further research in this area and encouraged advanced practice training for medical professionals to address female veterans with PTSD (Feczer & Bjorklund, 2009).

Conard and Sauls (2014) completed a systematic review of 10 research studies completed over the past 10 years to examine if there is a relationship between deployment of combat female veterans and incidences of PTSD. Four variables were used in the study: population (female combat veterans), intervention (deployment to Gulf War II), comparison (compared to male combat veterans) and outcome (incidences of PTSD). The researchers asked the following question, “Does deployment increase the
risk of PTSD in female combat veterans compared to male combat veterans?” (Conard & Sauls, 2014, p. 3). The results of the study indicated that the proposed question was not answered and additional research would need to be done. Several factors did emerge that included issues regarding deployments, demographics, inconsistent screenings and potential bias, military sexual trauma (MST) and new mental health diagnosis (Conard & Sauls, 2014). The data showed that female combat veterans were likely to be young, African American, and that 30% would be of other ethnicities. The researchers found that the location and the length of the deployment had a negative effect on combat veterans due to the intensity of the combat exposure. The more experience with combat exposure, the higher level of PTSD (Conard & Sauls, 2014).

Rivera and Johnson (2014) completed a literature review of journal publications from 1970 to 2012 that focused on female health issues and distinguished between male and female outcomes. The researchers used three time periods to distinguish the involvement of the military. The periods of time were, Vietnam (August 1964 – August 1973); Operation Desert Storm/Shield (August 1990 – February 1991); and Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn (October 2001 – February 2014). The purpose of the study was to look at female veterans specifically, and their health related issues from serving in Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF). The researchers used articles that reviewed female health issues from at least one of the three periods of war (Rivera & Johnson, 2014). This was done to provide a longitudinal look at the issues. Two themes prevailed over each of the war time-periods: gynecological issues and mental health issues. Rivera and Johnson (2014) looked at the physical and psychological toll on female veterans. Female
veterans that served in the Vietnam War self-reported a higher rate of birth defects in their offspring (10.5% versus 7%). Female veterans that were deployed to Operation Desert Storm/Shield had more self-reported gynecological and reproductive problems (Rivera & Johnson, 2014). Data regarding gynecological issues from OEF, OIF and OND is not available; however, early reports of female veterans from OEF, OIF and OND indicate a link between mental health diagnosis and reproductive health issues (Rivera & Johnson, 2014). The data showed the psychological toll of female veterans was more prevalent among combat veterans compared to those deployed to non-combat areas (10% verses 4%). Rivera and Johnson’s (2014) study contradicts the findings of Conard and Sauls (2014) that female veterans have less PTSD occurrences than males. According to Rivera and Johnson (2014), female veterans potentially experienced higher incidences of PTSD and depression compared to their male counter parts. They acknowledge in their conclusion that policy regarding female veterans’ health issues needs to be developed (Rivera & Johnson, 2014). Conard and Sauls (2014) felt that more research will be necessary for the growing population of female veterans. They believed a longitudinal study would be beneficial to look at the changes over an extended time, post deployment, of veterans with the invisible wound of PTSD (Conard & Sauls, 2014).

Vogt et al. (2005), conducted a quantitative study using Mangione's (1998) multistep method. The sampling pool was identified through the VA Health Registry and Defense Manpower Data Center. The participants consisted of 495 Gulf War I veterans from the United States. The selection process included an overrepresentation of female veterans relative to their participation in Gulf War I. Participants received the following separately: a letter explaining the purpose of the study, a survey packet, a reminder card,
another survey packet for non-respondents, and another reminder card if needed. Of the 495 packets sent out, 317 responded (66% response rate). Of the 495 surveyed, 56% females and 67% males responded (Vogt et al., 2005). The deployment stress measures are from the Deployment Risk and Resilience Inventory (DRRI). The DRRI has a collection of measures for studying deployment related experiences of veterans and military personnel (Vogt et al., 2005). The deployment stress measures used in this study were combat experiences, aftermath of battle, perceived threat, difficult living and working environment, concerns about family/relationship disruptions, lack of deployment social support, sexual harassment, depression, anxiety, and post-traumatic stress symptomatology (Vogt et al., 2005). The analysis calculated the means separately for females and males. To compare levels of exposure to deployment stressors and mental health outcomes, independent samples t tests were computed (Vogt et al., 2005). The findings showed that exposure to war zone activities had a negative implication for post deployment transition of veterans. Most research has consisted of male samples. This study identified that a variety of deployment stressors were valid for both male and female. Females reported more interpersonal stressors (68.8%) than males (54.6%), meaning the lack of social support in the war zone could cause a stronger risk of depression among women. Women presented with higher anxiety levels when asked about concerns with family disruptions and lack of deployment support and men showed higher levels of anxiety regarding sexual harassment (Vogt et al., 2005). With regard to the impact of sexual harassment, the researchers did not expect this outcome and it did not support their hypothesis (Vogt et al., 2005).
Maguen, Ren, Bosch, Marmar and Seal (2010) conducted a study that reviewed gender differences in socio demographic, military service, and mental health characteristics among Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) veterans. They completed a cross sectional study utilizing data from the Department of Veteran Affairs (VA). The data used included OIF and OEF veterans from April 2002 to March 2008 that pursued VA health care. The final study population comprised of 329,049 OEF or OIF veterans (Maguen et al., 2010). Female veterans made up 12.4% of the sample. The average age of the veterans was 31.2 and they were 67.3% White/Caucasian, 16.2% African American and 10.8% Hispanic (Maguen et al., 2010). Over half (52.9%) of the veterans were active duty and the others served in the National Guard. Most (67.9%) completed one OEF or OIF deployment. The results indicated that male veterans were diagnosed more often with PTSD (22% versus 17%) and alcohol use disorders (8% versus 3%). The female veterans were younger (29.1 versus 31.4) and more likely to be Black (30% versus 14%) and received depression diagnosis (23% versus 17%) more frequently than men (Maguen et al., 2010). There was a higher prevalence of PTSD and depression diagnosis in older age (over 30) female veterans compared to male veterans (Maguen et al., 2010).

Maguen et al. (2010) found numerous important gender differences in mental health diagnoses, demographics, and military service characteristics, and independent correlations of PTSD and depression diagnoses among veterans who returned home from OEF or OIF and pursued care in the VA health care system. They concluded by recognizing the importance of gender differences when seeking health care and that the VA needs to facilitate more prevention and treatment services for the returning veterans.
Eisen, et al. (2012) examined veterans within one year of returning from deployment from Iraqi or Afghanistan. The study reviewed mental and physical health symptoms, differences by gender, service component, and deployment operation (OIF/OEF). An observational research design was used with a national random sampling of OIF/OEF veterans. The random sample was divided by branch of service and gender (with an oversampling of women to make up 50%). The data was provided by the Defense Manpower Data Center. Out of the 1,833 eligible individuals, 598 veterans completed the survey (33% response rate) (Eisen et al., 2012).

The results of the study concluded that mental health functioning was significantly worse in veterans than in the general population. Of the veterans surveyed, 13.9% screened positive for symptoms of PTSD, 39% for possible alcohol abuse, and 3% for possible drug abuse. Men reported more abuse with drugs and alcohol. This study did not find gender differences regarding PTSD or other mental health issues. OIF veterans experienced more mental health issues, and alcohol and drug abuse compared to OEF veterans. Army (15%) and Marine (25%) veterans reported more health and physical issues than did the veterans of the Navy (5.9%) and the Air Force (9.5%). The Army (47%) and the Marines (45%) screened positive for alcohol use compared to both the Air Force and Navy respondents at (26%). The Marines (7.4%) and the Army (3.4%) respondents screened positive for drug use compared to the Air Force or Navy (< 1%) respondents (Eisen et al., 2012). The researchers concluded that it is important to be able to identify veterans that are at risk of mental health and substance abuse problems (Eisen et al., 2012).
**Military sexual trauma (MST).** Tamez and Hazler (2014) expanded on Frain, Bishop and Bethel’s (2010) original research they developed regarding a five point rehabilitation roadmap to guide rehabilitation counselors working with Iraq and Afghanistan veterans. Tamez and Hazler (2014) expanded the concept to female veterans. The intent of the research was to prepare rehabilitation counselors that may be assisting the female population. One of the rehabilitation considerations for female veterans included military sexual trauma (Tamez & Hazler, 2014). The Department of Veteran Affairs defines MST as rape, sexual assault, or sexual harassment (U.S. Department of Veteran Affairs, 2013). MST has been linked to other serious health conditions such as PTSD, major depression, eating disorders, alcohol and drug abuse, sexual dysfunction, anxiety, personality disorders, and suicide.

The U.S. Department of Defense (DoD) reported that in 2012 there were 3,192 reports of sexual assault, representing a 1% increase over the prior year. The DoD disclosed that 33% of female veterans experienced being raped during their military service and 37% reported being raped more than once. Another 14% of female veterans reported being ganged raped. Female veterans that have experienced MST are three times likelier to develop PTSD (Tamez & Hazler, 2014).

MST can have a negative impact on a veteran’s quality of life, which can affect their employment or daily activities. The transfer of military skills to civilian life is already problematic for veterans. Experiencing an unfavorable event such as MST can be damaging for a veteran trying to improve their life (Cater & Leach, 2011).

**Female veteran homelessness.** As the female veteran population increases so does the proportion of homeless female veterans (Tsai, Kasprow, Kane, & Rosenheck,
Tsai et al. (2014) conducted a quantitative study to examine the service needs between female and male veterans since the Veterans Administration (VA) has been predominately serving males. The researchers used the National Registry of 119,947 users of the VA homeless services from 2011 to 2012 to:

1. Estimate the proportion of female veterans among all users of the VA services.
2. Review the proportion of VA homeless service users who are homeless by gender.
3. Report differences between female and male VA homeless service users who are homeless on socio-demographic and clinical characteristics, as well as on outreach, referral, and admission patterns for a variety of specialized VA services.

The researchers found that 54% of the female veterans using VA homeless services were homeless, which was slightly lower than 59% of male veterans using VA homeless services. Comparing homeless VA service users, females were younger than males, 21% more had dependent children, 8% more were diagnosed with non–military-related PTSD, and 19% to 20% more were referred and admitted to VA’s supported housing program than males (Tsai et al., 2014).

Tsai et al. (2014) concluded that female homeless veterans used their VA homeless services at a similar rate to the other general services. They recognized that the homeless female veterans have unique needs and may require specialized services, especially childcare (Tsai et al., 2014).

Montgomery, Dichter, Thomasson, Fu and Roberts (2015) conducted research that studied demographic and gender influences of veterans’ reports of homelessness or risk of homelessness. They analyzed a 3-month period of veterans that responded to the
U.S. Department of Veteran Affairs Veteran Health Administration (VHA) screener for homelessness and risk. The researchers used a quantitative approach utilizing a multinomial mixed effects model stratified by gender predicted veterans’ reports of homelessness or risk based on age, race, marital status, and receipt of VA compensation (Montgomery et al., 2015).

The researchers’ findings indicated the proportion of positive screens of homelessness or risk of homelessness was greater in females than in males. The positive screens for females were higher at 2.7% as compared to males at 1.7%. Females between the age of 35 to 54, Black, and unmarried were more likely to experience homelessness or risk of homelessness. The greatest predictors for homelessness or being at risk of homelessness were associated with unmarried Black males. Both genders receiving disability benefits were less likely of being homeless or at risk of being homeless (Montgomery et al., 2015).

Montgomery et al. (2015) concluded their research by identifying the need to develop preventions and interventions and acknowledge race differences and subpopulations that may be in need of an intervention. Montgomery et al. (2015) and Tsai et al. (2014) recognized the need for improved services to address not only homelessness of the veteran population, but also the increased female homeless veteran population.

*Veterans transition to college.* Baechtold & De Sawal (2009) did a report that focused on meeting the needs of female veterans in college. They stated, “The number of women veterans attending college is increasing. Campus professionals need to be aware of how issues pertaining to mental health, sexual assaults and gender identity may
influence how these women make transitions to higher education” (Baechtold & De Sawal, 2009, p.36). They further explained that the increase in mental health issues at colleges has increased over the past several years, which is why the mental health concerns with the military service and combat veterans need to be understood (Baechtold & De Sawal, 2009).

Baechtold and De Sawal (2009) focused on female veteran mental health related issues such as PTSD, sexual assault, and their identity development. Due to several shootings occurring on college campuses, mental health issues have received increased attention (Baechtold & De Sawal, 2009). Often mental health concerns regarding veterans and their combat experiences are understood through their personal stories (Baechtold & De Sawal, 2009). The researchers explained that student veterans need a safe place to process their war related experiences and student affairs administrators need to be aware of their needs. Baechtold and De Sawal (2009) reviewed the mental health areas and provided the following information for student affairs administrators to consider; typical stressors for traditional college students may not affect veterans the same way, do not assume that all female veterans arrive on campus with mental health issues, and understand how female veteran’s military experience relates to their college experience. Baechtold and De Sawal (2009) stated:

Faculty and staff, especially student affairs educators who seek to support female veterans as they make the transition from combat to classroom, should consider the following topics in their discussions with students. What steps might you take to connect with other military veterans who are students on this campus? How might you begin making connections with other women on this campus? What
extent are you aware of the support services available to students? What are the sources of your stress as a student, as a female, and as a veteran? (p. 41)

Zinger and Cohen (2010) conducted an exploratory study to review the overall adjustment of veterans post deployment and their transition from the military to college. The purpose of the study was to make recommendations to colleges regarding policymaking, program development, and restructuring (Zinger & Cohen, 2010). The researchers recruited 10 participants using pre-screening criteria (part time or full time students at Queensborough Community College (QCC), veterans deployed to Iraqi/Afghanistan and no restrictions regarding gender, age or non-combat or combat experience. There were nine male (90%) veterans and one female (10%) veteran. The average age for the male veterans was 24.7 and the one female was 27 years old (Zinger and Cohen, 2010). The male veterans were Hispanic (6), Asian (2), and West Indian (1). The female veteran was Eastern European (Zinger & Cohen, 2010). The questions included reason for enlisting, military experience (biggest challenges/pivotal moments), post deployment, emotional issues, personal relationships, coping mechanisms, reflection on self, experience at QCC, and veteran support services at QCC. The researchers identified other areas that could hinder the transition for veterans. These included family conflict, problems with authority, learning how to cope in a non-structured environment, issues with apparent support, identity issues resulting from military service, and post deployment (Zinger & Cohen, 2010). The veterans expressed that they had difficulty adjusting and shared how much they had changed after their military service. The veterans had readjustment challenges that consisted of coping with PTSD, lack of structure as a civilian, depression, physical injury, personal relationships, and functioning
socially. Many found the negative public opinion against war was challenging (Zinger & Cohen, 2010). The data showed that some veterans did not have a sense of belonging, missed the military camaraderie, and reported feeling overwhelmed to the point they had to drop classes when they first enrolled. The data also showed the veterans felt no one was there to support them and assist with various processes such as completing GI Bill paperwork, finding a job, reviewing benefits and registering for classes. The veterans also found some departments more helpful than others and mentioned the campus Veterans Club as providing emotional support and referral information (Zinger & Cohen, 2010).

Zinger and Cohen (2010) developed the following recommendations for colleges to be prepared to meet the needs of the veterans:

- Create a Veteran Center on campus that can be used as a central office for veterans. Partially staff the office with student veterans and make veteran resource information (benefits, scholarships, outside agencies, etc.) available.
- Develop a Veteran Club on campus.
- College counselors should assist with readjustment challenges.
- Provide sensitivity training for faculty and staff.
- Campus health and counseling offices should be aware of the mental health issues veterans experience and be prepared to refer them to the appropriate agency for assistance (Zinger & Cohen, 2010).

Whalen (2013) explained, through research of this topic, one must understand the identified areas in order to begin to know what support would be required for student veterans. They include military populations, military culture, education benefits, post
deployment issues, mental health issues, current support at colleges, and transition from service. Other areas of focus would be to identify what type of support is necessary in the classroom and how a college campus can create a veteran friendly environment (Whalen, 2013).

Some colleges have recognized the need for additional support to student veterans while others continue to think they will fit into the traditional mainstream. Griffin & Gilbert (2015) noted, as President Barack Obama’s goal of becoming the world’s leader in terms of college completion by 2020, it is essential to recognize the needs of an increased veteran population. Developing strategies that increase the probability of veterans graduating and earning their degrees will have a positive impact on this goal while promoting a nation of competitiveness as well as properly rewarding veterans for their service (Griffin & Gilbert, 2015).

DiRamio et al. (2015) conducted an online survey to explore the help-seeking attitudes of college student veterans. The survey instrument used was adapted for use with the student veteran population. The researchers used Attitudes toward Seeking Professional Psychological Help Scale (ATSPPHS) and modified the language to adapt to students with military experience. The researchers asked 20 survey questions and a sample demographic of 167 students was obtained from an estimated population of 1,800 veterans. The data was from seven public institutions, four research universities and three community colleges, in a state located in the southeast of the United States. Demographic data included gender, with 122 males (73%) and 44 females (26%) represented and one participant did not indicate gender on the survey. Sixty-eight of the participants were freshman and sophomores (41%) and 99 were juniors, seniors, or
graduate (59%). More than two thirds (113/68%) served in Operation Enduring Freedom (OEF) and/or Operation Iraqi Freedom (OIF), with 54 (32%) reporting they had not served in combat (DiRamio et al., 2015). The first finding revealed that freshman and sophomore student veterans would be more likely to ask for help in the areas of transition/psychological counseling than juniors, seniors or graduate student veterans. The second finding was based on gender. A statistical analysis revealed that male (14.3%) and female (14.2%) mean scores were statistically equal for “Student attitude toward transition/psychological counseling and “Student attitude toward academic counseling/assistance,” (DiRamio et al., 2015, p. 53-54). The researchers found this to be significant because, in the forty-year rich history of research about gender and help-seeking attitudes, females have scored statistically (quantitative studies) better and empirically (qualitative studies) more positively than males in their attitudes toward seeking psychological help (DiRamio et al., 2015). The researcher believed this study to be the only study where a sample of college-age women scored statistically equal to men in their attitudes toward seeking help. DiRamio et al. (2015) raise the question, “Why do female college student veterans have similar attitudes toward help-seeking as their male counterparts?” (p.54). The researchers used the second part of their study to answer that question by interviewing female student veterans. The researchers wanted to answer the following two questions:

1. How do these women, having served their country in war and now attending college, deal with their transition from military service to campus? (p. 54)

2. How do their help-seeking attitudes differ from other college students? (p. 54)
DiRamio et al. (2015) interviewed 13 female veterans; eight attended a public research university located in the southeast of the United States and five were student veterans at a similar institution located in the north central United States. Three (23%) of the 13 interviewed served in combat and six (46%) were deployed to Iraq or Afghanistan. The female veterans served in different branches of the armed forces (six women served in the Army, three in the Navy, two in the Air Force, one Army Reserves, and one National Guard). The researchers conducted the interviews and used data analysis to prepare their research. DiRamio et al. (2015) identified three contexts within the military culture and their impact on women’s help-seeking attitudes surfaced from the interviews. The three themes arose within the military culture and the impact on females help seeking attitudes. The three themes were responsibility, worth, and pride. The researchers explained responsibility as female veterans having a deep-rooted sense of responsibility to their units and their responsibility to support the reputation of women in the service. Females also expressed added self-imposed pressures or obligations to represent their gender to gain impartiality and advancement in the male-controlled military (DiRamio et al., 2015). The researchers described worth as the female veterans experience with the military culture especially during times of conflict and their status in the military. The researchers described pride as females acknowledging that asking for help could be seen as a sign of weakness (DiRamio et al., 2015).

DiRamio et al. (2015) recommend that colleges be more effective and attempt to learn more regarding the military experiences of veterans in college. The researchers hoped their study’s findings would provide useful information for developing supports and services that ensure a better transition for student veterans, including women
Adult transition theory. Several researchers have used Schlossberg’s (1981) transition theory and the various models to contextualize data they have gathered regarding veterans and their transition into college.

DiRamio, Ackerman, and Mitchell (2008) conducted a qualitative grounded theory study with 25 OEF/OIF veterans using purposeful sampling. The participants were six women and 19 men. The 25 participants were full time students from three demographically diverse colleges and served in Iraq and Afghan wars between 2003 and 2007. The researchers conducted semi-structured interviews. They completed this study to get an understanding of veterans’ experiences to improve student success. They also used the theoretical framework of Schlossberg’s adult transition theory (DiRamio, et al., 2008). The theory would guide the study and provided direction regarding the transitions of student veterans (Goodman, Anderson, & Schlossberg, 2006). Through semi-structured interviews, 16 themes emerged. The researchers applied the 16 themes to Schlossberg’s (1995) three-phase model, moving in, moving through, and moving out. The results provided guidance to higher education professionals. Suggestions included using a holistic approach, providing an orientation specifically for veterans, designated college contacts for veterans (counseling, academic advising, financial aid, faculty, disabilities services, and student organization). The authors specifically mentioned female veterans because of their increasing numbers and the subthemes, such as financial strain and sexual violence that arose through the review of the participant’s interviews (DiRamio, Ackerman, & Mitchell, 2008).
Rumann (2010) conducted a phenomenological study concentrating on veterans that reenrolled into a 2-year college following deployment. The researcher used purposeful sampling to select the participants and the two community colleges selected as the sites. Three semi-structured recorded interviews took place with six veterans. Five of the participants were male and one female. Rumann (2010) used Schlossberg’s (1981) transition theory as the theoretical framework to design interview questions. The study focused on returning to college, utilizing Schlossberg’s (1988) 4Ss model: self, situation, support systems, and strategies. The coding process resulted in four main themes: negotiating the transition, interactions with others, reestablishing personal identities and changes in maturity. Rumann (2010) utilized prolonged engagement, member checking, and peer debriefing to provide credibility and reliability to the study. Low number of participants, finding participants and the researcher’s perceived bias as a non-veteran with a non-military background limited the study. Rumann’s (2010) suggestions for future research included interviewing a variety of groups of veterans not just re-enrolled but also student veterans with disabilities, women veterans, veterans at private institutions, those enrolled in for-profit institutions, and the use of Schlossberg’s (1981) adult transition theory in regards to understanding the transitions of college students.

Wheeler (2012) conducted a qualitative case study focused on the transition process experienced by veterans leaving military service and attending community college for the first time. Wheeler (2012) applied Schlossberg’s (1981) theory of adult transitions in the study to help understand the transition process of veterans as first time college students. Three themes emerged using Schlossberg’s theory when interviewing the veterans. They were academic experiences, personal relationships or connections,
and VA benefit bureaucracy. Non-proportional quota and snowball sampling were
methodologies used to obtain nine participants in semi-structured interviews at a
community college in upstate New York, which had a high veteran enrollment.

Wheeler’s (2012) findings suggested the following support for veterans:

- The need to create a specific office to serve the needs of the veterans.
- The development of transition programs that would facilitate the move from
  military to civilian life.
- Creation of family programs that lead to a support network and an
  understanding of military experiences.
- The intentional creation of locations/areas in which veterans can congregate
  and connect.
- An orientation specifically designed for veterans.
- Faculty and staff training
- Promote opportunities for connection to the campus.
- Demonstration of appreciation towards the veteran population.

Ryan, Carlstrom, Hughey, and Harris (2011) used the Schlossberg model and
applied it to veterans transitioning to college. They utilized the model to develop
questions academic advisors could ask to determine the quality of the veterans’ transition
to college. Ryan et al. (2011) also stated, the goals of advising from the Schlossberg’s
4Ss theory perspective, are achieved by helping students gain a greater sense of control
and hopefulness about making academic transitions (situation), developing academic
motivation, identity, and skills (self), building, identifying, maintaining, and utilizing
support networks (support) and developing and employing effective coping skills

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(strategies). This approach has given faculty and staff an opportunity to assess veterans and decide the best way to advise them for success. Ryan et al. (2011) continued to say, each veteran is different and it is important to know the motivation behind a student veteran’s quest for a college degree. Understanding a veteran’s personal plan, event, and circumstance will help colleges know how they feel about being a student, if they see it as temporary and if they currently have the support systems. College professionals can apply the 4Ss model to develop a baseline of information about veterans in order to provide the support they need to be successful in college (Ryan et al., 2011).

**Chapter Summary**

The literature review comprised in-depth research articles and studies that focused on the veteran population, the history of females in the military, female veteran characteristics, academic outcomes of veterans, exposure to combat, mental health issues, military sexual trauma, female veteran homelessness, veterans’ transition to college, and adult transition theory.

Much of the data concluded that additional research is needed as it relates to gender differences. Female veterans face many challenges post deployment. Using Schlossberg’s (1981) transition theory the researcher will focus solely on female veterans and their transition experience into college and use this study to further the research on female veterans.

This qualitative study will provide an overview of the design and methodology used to develop findings and recommendations that will further the research of female veterans transitioning to college.
Introduction

Chapter 3 includes a review of the research and design appropriateness, research participants, and data collection and analysis. The female veteran population continues to increase and many of the veterans are utilizing their Post-9/11 GI Bill educational benefits when they are discharged from the military (National Center for Veteran Analysis and Statistics, 2011). This study focused on the female veteran’s transition from the military into college. Female veterans bring with them not only their individual experiences but also unique challenges and problems. Colleges need to be in a position to provide the necessary support to female veterans as they make this transition into higher education.

The problem is there is little research regarding the transition of female veterans from the military into college. The following research questions were used to focus on the female veterans’ transition experience into college.

1. What personal characteristics did the female veteran use when deciding to go to college?
2. How did the female veterans’ personal situation influence their transition into college?
3. What support services did the female veteran find in the transition to college?
4. What coping strategies did the female veteran use during their transition into college?
The purpose of this qualitative study was to examine the transition of female veterans enrolled full time who have completed at least one year of college and are receiving GI Bill benefits. A phenomenological approach was used to interview and gain an understanding of the lived experiences of the female veterans (Creswell, 2013). The researcher studied the phenomena of the female veterans’ transition from military to college by focusing on four components, themselves, their situation, support that they may have, and their coping mechanisms as informed by Schlossberg. The intent of this study was to study the veterans’ transition, analyze the findings and use my knowledge to develop recommendations for colleges to support female veterans during this transition.

**Research Context**

The research took place at a college in the northeast area of the United States that has been serving students for over 80 years. It is a diverse private college with multiple locations and has over 4,500 students. The majority of the students are females. Most undergraduate students attend full time and most graduate students attend part time.

**Research Participants**

Once approval was granted from the College’s Institutional Review Board (IRB) the researcher worked with an associate in the Veterans Office to identify female veterans for the study. The researcher provided the associate with information about the study and contact information and the associate emailed the information to female veterans to seek participants. The researcher went onsite and spoke with the Student Veteran Association (SVA). The majority of the students attending the SVA meeting were males; however, they mentioned the study to their female veteran friends. After realizing it was not going to be easy to find participants to meet the original specific requirements (female combat
veterans, full time bachelor degree seeking students in their second year and receiving the Post-9/11 GI Bill) the researcher modified the participant criteria. The new criteria was modified to female veterans enrolled in college who completed at least one year of college and were receiving veteran benefits. After utilizing snowball sampling, the researcher found and began interviewing participants. Participants contacted the researcher directly to schedule either an onsite interview or a phone interview (Smith, Flowers, & Larkin, 2009). Three participants were interviewed face-to-face and five were interviewed over the phone. The researcher used the interviewing process protocol to set the stage of the interview (Appendix A). Notes and all interview materials are locked in a safe at the researcher’s home to ensure their security for 3 years. Audio recordings and transcribed data are stored in password-protected cloud storage and will be kept for 3 years following the interviews.

The population consisted of eight female veterans. The female veterans represented different branches of the military: four Army, two Marines, one Air Force, and one Coast Guard. Ages of the participants ranged from 28 to 51. All were receiving veteran benefits, seven are/have received the Post-9/11 GI Bill, and two were receiving Vocational Rehabilitation. The Post-9/11 GI Bill went into effect August 1, 2001 and is for individuals who have received an honorable discharge from the armed forces and have at least 90 days of aggregate service, or discharged with a service-connected disability after 30 days since September 11, 2001. They are entitled to financial support for education and housing (U.S. Department of Veteran Affairs, 2015a). Vocational Rehabilitation benefits are for veterans who are honorably discharged and have a service-connected disability rating of at least 10% from the VA (U.S. Department of Veteran
A VA rating is determined based on the severity of the disability and ranges from 0% to 100% in 10% increments (U.S. Department of Veteran Affairs, 2015a). Six of the female veterans are enrolled in an undergraduate program pursuing their bachelor’s degree and two are enrolled in a graduate program pursuing their master’s degree. All of the female veterans had transfer credits transferred in from other colleges or military experience that was accepted for credit. Four of the female veterans deployed to either Iraq or Afghanistan, one deployed outside of the United States, and three remained in the United States. The average enlistment time was 5.74 years. Three of the female veterans were married, two were divorced, and three were single. The following profiles briefly describe each participant of the study.

**Participant 1.** Participant 1 is a 28-year-old Black combat veteran who served in the Army and continues to serve in the Army Reserves. She enlisted in 2009 and deployed to Afghanistan in 2012 for Operation Enduring Freedom (OEF). Her deployment was approximately one year. In 2014, she left active duty and joined the reserves. She is single with no children. Participant 1 receives the Post-9/11 GI Bill education benefits to attend college. She is studying for a Bachelor’s Degree in Criminal Justice. When she started her bachelor’s degree, she transferred over 70 credits from other colleges.

**Participant 2.** Participant 2 is a 31-year-old Hispanic veteran who served in the Army from 2005 to 2011. During her active duty, she deployed to Germany for 3 years and Korea for approximately two years. She is divorced with one child. Participant 2 receives the Post-9/11 GI Bill education benefits to attend college. She is studying for a
bachelor’s degree in Information Systems. When she started her bachelor’s degree, she transferred close to 30 credits from other colleges.

**Participant 3.** Participant 3 is a 35-year-old Black combat veteran who served in the Marines. She enlisted in 1999 and deployed to Iraq in 2003 for Operation Iraqi Freedom (OIF). Her deployment to Iraq was approximately five months. She is divorced with two children. Participant 3 receives the Post-9/11 GI Bill education benefits to attend college. She is studying for a bachelor’s degree in Health Services. When she started her bachelor’s degree, she transferred 12 credits from other colleges.

**Participant 4.** Participant 4 is a 24-year-old Black veteran who served in the Army from 2010 to 2014. During her active duty, she did not deploy outside of the United States. Participant 4 grew up in a military household, both of her parents served in the Army. Her father remains in the army on active duty. She is single with one child. Participant 4 receives the Post-9/11 GI Bill education benefits to attend college. She is studying for a Bachelor’s Degree in Business Administration. When she started her bachelor’s degree, she did not have any transfer credits.

**Participant 5.** Participant 5 is a 44-year-old White combat veteran who served in the Army. She enlisted in 2001 to 2007 and deployed to Iraq in 2004 for Operation Iraqi Freedom (OIF). Her deployment to Iraq was approximately 15 months. She is divorced and remarried with two older children. Participant 5 receives the Post-9/11 GI Bill but recently received Vocational Rehabilitation education benefits to attend college. She graduated with an associate’s degree in Information Systems, a bachelor’s degree in Health Services and just completed her M.B.A. in April 2016. When she started her
bachelor’s degree, she transferred the majority of her credits from her associate’s degree from another college.

**Participant 6.** Participant 6 is a 37-year-old Black combat veteran who served in the Air Force. She enlisted in 1999 to 2011 and deployed to Iraq in 2005 for Operation Iraqi Freedom (OIF). Her deployment to Iraq was approximately four months. Then she deployed to Kuwait for six months. She is single with two older children. Participant 6 received the Post-9/11 GI Bill education benefits to attend college. She recently graduated with her M.B.A. There were no transfer credits towards her master’s degree.

**Participant 7.** Participant 7 is a 51-year-old Black veteran who served in the Marines. She enlisted in 1988 and medically discharged in 1990. Participant 7 did not deploy outside of the United States. She is single with four children. Participant 7 receives Vocational Rehabilitation education benefits to attend college. She graduated with an associate’s degree in Psychology and enrolled for her bachelor’s degree in Criminal Justice. When she started her bachelor’s degree, she transferred the majority of her credits from her associate’s degree from another college.

**Participant 8.** Participant 8 is a 31-year-old White veteran who served in the Coast Guard from 2005 to 2010. She worked on a shipping vessel in international friendly waters, but did not deploy to at risk areas. She is married to her wife of three years with no children. Participant 8 receives the Post-9/11 GI Bill education benefits to attend college. She just completed her bachelor’s degree in Health Services. When she started her bachelor’s degree, she transferred in approximately 80 credits from other colleges.
Table 3.1

*Characteristics of Participants*

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Data</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>20-29</td>
<td>2</td>
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<tr>
<td></td>
<td>30-39</td>
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<td></td>
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<tr>
<td></td>
<td>Hispanic</td>
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</tr>
<tr>
<td>Marital Status</td>
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<tr>
<td></td>
<td>Married</td>
<td>3</td>
</tr>
<tr>
<td></td>
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<tr>
<td>Military Branch</td>
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<tr>
<td></td>
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<tr>
<td></td>
<td>Air Force</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Coast Guard</td>
<td>1</td>
</tr>
<tr>
<td>Years Enlisted</td>
<td>2-4 years</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>5-8 years</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>9-12 years</td>
<td>1</td>
</tr>
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<td>GI Bill Benefits</td>
<td>Post 9/11</td>
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</tr>
<tr>
<td></td>
<td>Rehabilitation</td>
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</tr>
<tr>
<td>Degree of Study</td>
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<td>6</td>
</tr>
<tr>
<td></td>
<td>Master’s</td>
<td>2</td>
</tr>
</tbody>
</table>

Individual interviews were scheduled and the female veterans were assigned a participant number in order to protect their anonymity. The researcher used the assigned number to identify the participant for the remainder of the study. Each participant completed an Informed Consent Form that the St. John Fisher College Institutional Review Board (IRB) approved (Appendix B). The participants interviewed over the phone signed and emailed the consent form back to the researcher. The Informed Consent Form explained
the process and the study as well as their role as a participant. The form confirmed the participant’s willingness to participate and ability to withdraw from the study at any time.

The researcher was the interviewer. The researcher conducted over the phone interviews and in person one-to-one interviews at the campus the female veteran attended. Each interview was approximately 45 minutes to 1 hour. Interview questions focused on the female veteran’s transition into college.

At the end of the interview, the researcher gave or mailed each participant a $25 American Express gift card for travel expenses and time. One participant wanted her $25 to go to another female veteran; the researcher sent it to another participant who had already received a $25 gift card.

**Instruments Used in Data Collection**

The researcher conducted eight qualitative interviews at the attending campus of the female veterans and over the phone utilizing structured questions (Appendix C) (Creswell, 2013). Each participant completed a demographic information form that included age, marital status, military branch, enlistment dates, deployment dates, veteran benefits, program of study, and enrollment dates at the college. The interview was semi-structured and the female veterans were asked 15 questions. The researcher digitally recorded each interview using a Sony MP3 recorder and downloaded it to the researcher’s computer. Once the recorded interview was downloaded to a password protected file, the researcher immediately deleted it from the recording device. The structured qualitative interview questions focused on the female veteran’s transition into college (Creswell, 2013).
Data Analysis Procedures

The researcher digitally organized the eight interviews and had them transcribed. The transcripts were reviewed and the researcher validated the information. Creswell (2013) states, “qualitative validity means that the researcher checks for accuracy of the findings by employing certain procedures” (p. 201). The researcher used the following validity strategies: member checking, rich thick descriptions, clarity of researcher bias, and peer debriefing. The interviewer conducted peer debriefing with a female veteran with over 28 years of military experience who recently retired as a Command Sergeant Major. The Command Sergeant Major will be attending college in the fall utilizing her Post-9/11 GI Bill. The researcher employed the Command Sergeant Major’s military experience to validate the coding process and the reliability of the identified themes. The researcher organized, reviewed, and carefully dissected the transcripts word by word using comments in Microsoft Word. The researcher extracted the comments and put them into Microsoft Excel to begin the data analysis/coding (Creswell, 2013). Data was reviewed repeatedly, line-by-line to develop an overall understanding of the participants’ experience during their transition to college (Creswell, 2013). The researcher used the transcriptions to describe, classify, and interpret data into codes and themes. The themes established an overall understanding of the phenomenon occurring during the female veteran’s transition into college (Creswell, 2013). The researcher used Microsoft Excel to count the frequency of themes identified in the interviews. This process assisted with a consensus among the participants and aided in the coding process.

Once the researcher segmented the data into appropriate themes of meaning the transformation process began transforming the participants’ responses and language into
more abstract terms that allow for the components of the experience to be compared across all of the participants (Creswell, 2013). The researcher used the final themes and prepared a narrative summary of the essential elements of the transition phenomenon into college across participants. This structure represents the heart of the experience of the phenomenon of transition and makes up the findings of the study.

Summary

The researcher’s findings presented in Chapter 4 represent the voices of the female veterans and their transition into college. The analysis in Chapter 4 utilizes the theoretical framework of Schlossberg’s (1981) transition theory.
Chapter 4: Results

This study examined the transition of female veterans into college. The researcher used Schlossberg’s (1981) transition theory, the 4Ss model, to have a better understanding of the female veteran’s transition into college. This chapter begins with an overview of the research questions, followed by the data analysis and major findings, the identification of themes and a brief description of each participant. The conclusion will summarize and explain how the findings addressed each research question.

The female veteran’s military branches may have been different but what they experienced during enlistment and when they transitioned into college were very similar. The researcher will use the voices of the female veterans throughout this chapter to demonstrate a clear understanding of what the female veterans experienced.

Research Questions

1. Chapter 4 presents the findings of the study by addressing the research questions: What personal characteristics did the female veteran use when deciding to go to college?

2. How did the female veterans’ personal situation influence their transition into college?

3. What support services did the female veteran find in the transition to college?

4. What coping strategies did the female veteran use during their transition into college?
Data Analysis and Findings

This chapter provides themes and categories centered on Schlossberg’s (1981) transition theory using the 4Ss model (self, situation, support, and strategies for coping) to examine the female veterans’ transition into college. The purpose of the interviews was to identify themes shared by participants about the phenomenon of transitioning from the military into college. From February 2016 to April 2016, the researcher conducted eight semi-structured interviews either in person at the college where the female veteran is attending or over the phone. The participants signed the approved consent form as required by the St. John Fisher College (SJFC) Review Board (IRB). See Appendix B for SJFC IRB approval.

An inductive approach was used to observe a number of instances in order to say something general about a group of instances (Creswell, 2013). The researcher began to see initial patterns emerge from the interviews. A data driven coding process was utilized, where the researcher starts out without codes and develops them through the reading of the transcripts. (Creswell, 2013).

Identification of themes. The researcher had each interview transcribed by a professional third party transcription company and then thoroughly analyzed each transcript line by line, extracted key statements, and put them into Microsoft Excel. Again, keeping the theoretical framework in mind the researcher used Schlossberg’s (1981) 4Ss model (self, situation, support, and strategies for coping) to group the key statements, which also aligned with the research questions. Responses from the interviews were coded into themes and categories and then sorted in Microsoft Excel into appropriate tables according to the themes. Microsoft Excel was essential for analyzing
the data for each research question and identifying the frequency of each theme. The interviews focused on the meaning the participants have given to their lived experience of transitioning from the military into college. In order to understand the meaning behind their experiences, the researcher used the data driven coding technique to identify themes discovered in the transcripts while keeping the literature review in mind. The researcher was able to categorize the themes into five categories (individuality, lifestyle choices, education, mental health, and support). The categories are described in Table 4.1.

Table 4.1

4Ss Connected to Categories and Description of Themes

<table>
<thead>
<tr>
<th>Schlossberg’s 4Ss Model</th>
<th>Category and Theme</th>
<th>Description of Categories and Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td>Individuality</td>
<td>This refers to the way the female veterans were identified (soldier, veteran, student) and how they see themselves. As well as how their identity was lost when they had to be silenced or tolerant of certain situations</td>
</tr>
<tr>
<td>Situation</td>
<td>Lifestyle Choices</td>
<td>Lifestyle Choices is a reflection of the decisions the female veteran made along the way.</td>
</tr>
<tr>
<td>Situation</td>
<td>Education</td>
<td>This includes education while in the military and after the military. Also includes support services, student involvement and comradery with other veterans while in college.</td>
</tr>
<tr>
<td>Support</td>
<td>Support</td>
<td>This refers to the support or lack of support the female veterans received during their transition.</td>
</tr>
<tr>
<td>Strategies for Coping</td>
<td>Mental Health</td>
<td>This includes mental health issues and unhealthy situations female veterans experienced during or after the military.</td>
</tr>
</tbody>
</table>
**Frequency of themes.** Findings revealed a list of emerging themes, its categories, and its frequencies, displayed in Table 4.2. The analysis and coding of 493 statements yielded the development of 39 themes. The themes were analyzed for similarities and then grouped into the various categories. Five themes mapped to the category of individuality, seven themes aligned to the category of lifestyle choices, 11 themes aligned with education, five themes aligned with the support category and 11 different themes fell under the category of mental health. During the interviews, the frequencies of the themes were consistent among the eight female veterans.

The researcher intentionally added support services to the education category to enhance the experience the female veteran had transitioning into college. The support category is the type of support or lack of support the female veterans had during their transition and does not include support services. For example, family support is not a service and is described in the support category.

By keeping the support services theme under the education category the reader will have a better understanding as it relates to the female veterans’ college experience and their needs during the transition.
<table>
<thead>
<tr>
<th>Category</th>
<th>Theme (Frequency)</th>
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<tbody>
<tr>
<td>Individuality</td>
<td>Identity (44)</td>
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<tr>
<td></td>
<td>Self-Identity (35)</td>
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<tr>
<td></td>
<td>Tolerant (21)</td>
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<td></td>
<td>Silenced (9)</td>
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<td></td>
<td>Military Family (5)</td>
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<tr>
<td>Lifestyle Choices</td>
<td>Career (18)</td>
</tr>
<tr>
<td></td>
<td>Demonstrate Success (9)</td>
</tr>
<tr>
<td></td>
<td>Support other female veterans (8)</td>
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<tr>
<td></td>
<td>Regret (6)</td>
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<tr>
<td></td>
<td>No regret (2)</td>
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<tr>
<td></td>
<td>Independence (1)</td>
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<tr>
<td></td>
<td>Sacrifice (1)</td>
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<tr>
<td>Education Support</td>
<td>Support Services (36)</td>
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<tr>
<td></td>
<td>Gender Specific Services (33)</td>
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<tr>
<td></td>
<td>Veteran Benefits (22)</td>
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<td></td>
<td>Comradery (22)</td>
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<td></td>
<td>Veteran Friendly Institution (16)</td>
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<td></td>
<td>Responsibility (14)</td>
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<td></td>
<td>College proximity (2)</td>
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<td></td>
<td>Finances (2)</td>
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<tr>
<td></td>
<td>Military Education (1)</td>
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<tr>
<td></td>
<td>Student involvement (1)</td>
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<td></td>
<td>Loss of time (1)</td>
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<tr>
<td>Support</td>
<td>Families &amp; Friends (23)</td>
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<tr>
<td></td>
<td>Veteran Support (10)</td>
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<tr>
<td></td>
<td>Lack of support (4)</td>
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<tr>
<td></td>
<td>Deployed/Not deployed (3)</td>
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<tr>
<td></td>
<td>Military support (1)</td>
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<tr>
<td>Mental Health</td>
<td>Sexual harassment (8)</td>
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<td></td>
<td>Suicide (5)</td>
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<td></td>
<td>Alcohol abuse (4)</td>
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<td>Sexual assault (3)</td>
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<td>PTSD (2)</td>
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<td>Depression and Anxiety (2)</td>
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<td></td>
<td>Depression (1)</td>
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<td>MST (1)</td>
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<td>Mental illness (1)</td>
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<td>Therapy (1)</td>
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<td></td>
<td>Trust issues (1)</td>
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**Major findings.** To conceptualize the findings using Schlossberg’s (1988) 4Ss model the researcher related each category to one of the 4Ss. Individuality relates to self, lifestyle choices, and education to situation, support-to-support, and mental health to strategies for coping.

**Individuality.** The female veterans not only expressed how they see themselves but also how others see them. One female veteran mentioned that she would like to keep her military identity and student identity separate. The female veterans also expressed that it would take them a while to stand up when asked if all of the veterans in the room could stand. They did not want to be judged or stereotyped. Seven of the female veterans described themselves as being compassionate, four determined, three loyal, two bold, two goal oriented, two supportive, one stubborn, one intelligent, and one unafraid. Several mentioned they could not connect with their femininity being in the military, that you needed to have thick skin and not show any sign of emotion or you would be considered weak. One female veteran stated, “I was identified as a soldier not a female.” Several of the female veterans mentioned that they could not speak up regarding various situations in the military because there were only male authority figures and they knew it would not go anywhere and be a poor reflection on them. They felt “silenced” and often times they needed to tolerate things their male counterparts did not.

Tolerance was a theme strongly identified throughout the data, not only the tolerance used in the military but also the tolerance used in college among their peers. The female veterans were older students with experiences far beyond the classroom. They found themselves among a younger immature crowd in college that at times made it
difficult not to react to the disrespectful behavior. One female veteran finally spoke out, “Be quiet. I am trying to listen to the teacher. I’m not trying to be cool.”

The reasons why each female veteran joined the military varied. Two came from a military family; the majority wanted a better life and an opportunity to get an education. Education was a strong motivator among the female veterans.

**Lifestyle choices.** The choices the female veterans have made leave some with regret and others with no regret. The regret that the female veterans identified was not going to college first or sooner. They felt like they were behind all of their friends in that regard, not only in their education, but also in their career. The female veterans recognized their military experience did not easily translate to their work experience, leaving them to take entry level positions even though they had other qualifications that perhaps could not be explained or communicated in a way that an employer would understand. This was also identified as an issue in college. While all of their friends were graduating high school and going to college, the female veterans were enlisting in the military. Several of the female veterans mentioned they wanted to be role models for their children and other female veterans. They want to be successful and demonstrate that success to others. One of the female veterans explained how she likes her independence now as a civilian. Another female veteran explained the sacrifice she made leaving her child with her parents while she was deployed.

**Education.** The themes used in the education category focus on the phenomenon of transition into college and the resources needed to ease the transition and the feeling the female veteran had about the college and its environment. Female veterans feel as though they lost time by starting college later on in life. The female veterans
acknowledged their military experience (instruction and responsibilities) could not only translate to their career but also to the college for college credit. Much of their instruction in the military did not equate to college credits. In selecting their college, the female veterans considered the location and most of all that it was veteran friendly.

Veteran benefits. Each of the eight female veterans received veteran benefits for their education. These benefits were significant in their decision to go to college. Seven of the female veterans receive/received the Post-9/11 GI Bill and two received vocational rehabilitation. The most significant support is the monthly housing stipend that ranges from $3500 to $3700 a month. The female veteran must be full time and take one onsite class to receive the housing benefit. One female veteran borrowed additional financial aid in addition to her veteran benefits.

Support services. Several major findings were identified that could shape policy in the area of military to college transition. The veterans suggested training more staff regarding veteran benefits (admissions and financial aid) and providing training to the professors that have veterans in their class. Advertise additional benefits and resources that may be available to veterans. For example, one veteran said, “After learning about the Vet Center I switched to free services and support groups.” Another female veteran said, “A lot of resources people have to do the research.” The female veterans believed additional awareness was key. Many of them spoke about the excellent job the college does communicating to the veterans using texting and social media. However, a lot of the information disseminated to veterans is through their Student Veteran Association (SVA) club meetings, which meets periodically so the female veterans that cannot get to the meetings feel they are missing valuable information. The female veterans that attend
regularly commend the college for bringing in outside resources to speak to the veterans. The SVA club also provided the female veterans as well as other veterans a place to meet and discuss their military experiences. “Veterans Club is the best thing ever,” stated a female veteran.

*Gender specific support services.* Many of the female veterans mentioned having a female veteran representative in the admissions office. They would feel more comfortable speaking to another female about their needs. One stated, “Female veterans may feel more comfortable speaking with another female who can relate to some of their military experiences.” Another one said, “So it might be good to have a female in the veteran’s admissions office.” Several mentioned having a female veteran counselor on staff that could proactively reach out to female veterans to assist with their transition. As described by one female veteran, “Onsite proactive counseling for female veterans that may need to speak with someone. Counselor needs to be female.” Several of the female veterans are single mothers and explained the importance of affordable childcare. The female veterans explained the significance of having female veteran groups with which to sit and talk. “Most of the veteran groups include both male and female and don’t understand the different conversations that would take place if they were separated,” said one of the female veterans.

*Comradery.* Knowing the college was veteran friendly played a role in the female veterans choosing this specific college. Many of the female veterans explained the importance of having other veterans around them. One of the female veterans stated, “Having a veteran in the class definitely helped.” Another said, “It is important to be enrolled with people that would understand me now.”
Support. The female veterans explained that their overall support came from their family, friends, and other veterans they have met. A few of them mentioned the lack of support from the Veteran’s Administration, especially as it related to transitioning out of the military and becoming a civilian. They spoke about a transition program they participated in during their final days of being in the military, but it was too much information to comprehend. They also mentioned having so many other things on their mind during that time. Several of the female veterans discussed the importance of social media and being able to stay connected to their military friends as well as being part of online veteran support groups. One female veteran said, “Female Veteran Support Group on Facebook, Beauties in Boots provides moral support to females.”

Mental health. Many of the female veterans revealed having mental health issues or knowing someone with military related health problems. The data aligns with the researcher’s literature review. The problems included alcohol abuse, depression, anxiety, military sexual trauma (MST), and post-traumatic stress disorder (PTSD). A couple of the female veterans experienced sexual assault and all experienced sexual harassment at one point or another during their military experience. One female veteran explained how it took her a while to trust people again and another spoke about the dislike of being in large crowds. One female veteran explained, “You can’t disclose mental illness in the military. Oh, well you're not fit for combat anymore, we don't think that you should be doing A, B, or C.” Further explaining that even if a soldier thought something was wrong with them they could not disclose it or it would be held against them and they would appear weak. One of the female veterans expressed how therapy has played a major role for her as a civilian.
Findings by question. Each of the four research questions connects to Schlossberg’s (1981) 4Ss model. Research question 1 relates to self, research question 2 to situation, research question 3 to support, and research question 4 to strategies for coping. The researcher has outlined each of the four research questions with the corresponding questions used during the interviews. This will give the reader the opportunity to gain insight into how the female veterans see themselves, their situation, the support they have had, and the strategies they use for coping. The researcher utilized the responses from the female veterans for the reader to have a greater understanding of the female veterans lived experiences and how they saw their transition from the military into college.

Research question 1 (Self). Research question 1 asked: What personal characteristics did the female veteran use when deciding to go to college? There were four interview questions developed to answer research question 1.

Interview question 1a. What made you want to go to college after the military?

Participant 2 explained what made her want to go to college,

The military, knowing the benefits that I get from the military for going to college, I figured I would take advantage of them to expand my opportunities. To be able to get a better career or start a career with a higher degree.

Participant 3 said, “My main reason was for my kids, to provide a better future for them. I figured the only way to do that is to go back to school.” Participant 8 went to college for a year before dropping out and then joining the military she explained her decision as,

I was not sure what I wanted to do. I was just taking the basic liberal arts courses.

After I got out, I definitely matured. I went in when I was 21. At the time, I was
25 when I came out and I just knew I wanted to get a degree. I was not sure in what, but coming out of the military and having the medical experience and background of being a medic, I thought that that would probably be the best route to go.

*Interview question 1b.* Describe your transition about being identified as a student after being identified as a female veteran. Participant 1 explained,

It was very, very different. I do not know about anybody else but for me I tend to try to separate the two. I consider my civilian life of course my personal life, for a long time I did not have a personal life. Now I was actually able to come into my own. Do the things that I want to do for me. That transition was difficult because you are so used to the structure, the discipline, you do what I say and now I had the freedom to say what I wanted to do for my life.

Participant 2 said,

In the beginning, just the transitioning into the civilian life was hard enough. I was in the military for 6 years so I was already used to a certain way of life. Being outside of the military, starting this whole new life at first I felt a little lost but going back to school actually helped me get myself back together I'd say and it gave me a guide in something to look forward too. The transition was actually, it was pretty good. It was not as bad as I thought it would be to go to school. Into the civilian life, it was a lot harder than going to school.

Participant 3 shared,

When I first started college, I stayed to myself. I went to my classes, and then went home. Came to school, went to classes, went home, that was it. Never was
involved in any groups, school activities, or anything until recently. I have been in the SVA for, maybe my second year. Once I am there, I feel more comfortable, because I am surrounded with others that understand where I am coming from. We have been in the same, how can I say it, we understand each other. It is different than when you are in a classroom setting with other people that have not been in the military. The way we speak, or the way we conduct ourselves.

Participant 4 noted,

I guess an adjustment. Just as the same concept of being in the military, things are like, straight away; everything is uniformed. In this environment, it is not, not to say that the school is disorganized or anything like that but in a classroom setting, it is more relaxed. It is not someone yelling at you or trying to hold your attention for as long as possible, and if not, there is some repercussions behind it. Here, it is as if you can be relaxed, just a little bit, that is where the adjustment falls into place. That was my biggest adjustment, finally getting to unwind, I guess.

Participant 8 described her transition experience,

Yeah. Coming out of the military, just in general, your mindset or my mindset, at least, was almost you are nervous, you are scared. You come back to the world you had been in, but you are a completely different person coming out of the military. It was almost the same feeling I got when I first joined, going from civilian to enlisted military. It was somewhat weird. It was almost as if we had been in a time capsule and here is what has been going on when you are in. I was definitely a little nervous coming out. I did not realize how much responsibility I
had in the military, but at the same time, many things were done for me, people
told me where to eat, where to sleep, where to live, what to wear. There was a
sense of freedom in that because I did not have to think about those things. I
think, too, the normal person, especially if they have never been in the military,
they would look at that as you had no freedom, but it felt the opposite way.
Getting out and having to do everything on my own, again and find out how to
register for school and the costs and everything like that, it was definitely difficult
at times. I knew that I wanted to get out. I knew I did not want to make a career
of the military and I knew I was ready to go back to school.

Several of the other participants also expressed the structure in the military compared to
the structure of being a civilian and a student.

*Interview question 1c. What personal attributes contributed to your decision?*

Many of the attributes the female veterans recognized was determination and wanting a
better life for their family as well as a good career. Participant 1 explained:

> At the time, I was going to college and trying to take a few classes but I had three
> jobs and have always been a go getter. It’s like I grew up this way and I don’t
> want to make the same mistakes as my parents or my family members so just
> looking at them pushed me forward.

Participant 5 simply stated, “My goal to want to achieve things. I like to set goals and I
have a bucket list and my MBA was one and my doctoral degree was just added to it.”

Participant 3 explained her attributes were,

> I wanted to do it! I am at the point now where I am not ready to give up. Yes, I
did say my children, but, to provide more for my kids, I know it starts with me.
To provide a better future for them. In addition, I am over 30 years old, but I wanted to teach them it is never too late to finish school regardless of what age. Participant 6 explained being a role model and stated, “I think when you want to tell your kids that higher education is important then you need to make sure that you can complete that as well. They cannot mirror something they have not seen.”

*Interview question 1d.* After completing a year of college, how do you feel now about the decision you made? Many of the participants were happy with the decisions they made. A lot had to do with the location of the college. One participant second guessed the timing of going back to college since she is a single mother with a young child. Participant 1 said, “I’m extremely happy. I knew it was going to be hard which it was but I’m getting closer to that goal.” Participant 2 expressed,

I feel great. I feel like it was probably the best decision I ever made and I do not know why I did not do it before. I do know why it's just I regret waiting so long to get my education.

Participant 5 saw the value of her education and explained, “Getting my bachelor's degree has given me a promotion at work and I'm looking at another promotion afterwards with my MBA.”

**Research question 2.** Research question 2 asked: How did the female veterans’ personal situation influence their transition into college? There were three interview questions developed to answer research question 2.

*Interview question 2a.* What made you select this college? Most of the female veterans mentioned they chose this particular college because it was veteran friendly, another appreciated the one on one attention she received from the very beginning and
how the college showed the students an academic roadmap to graduation. Other reasons for choosing this college included proximity, overall veteran support and the helpfulness from the military staff employed at the college that are part of the admissions process.

Participant 1 shared,

My best friend actually went to this college and she spoke to me about possibly coming here because she remembered the veterans here at school. Then I looked it up and I actually came into the interview with the career counselor and made my choice from there. I need to find a community where I felt comfortable and as soon as I was back in school, I felt like I was back in the barracks hanging out with my battle buddies.

Participant 2 was pleased to learn the college accepted the majority of credits she had from another college and her military experience. She explained,

Another reason was that, like I said, military friendly, I knew they were going to take all of my credits. Not every college does that. They took my military credits. They took the credits from my previous college. Everything that I had, they took most of it.

Interview question 2b. Knowing what you know now, is there anything you would have done differently? Many of the female veterans’ responses echoed Participant 2 who said, “Knowing what I know now, definitely would have started coming to school as soon as I got here 2 years ago. Probably would have been done with my degree right now.” There was some regret waiting to go back to school and complete their degree.

Participant 3 explained,
Yes, when I first got in, maybe interacting with people more. Joining clubs, because now being that I am at the end of, this is my last year, it is many things. I am like, “Oh, I could have done this, I could have done that,” as far as with the different clubs.

This was also a common response among the female veterans. Many wished they got more involved as a student earlier on when they first started at the college. A couple are very involved in the SVA club now and expressed how valuable it has been.

*Interview question 2c.* What will a college degree do for you? The response for this question varied among the female veterans. Participant 4 mentioned owning her own business one day, Participant 6 wants to continue her education and get her master’s degree and Participant 7 will receive a promotion from graduating with her masters and she too wants to continue her education and obtain a doctoral degree. All of the female veterans acknowledged the value of an education.

*Research question 3.* Research question 3 asked: What support services did the female veteran find in the transition to college? There were four interview questions developed to answer research question 3.

*Interview question 3a.* What have been your sources of support since beginning college? All of the female veterans said that their greatest source of support was their families. The college has played a significant role as a support system for the female veterans. Other support included the SVA club and having opportunities to be with other veterans as well as the professors and administration. Participant 2 shared the following,

When I first got here, it was just my family that was my support system. I did not have any friends out here. I was just going through a divorce so my family was
able to just be there for me as much as they could, but at the same time that was a little bit overwhelming because they had their own issues. I felt like I was dealing with my own issues as well as theirs. Just like, they were dealing with their own issues as well as mine. Yeah, it does get a little bit overwhelming and I figured I would make some friends. Definitely when it comes to support systems, I would have to say my family and the veterans in the school. Everybody in the veteran's club, they all have been such a wonderful support system.

When I first came to the school, I was actually going through a major depression and anxiety issue due to my divorce and everything. Not just the divorce, it was just the change. I was sleeping on a couch with my son in the middle of the projects. It was very frustrating trying to get acquainted and everything. Trying to get my son back on track. Yeah, it was stressful. During my first semester, I was dealing with it. It was not until last semester, which is my third semester that I started going to the veteran’s club and meeting new people and ever since then it has been a 360 change in my life.

They have shown me that they are there. They are friends. They are good friends. They build you up when you need a friend to be there and to give you the advice. Friend to friend advice as well college advice and things like that, so definitely you know the veterans over here in the school from the veterans club. Professors, I cannot even begin to express how thankful I am for many of the professors that I have had throughout this year. Wonderful professors. They really look out for many of the students.
From the very beginning. One thing that I really do like about this school is that they always do a luncheon for the veterans in the beginning of the semester and they have different speakers. They have speakers from the VA hospital. Speakers from the VA center down the street. They have speakers from other programs and services. That is a wonderful thing because that is how I found out about the Vet Center. At the time, I was actually going to the veteran’s hospital and I was seeing a psychiatrist and a therapist for my depression and anxiety.

The researcher used the long narrative from Participant 2 to demonstrate the various needs of support and the many challenges a female veteran could encounter during her transition into college.

*Interview question 3b.* Are there any services for veterans you feel the college should have that do not currently exist? Participant 1 explained the importance of the female veterans regaining their femininity. She expressed, “You have people coming from all different walks of life and we lose our femininity when we’re in there. I don’t care if it is an etiquette class we just need something to help bring us back.”

A few of the female veterans talked about how structured the military was and how they had a difficult time adjusting when they went to college since they were responsible for managing their own time now. Participant 4 explained, “You have no one to answer to, no one to give you plans, no plan book, there's no what ifs, if this happens then do this. There is no instructions to this.” She suggested having an opportunity to express some of their transitional concerns from the very beginning. Many of the female veterans felt they were automatically stereotyped with certain disciplines since they had been in the military. However, with the lack of structure and the burden of responsibility
on them they were not always able to translate those disciplines to their educational setting. “Assumptions should not be made just because someone was in the military,” said Participant 8.

Many of the female veterans felt favorably about what the college was doing to support veterans, but felt awareness about what is available was lacking. Many expressed the importance of social media as a means of communication for the college. The college created a veteran group on Facebook and the delivery of information has improved. Participant 7 mentioned, “They have this automatic text line where they send out messages to the veterans at the school now and they're always posting things on Facebook.”

The female veterans pursuing their master’s degree experienced a military advisor that needed more training about military benefits. Participant 6 explained, “You had to basically walk them through the entire process, which seems off to me considering that you all have these great military programs that you want people to be using.”

*Interview question 3c.* Are there services at the college that should be gender specific? When the female veterans were asked several of their original responses were “no,” but then after thinking about it they thought of some services that should be gender specific. Participant 1 explained,

I am single yes, but I know many of the female veterans transitioning out of the military at the time were single parents and that is a hard transition for them. I think just for women in general we tend to fight a good fight with the men so we try not to show as much emotion. I do believe that we need a little bit more of those programs geared towards us like allowing us to be able to be women again.
Support groups was discussed among a couple of the female veterans. Participant 5 shared,

I think they should have some groups for female veterans to get together where they can sit and talk. I have gone to a couple support groups but they are mostly male and what you want to talk about and what they are talking about are two different things. We see war and military as a different experience than the guys do, so it would be nice to meet with females who have been in that situation. We have a group of us on Facebook that we have our own private conversations.

Participant 8 spoke about the administrative support for veterans and how there should be a woman figure in that role to support female veterans. Participant 8 further explained by saying,

There is sensitivity for female veterans and I am sure, because you are researching this, you have come across the military sexual trauma (MST) cases. I think just in general, for those veterans, that there needs to be a woman figure in those offices or on campus, even if they are not the head of the program. The veteran representative in the colleges, the majority of the ones that I went to, were all male-based. To see a woman in that role I think would definitely help MST victims to go in and actually ask for help and not be so intimidated walking into a room full of other vets. The reason that many female veterans have MST is because it is fellow military members. I think that would be a good change for the college and their veteran’s office.

Participant 5 expressed the need for proactive support for female veterans, she explained,
Females go through a wide variety of emotions along with all the different jobs they are trying to do at the same time. Then you have to worry especially about the women with PTSD and the amount of suicides that we have going on. It is hard because they feel like they do not have anybody to talk to. There is no centers for anybody to talk to, especially for the female vets.

Participants 1, 2, 7 and 8 talked about the importance of childcare and having access to those kinds of resources while in college. “I haven’t heard of any type of programs that the veterans have for child care” stated Participant 8. Participant 7 suggested, “Maybe we could put together something where someone that is qualified could sit with the children while the students are taking exams, finals or whatever if they don't have a sitter there would be something.”

*Interview question 3d. Did your GI Bill Benefits play a role in your decision to attend college?* All of the female veterans recognized their GI Bill benefits have played a role in returning or going back to college after the military. Participant 2 shared, 

There are other services as well like the Yellow Ribbon, which you can also apply for and use. Helps you out if you do not have enough on the GI Bill. Also Vocational Rehab. They can pick up where the GI Bill left off if you run out of the GI Bill as long as you apply a head of time for a vocational rehab that is exactly what they do. I know that I will be fine up until I am done with my degrees.

Because of the high housing stipend in the northeast, several of the female veterans were able to quit their full time jobs to go to college full time.
Research question 4. What coping strategies did the female veteran use during their transition into college? There were four interview questions developed to answer research question 4.

Interview question 4a. Has your military experience assisted in your transition to college? If so, in what way? Participant 1 explained,

Yes of course. I have always been a very driven person. They are always drilling that into our heads. The fact that we actually have the benefits have made it easier. That made decision so much easier to go back to school and not just hold on to all those credits and do nothing with them.

Participant 3 shared,

Being that I was in the Marines, and it is mainly males, it did help me cope with being in certain classes. The SVA, predominately males, is easy, I do not get offended. Certain comments that they make, I do not get offended easily. I am used to being around males and the things they say, it does not bother me. I do not take things to heart. Being in the military and having that rank of a NCO (Non Commissioned Officer) has helped in certain classes, or certain projects. I am able to take on the leadership role.

Several of the female veterans expressed they are more patient now and will tolerate much more since they learned to keep their mouths shut in the military.

Interview question 4b. What advice would you give other female veterans thinking about going to college? All of the female veterans said they would encourage other female veterans to “go for it.” Participant 2 advised,
Just do it! Do it, do not waste any time. Education is such a powerful tool to have in life. It has helped me a lot throughout this whole process. Just do not waste any time. Do it, and do it fast. Run, just make it to the finish line and stay focused until you are done.

Participant 8 gave the following advice for other female veterans,

There was a lot of incorrect information that I was given from even the VA reps at the school. I would tell them trust what the VA reps says but also do your homework. The best advice I got, of course, was word-of-mouth from other veterans. I would say to do your homework and research what you are entitled too.

*Interview question 4c.* What has been positive about your transition and what has been negative? The positive aspects of the female veterans included, being enrolled in an accelerated program and catching up to their peers outside of college, making new friends and meeting other veterans, the financial benefits, confidence to speak to anyone, and the overall college experience. The negative aspects of their transition were not socializing when they first started college, being tolerant of other students, the fear of change, and adapting to a new environment. Participant 1 shared,

It made it hard because I did not know how to navigate through the crowd, through the language, the people, everything. No matter what you do, it does not prepare you for civilian life. When you come back to school it is as if you are literally thrust right back a classroom with all these crazy disrespectful people and these kids, adults that have no regard for their lives or other people’s lives. That part of the transition, just sitting in the classroom with people that are so much
younger than I am at least 10 years, it was hard not to get up and discipline every single person in there. I had to choose my battles. I had to learn when to sit down and allow the teacher to be the teacher.

*Interview question 4d.* What will you do to ensure you graduate? The female veterans all said they are determined to graduate. Several mentioned again that they waited too long and now it is time to finish.

**Summary of Results**

Chapter 4 presented the research questions that guided this qualitative phenomenological study. It also presented the data gathered by the researcher in conducting semi-structured in-depth interviews with eight female veterans of a college in the northeast United States. The participants provided meaningful and vibrant descriptions of their experiences not only in the military but also during their transition into college. The researcher characterized common themes into five major categories, which included individuality, lifestyle choices, education, support, and mental health issues. The eight female veterans' responses provided their individual unique perspectives, and gave rich and detailed descriptions of their lived experiences related to the military and their transition into college. The researcher mapped Schlossberg’s (1981) transition theory, 4Ss model, to each of the five categories to enrich the readers experience by seeing how the female veterans saw themselves (self), discussed their situation, expressed their support, and the strategies they used for coping.

Chapter 5 will provide analysis of the findings and propose recommendations to further the study.
Chapter 5: Discussion

Introduction

The purpose of this phenomenological study was to understand the transition of female veterans into college and to fill the current gap in the literature. The passage of the Post-9/11 GI Bill, which went into effect August 1, 2009, was the largest change in military educational benefits since the GI Bill of 1944. The passage of the Post-9/11 GI Bill is what caused the increase of veterans in colleges today (O’Herrin, 2011). This study used a phenomenological approach to focus on the phenomenon of “transition.”

Schlossberg’s (1981) transition theory was used as the theoretical framework through which the analysis was conducted. The researcher used Schlossberg’s (1981) 4Ss model to develop the four research questions. The 4Ss examine self, support, situation, and strategies for coping. The four research questions for this study were:

1. Self - What personal characteristics did the female veteran use when deciding to go to college?
2. Situation - How did the female veterans’ personal situation influence their transition into college?
3. Support - What support services did the female veteran find in the transition to college?
4. Strategies for Coping - What coping strategies did the female veteran use during their transition into college?
The researcher associated the 4Ss with five major categories that surfaced after the data driven coding was completed. The five major categories include individuality (self), lifestyle choices and education (situation), support (support), and mental health (strategies for coping). Individuality refers to the way the female veterans were identified (soldier, veteran, student) and how they see themselves. The researcher paid special attention to the “lost identities” or the “silenced identities” of the female veterans. This was done as a means of survival but one that has to be revived in order to thrive as a civilian. Lifestyle choices is a reflection of the decisions the female veteran made along the way. Education includes education while in the military and after the military. Education also includes support services, student involvement, and comradery with other veterans while in college. Support refers to the support or lack of support the female veterans received during their transition. Mental health includes mental health issues and unhealthy situations female veterans experienced during or after the military.

This chapter will review the implications of the findings, the limitations to the study, recommendations and future analysis and finally, the researcher offers a conclusion and final thoughts on the study.

**Implications of Findings**

The implications of this study indicate a strong need to provide gender specific support services at colleges and universities. Baechtold & De Sawal (2009) stated, “The number of women veterans attending college is increasing. Campus professionals need to be aware of how issues pertaining to mental health, sexual assaults, and gender identity may influence how these women make transitions to higher education (p. 36).” The
issues noted by Baechtold and De Sawal were evident during the interviews with the female veterans.

Individuality, identified as a major category revealed how the female veterans felt about themselves as well as how others saw them. They saw themselves as being compassionate, determined, loyal, bold, goal oriented, supportive, stubborn, and intelligent. They expressed they did not want to be judged or stereotyped. The most surprising revelation for the researcher was when the female veterans expressed their self-restraint with other college students’ behavior in the classroom. The female veterans tolerated so much in the military and could not speak up most of the time that it carried over into their everyday life. The female veterans reported that at times they felt socially uncomfortable at the college and are most comfortable when in the presence of other veterans.

The female veterans did not regret joining the military, however, most of them regretted waiting to go to college. The female veterans made these lifestyle choices of joining the military first and then going to college, and explained how they trailed behind their friends because they went into the military first, while most of their friends have completed college and have careers. Each of the female veterans had a role in the military and their responsibilities were much more significant than what they have experienced as civilians. It is crucial to recognize the skillset of veterans when they leave the military and translate these experiences into life experience credit towards a college degree.

The female veterans discussed their veteran benefits and reported that without them it would have been difficult to attend college. Two of the female veterans have
been able to go to college full time and not work and they attribute this to the rich housing benefit they receive. Even though the benefits cover the majority of a veteran’s education, it is important to provide additional financial counseling if financial aid is needed because they will be incurring additional debt while in college. The veterans should also be encouraged to research their veteran benefits on their own to ensure they receive the benefits to which they are entitled. One of the female veterans exhausted her GI Bill benefits and was not aware she qualified for Vocational Rehabilitation until she did some research on her own.

Although support services existed at the college, the female veterans made several recommendations that included staff and faculty training which includes cross training Admissions and Financial Aid, having a female admissions staff member, a female counselor, group meetings with just females, and childcare opportunities. Specifically, a female counselor should be available to the female veterans attending the college and be aware of the potential for mental health issues.

It was also important for the female veterans to know that the college was veteran friendly. Being around other veterans was reassuring for the female veterans because the other veterans could relate to their experiences. The female veterans valued opportunities they had to discuss shared experiences with other veterans. The female veterans found the Student Veteran Association club meetings valuable because they assisted them with connecting with other veterans and exposed them to additional resources that they had available to them.
The female veterans expressed that their overall support came from their families and friends. They also expressed the importance of support groups on social media and staying connected with their fellow soldiers.

Limitations

A non-veteran female conducted the research. Although the female veterans felt comfortable and were forthcoming with information, they may have resisted sharing certain things based on the researcher’s potential lack of understanding as a non-veteran. The location of the college is in the northeast United States in a densely populated area where veteran benefits may be more accessible than other parts of the United States. The researcher had to modify the eligibility criteria to participate in the study, due to the liaison at the college not being able to find participants that met the initial criteria. Original selection criterion was to interview eight female combat veterans. Efforts to link with combat veterans did not yield the desired number of participants. The researcher interviewed four female veterans and four female combat veterans and found that the two groups had similar experiences, and needs transitioning into college.

Recommendations

This study sets the foundation for continued research regarding female veteran’s transition into college as the veteran enrollment continues to increase at colleges and universities. Based on the research of this study the researcher makes the following recommendations for colleges and universities:

Veteran togetherness (comradery). Think about opportunities to bring veterans together. A few to consider would be a new student orientation just for veterans, a designated space for veterans to gather, a student veteran group they could join, and a
class that only has veterans enrolled in it that is offered their first semester. At the same
time, consider the veterans’ gender and the various needs they might have while enrolled.

**Support groups.** Organize gender specific veteran support groups. Female
veteran’s conversations will be different from males and they need an outlet to express
themselves.

**Social media.** Use social media to communicate with the veterans but also to
connect them to one another. Consider having gender different groups created on social
media where the female veterans can separate themselves from the male veterans if they
choose.

**Assess military experience for college credit.** Develop an assessment tool to
translate experience and job responsibilities in the military to college credit. At the same
time, work with the veterans to articulate the roles they held in the military on their
resume to make them more marketable.

**Staff training.** Crosstrain staff in the admissions and financial aid offices to have
an understanding of the veteran’s benefits. Provide available resource information to the
veterans including directing them to the Veteran Affairs website. Training is essential to
avoid miscommunications with the veterans.

**Faculty training.** Provide faculty training so that they have a better
understanding of the veteran population and highlight signs and symptoms of possible
difficulties. Sensitivity training is imperative. For example, the female veterans
expressed that professors would ask all veterans to stand to be recognized. Not all
veterans want to be identified as a veteran.
Female veteran admissions associate. Hire a female veteran admissions associate. A female veteran admissions associate would be able to more likely connect with the female veterans enrolling into college. The female veterans may open up about personal issues to a female admissions associate who may link them to the right supports. Potential issues identified up front could be eliminated as obstacles as they continue their education.

Onsite female veteran counselor. Hire an onsite female veteran counselor even if it is a part time position. An onsite female veteran counselor would provide female veterans an opportunity to discuss personal issues as well as any mental health issues they may be experiencing. Consider taking a proactive approach and have the counselor reach out and introduce herself to the female veterans while at the same time encouraging them to stop by to meet her.

Programming. Offer programming that assists female veterans with their actual transition into college from the very beginning. For example, many of the female veterans felt they lost their female identities by being in the military. By offering female specific programming, the opportunity exists for the female veterans to reestablish themselves as students. Programs could include confidence building, networking with other women, and career preparation.

Childcare. Assist the female veterans by identifying discounted childcare options or onsite childcare if possible.
Conclusion

The female veteran population continues to increase and so does their enrollment into college. DiRamio et al. (2015) recommend that colleges be more effective and attempt to learn more regarding the military experiences of veterans in college.

The purpose of this study was to examine the transition of female veterans from the military into college. This phenomenological qualitative study examined the phenomenon of “transition” by interviewing eight female veterans; four of whom were combat veteran. Vacchi (2012) states, “Student veterans are a diverse subpopulation on campus, and we should not expect universal comprehension of, or blanket policies for these students” (p. 15).

The researcher used Schlossberg’s (1981) transition theory as the theoretical framework for this study. The utilization of Schlossberg’s (1988) transition theory 4Ss model was used to understand the needs of female veteran’s transition into college. This theoretical lens was beneficial as it provided a complete understanding of a female veteran’s transition to college based on themselves (self), their situation, supports and strategies for coping. By utilizing this approach, the researcher identified additional areas of support to assist female veterans’ during their transition into college.

The researcher used a data driven coding process to analyze the female veteran’s responses to the following research questions that guided the study:

1. What personal characteristics did the female veteran use when deciding to go to college?
2. How did the female veterans’ personal situation influence their transition into college?
3. What support services did the female veteran find in the transition to college?

4. What coping strategies did the female veteran use during their transition into college?

Through the lens of transition theory, the researcher identified five major categories that included individuality, lifestyle choices, education, support, and mental health. The eight female veterans shared their experiences and stories as they transitioned from the military into college and the results of the study concurred with research such as Vacchi (2012) who believed the veteran population is not a one size fits all as well as DiRamio et al. (2015) who recommended that colleges be more effective and attempt to learn more regarding the military experiences of veterans in college.

This study has provided the female veteran’s perspective on transition into college and the recommendations set forth may ease their transition if implemented.

Understanding the challenges the female veterans have to overcome is an opportunity for colleges and universities to provide the highest quality of support necessary for them to be successful as they pursue their degrees.
References


Appendix A

Interview Process Protocol

I. Prepare Interview Space
   a. Ensure digital recording device is working.
   b. Make sure it is a comfortable environment.

II. Formal Introduction with Participant

III. Explain the Study

IV. Review IRB Information
   a. Have Participant Sign the Informed Consent Form

V. Begin the Interview Process

VI. Research Questions to be answered:
   a. What personal characteristics did the female veteran use when deciding to go to college?
   b. How did the female veterans’ personal situation influence their transition into college?
   c. What support services did the female veteran find in the transition to college?
   d. What coping strategies did the female veteran use during their transition into college?

VII. Ask the Participant if they have any Questions

VIII. Thank the Participant for their Time

IX. Give the Participant the $25 American Express Gift Card
Appendix B

Institutional Review Board Approval

January 13, 2016

File No: 3497-111915-02

Diane Recinos
St. John Fisher College

Dear Ms. Recinos:

Thank you for submitting your research proposal to the Institutional Review Board.

I am pleased to inform you that the Board has approved your Expedited Review project, “Female Combat Veterans Transition to College, Phenomenological Qualitative Study”.

Following federal guidelines, research related records should be maintained in a secure area for three years following the completion of the project at which time they may be destroyed.

Should you have any questions about this process or your responsibilities, please contact me at irb@sjfc.edu

Sincerely,

Eileen Lynd-Balta
Eileen Lynd-Balta, Ph.D.
Chair, Institutional Review Board

ELB jdc
Appendix C

Interview Questioning Protocol

Research questions to be answered using Schlossberg’s 4Ss Model (self, situation, support and Strategies for coping).

1. **Self:** What personal characteristics did the female veteran use when deciding to go to college?
   a. What made you want to go to college after the military?
   b. Describe your transition and being identified as a student after being identified as a female veteran.
   c. What personal attributes contributed to your decision?
   d. After completing a year of college, how do you feel now about the decision you made?

2. **Situation:** How did the female veterans’ personal situation influence their transition into college?
   a. What made you select this college?
   b. Knowing what you know now is there anything you would have done differently?
   c. What will a college degree do for you?

3. **Support:** What support services did the female veteran find in the transition to college?
   a. What have been your sources of support since beginning college?
b. Are there any services for veterans you feel the college should have that do not currently exist?

c. Are there services at the college that should be gender specific?

d. Did your GI Bill Benefits play a role in your decision to attend college?

4. **Strategies for Coping:** What coping strategies did the female veteran use during their transition into college?

   a. Has your military experience assisted in your transition to college? If so, in what way?

   b. What advice would you give other female veterans thinking about going to college?

   c. What has been positive about your transition and what has been negative?

   d. What will you do to ensure you graduate?
Appendix D

Demographic Information Form

Demographic Information

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Do you receive the Post 9/11 GI Bill? ____________

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