

University of Nevada, Reno

What About Them?
Exploring the Experiences of Former Servicemembers with
Less than Honorable Discharges

A thesis submitted in partial fulfillment of the
requirements for the degree of Master of Social Work

by

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Abstract

Former servicemembers with discharges that are classified as anything less than honorable typically face barriers to veteran-specific care and benefits, preventing them from accessing the services they may need. The research is lacking in analysis of former servicemembers' experiences in regard to their discharge status specifically; however, research that is available suggests that many former servicemembers discharged less than honorably were suffering from a mental illness at the time of discharge. This qualitative study explored the stories of former servicemembers with less than honorable discharges. A total of five participants were interviewed about their experiences in the military, the impact of their discharge status, whether or not mental illness was a factor in their discharge, and what they would identify as the greatest need for former servicemembers with less than honorable discharges. These data were thematically analyzed to identify common themes among the participants.

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Chapter 1: Introduction

Former servicemembers of the United States Military risk sacrificing their lives for the sake of our country and our freedom. Upon returning to civilian life, they are typically well cared for and welcomed back with open arms. Unfortunately, this is not the case for all of our former servicemembers. Former servicemembers with discharges that are classified as anything less than honorable typically face barriers to veteran-specific care and benefits, preventing them from accessing the services they may need. In some cases, former servicemembers that received other than honorable or punitive discharges were suffering from a mental illness at the time of the incident that resulted in the discharge, leaving them ill-equipped for civilian life due to limited access to veteran-specific services (Izzo, 2014).

Discharge status is like a brand that can stay with a servicemember for life. For former servicemembers with less than honorable discharges, this stigmatizing status not only affects them in regard to their benefits, but has negative implications for other areas of their life such as employment (Leroux, 2014). While procedures to upgrade or correct discharge statuses do exist, it is a complex, lengthy process and does not guarantee any change. Support is limited in regard to assistance with discharge status upgrades specifically (Swords to Plowshare, 2016). Without the support to navigate the paperwork and the intricate process to upgrade a discharge, it is extremely unlikely that a former servicemember's application will get approved. This means that a former servicemember must attempt to seek out services that are not specific to veterans, because they are either unqualified based on their discharge status, or, in some extreme cases, they are revoked the right to claim veteran status by law (Definitions, 38 U.S. Code § 101, 2012).

This study is necessary due to the lack of literature describing what former servicemembers with less than honorable discharges are experiencing. Existing literature has explored discharge status impact on benefits (Lunding, 1973; Leroux, 2014; Moulta-Ali & Panangala, 2015). However, there were no studies found that specifically examined the experiences of former servicemembers with less than honorable discharges. This study aimed to tell the stories of five former servicemembers in order to better understand their experiences.

Definitions

The term “veteran” will be defined by the federal definition, “a person who served in the active military, naval, or air service, and who was discharged or released therefrom under conditions other than dishonorable” (Definitions, 38 U.S. Code § 101, 2012). Since this study aimed to examine the experiences of those who served in the military and received a discharge classified as anything less than honorable, including dishonorable and early separation discharges, the term “former servicemember(s)” will be used when referencing this group. For this study, the definition of “former servicemember” was adapted from the U.S. Department of Veterans Affairs (2016a),

The term "[Former] Servicemember" means a [former] 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.

According to the definitions listed above, some of the participants in this study could be classified as a veteran, and some could not. For the sake of simplicity, all of the participants will be referred to as “participant(s)” or “former servicemember(s).”

Additionally, this study aimed to give a voice to all former servicemembers with less than honorable discharges, and utilizing the term “veteran” would inadvertently leave those individuals who have punitive discharges out of the conversation. The only exception to this would be in the case of statistics. It is unclear if the reported number of “veterans” refers to all former servicemembers or only those that meet the federal definition of a veteran. Therefore, the term “veteran” will be used when referring to any kind of reported information that does not specify.

Chapter 2: Literature Review

Statistical Profile

Veterans represent roughly 7% of the United States population (National Center for Veterans Analysis and Statistics (NCVAS), 2016a). In 2014, there were 228,027 veterans in Nevada. The veteran population in Nevada is 91% male, 82% White, 8.7% Black or African American, 1.2% American Indian or Alaska Native, 3.5 Asian, .5% Native Hawaiian/Other Pacific Islander, and 8.3% Hispanic/Latino (NCVAS, 2016a). The U.S. Department of Veterans Affairs (VA) estimates that there are approximately 500,000 former servicemembers with “other than honorable discharges” (U.S. Department of Veterans Affairs, 2017). Izzo (2014) reported that there are about 560,000 Vietnam Veterans with discharge statuses classified as less than honorable, with 260,000 categorized as other than honorable, bad-conduct, or dishonorable. These numbers are from one war in U.S. history and make up about 6% of former servicemembers that served and lived during the Vietnam War. Extrapolating from Vietnam, it could be expected that there are about 12% of former servicemembers discharged less than honorably in the post-9/11 war era (NCVAS, 2016b).

Former servicemembers are at risk for different health issues than civilians. In-combat, they are at risk for life threatening injuries including shrapnel and gunshot wounds, lost limbs, and traumatic brain injuries. There are also serious health risks from exposure to environmental hazards, including infections, chemicals, and contaminated water. The severe stress of the military also puts veterans at risk for a variety of mental health issues. Some examples include PTSD, anxiety disorders, depression, and substance use disorders (Medicine Plus, 2016). Given the range and severity of health

risks associated with military service, the gap in services for former servicemembers with less than honorable discharges is a truly urgent issue.

Military Culture

It is beneficial to provide a brief description of military culture in order to understand the breadth of former servicemembers' experiences. The military has its own set of values, history, customs, language, traditions, and laws, creating a unique culture that is difficult to understand from the outside (Meyer, 2015). When comparing military culture to civilian life, the most drastic difference is the contrast in individual versus group value systems (Rubin, Weiss, & Coll, 2013). Civilians place a higher value on individuality, while military members strive for group cohesion and hierarchy (Rubin, Weiss, & Coll, 2013). In addition to military culture as a whole, there are distinctive subcultures within in it that represent each branch (Rubin, Weiss, & Coll, 2013). Acceptable behaviors and customs in the Marine Corps are very different compared to the Air Force, similar to the way geographical cultures vary in norms and traditions.

One aspect that is generalized across all subcultures of the military is the unwavering sense of duty, selflessness, honor, and high expectations (Rubin, Weiss, & Coll, 2013). The strength and valor that the military emulates often creates a barrier for help-seeking behaviors among servicemembers (Acosta et al., 2014). Especially in regard to mental health conditions, any sign of "weakness" can put a servicemember at risk of being seen as unfit for duty (Acosta et al., 2014). Hoge, Auchterlonie, & Milliken, (2006) found that 72.9% of servicemembers who served in combat had "clinically significant" mental health symptoms but did not seek treatment. This suggests that mental health stigma in the military is severe (Acosta et al., 2014).

Meyer (2015) indicated that despite the high emphasis on cultural competence throughout the healthcare field, military culture is often overlooked by healthcare professionals. According to a study conducted by The Pew Research Center (2011), 77% of veterans felt misunderstood by civilians. As stated previously, servicemembers are unlikely to engage in help-seeking behaviors for mental health concerns due to mental health stigma in the military, making it essential for mental health providers to be culturally competent in military customs and values.

Types of Military Discharges

Many former servicemembers would likely say that their DD 214 is one of their most important possessions. The DD 214 is the documentation of a former servicemember's discharge status when they separate from the military. This is a document that many agencies, employers, and benefit services may ask for upon application from a former servicemember. The DD 214 is also the basic eligibility criteria for services at the VA and other veteran-specific service agencies.

A former servicemember may receive a discharge from two broad categories—administrative and punitive (Leroux, 2014). The administrative discharges include honorable, general (under honorable conditions), under other than honorable conditions (commonly referred to as “other than honorable”), and early separations or “uncharacterized” (Department of Defense Instruction 1332.14, 2017). Misconduct and dishonorable discharges fall under the punitive category and can only be implemented as punishment by a military court (Hirschhorn, 1973; Leroux, 2014). A punitive discharge on a DD 214 is commonly referred to as a “bad paper.”

The order of desirability for discharges is as follows: honorable, general, other than honorable, misconduct, and dishonorable (Staats, 1980). Early separation or “uncharacterized” discharges occur when a servicemember does not complete the required 180 days of basic-training and are not necessarily desirable or undesirable, but these servicemembers will not qualify for VA benefits due to the eligibility requirement of at least 180 days served (Department of Defense Instruction 1332.14, 2017; U.S. Department of Veterans Affairs, 2014). Uncharacterized discharges are given when the servicemember is seen as unfit for military performance based on “lack of capability, lack of reasonable effort, failure to adapt to the military environment, or minor disciplinary infractions” (Department of Defense Instruction 1332.14, 2017, p.17).

The Department of Defense initially implemented the discharge status system to reward “good and faithful service”, which consisted of skillful performance of duties and appropriate military behavior (Staats, 1980). An honorable discharge is meant to signify outstanding or dignified performance (Department of Defense Instruction 1332.14, 2017). A general discharge signifies that any unfavorable aspects of performance were significantly outweighed by the commendable aspects of performance (Department of Defense Instruction 1332.14, 2017). Other than honorable discharges are typically issued when there are patterns of misconduct, but do not warrant the use of a court martial (Department of Defense Instruction 1332.14, 2017). Finally, misconduct and dishonorable discharges are typically only implemented in the case of a court martial, which is issued as the result of committing a felony in the eyes of the military (Leroux, 2014).

According to Staats (1980), former servicemembers may receive varying discharges under similar circumstances, but the discharge type does not necessarily reflect the individual's performance or behavior on active duty, due to the subjectivity of the determinations. A "permanent stigma" may be associated with a less than honorable discharge and is especially the case with the punitive discharges, which are perceived as a form of punishment and is "recognized as military justice" (Staats, 1980). Staats (1980) also indicated that a disproportionate number of former servicemembers who are less educated and from minority groups received less than honorable discharges.

Impact of Discharge Status

A former servicemember's "bad paper" may have negative implications for many aspects of their life. As Table 1 indicates, a less than honorable discharge typically creates barriers to benefits that the former servicemember may need. According to Reger et al. (2015), former servicemembers who were discharged less than honorable were more likely to complete suicide than those with honorable discharges. They are also overrepresented in state and federal prisons, with 40% of incarcerated veterans having a less than honorable discharge (Noonan & Mumola, 2004). In relation to mental health, Marines with PTSD in combat are eleven times more likely to receive misconduct discharges than those without PTSD and women with combat exposure have an increased chance of behavioral problems related to PTSD, depression, and substance use disorders (Highfill-Mcroy, Larson, Booth-Kewley, & Garland, 2010).

U.S. Department of Veterans Affairs. The U.S. Department of Veterans Affairs (VA) is an integrated system of care that provides a plethora of services to veterans that meet basic eligibility requirements. The VA is separated into three entities—the

Table 1 Impact of discharge status on common VA benefits

VA Benefit	Discharge Status				
	Honorable	General	Other than honorable	Misconduct	Dishonorable
Disability Compensation	Eligible	Eligible	COS ¹ determination	Not eligible	Not eligible
Health Care	Eligible	Eligible	COS determination	Not eligible	Not eligible
Dependency and Indemnity Compensation	Eligible	Eligible	COS determination	Not eligible	Not eligible
Education Assistance	Eligible	Not Eligible	COS determination	Not eligible	Not eligible
Survivor Pension	Eligible	Eligible	COS determination	Not eligible	Not eligible
Burial Benefits	Eligible	Eligible	COS determination	Not eligible	Not eligible
Special Housing	Eligible	Eligible	COS determination	Not eligible	Not eligible
Vocational Rehabilitation	Eligible	Eligible	COS determination	Not eligible	Not eligible
Disabled Automotive	Eligible	Eligible	COS determination	Not eligible	Not eligible
Reenlistment Rights	Eligible	Eligible	COS determination	Not eligible	Not eligible

Notes: COS¹= Character of service. Adapted from “Veterans’ benefits: The impact of military discharges on basic eligibility,” by Moulta-Ali, U., & Panangala, S. V., 2015, *Washington, DC: Congressional Research Service*.

Veterans Health Administration, the Veterans Benefits Administration, and the National Cemetery Administration. The VA determines basic eligibility by reviewing an individual’s type of military service performed, the duration of service, and the character of discharge (U.S. Department of Veterans Affairs, 2014). Typically, if the minimum amount of service time is met (>180 days) and the individual was discharged under any conditions other than a punitive discharge, they may be eligible to receive VA benefits (U.S. Department of Veterans Affairs, 2014). There are stipulations for any discharge that is characterized as “other than honorable” and are evaluated on a case by case basis by means of a Character of Service (COS) determination (U.S. Department of Veterans

Affairs, 2014). However, former servicemembers who received a punitive discharge are, by statute, barred from VA services, unless it is concluded that the individual was “insane” at the time of the discharge (U.S. Department of Veterans Affairs, 2014). The VA defines “insanity” as

one who, while not mentally defective or constitutionally psychopathic, except when a psychosis has been engrafted upon such basic condition, exhibits, due to disease, a more or less prolonged deviation from his normal method of behavior; or who interferes with the peace of society; or who has so departed (become antisocial) from the accepted standards of the community to which by birth and education he belongs as to lack the adaptability to make further adjustments to the social customs of the community in which he resides (Determinants of Insanity, 38 CFR § 3.354, 2016).

In summary, despite the risk factors associated with a less than honorable discharge, former servicemembers may not be eligible for many benefits that the VA offers, including housing, health care, mental health care, burial services, financial services, and other forms of support.

Discharge Upgrade

Former servicemembers who believe that their discharge status needs correcting have the right to apply for a discharge upgrade. This process is often tedious, laborious, and, due to the minimal applications that actually get approved, discouraging. According to Swords to Plowshares (2016), it is difficult to persuade the panel that makes the determination for approval of discharge upgrades, and it is extremely common for applicants to be ill informed about how the process works, subsequently leading them to

be completely unprepared and set-up for a denied application. Swords to Plowshares (2016) provides significant detail in regard to typical discharge upgrade procedures.

The process begins by applying for review in the correct branch in which the individual served. The Navy and Marine Corps operate under the same Discharge Review Board (DRB), while the Army, Air Force, and Coast Guard fall under separate DRBs. In addition to DRBs, there are also Boards for Correction of Military Records (BCMR) for the Army, Air Force, and Coast Guard and Board for Correction of Naval Records (BCNR) for the Navy and Marine Corps. An applicant may only apply to have their discharge reviewed by the BCMR or BCNR if they received a General-Court Martial (which results in a dishonorable discharge in most cases) or if they have exhausted all other efforts to obtain a discharge upgrade through a DRB. This is extremely important to note, as the DRB's power is limited and is unable to issue a correction under certain circumstances, such as a dishonorable discharge, where a BCMR or BCNR has the ability to correct most military records (Swords to Plowshares, 2016).

Another barrier to obtaining a discharge upgrade is the time sensitivity of the paper work. An application must be submitted to the DRB no later than fifteen years from the date of the former servicemember's discharge. The BCMR and BCNR offer more flexibility; they require that the applicant submit their request within three years that the "error or injustice" was discovered, which could potentially be over fifteen years from the date of discharge. The same three-year rule applies to applicants that are denied by the DRB. However, in some cases, the BCMR and BCNR will waive the three-year requirement if the applicant can prove that the discharge upgrade is "in the interest of justice" (Swords to Plowshares, 2016).

The considerations for approval are similar when comparing DRBs, BCMRs, and BCNRs, although the language is different. The DRB considers the “equity” and “propriety” of the discharge. Essentially, the applicant must prove that the discharge was either unfair or illegal. Similarly, the BCMR and BCNR review the “error,” which reflects the legal piece, or “injustice”, signifying unfairness. Swords to Plowshares (2016) recommends that including evidence of a positive personal history post-military service will increase the likelihood of acceptance. This can be difficult due to the negative implications that a “bad paper” has on an individual. Feelings of hopelessness, abandonment, and anger can be common barriers to a successful life once discharged less than honorably from the military (Swords to Plowshares, 2016). One way to overcome this would be providing documentation of a significant effort to reintegrate back into civilian life. For example, statements from a doctor or mental health professional stating the individual does not use alcohol or other drugs or a statement from the individual’s local police department indicating that they have no criminal record since their discharge (Swords to Plowshares, 2016).

Not every former servicemember will have a successful civilian life post-military, which is why Swords to Plowshares (2016) highly recommends seeking legal representation or advocacy from a Veterans Service Organization/Officer (VSO) to assist in building a stronger case. This is especially true in the case of upgrading a punitive discharge, which can only be done on the foundation of “clemency.” The review board must determine that there is an extremely good reason to extend compassion to the applicant, which creates a sense of urgency to provide a solid case with strong evidence that the upgrade is necessary (Swords to Plowshares, 2016).

According to Swords to Plowshares (2016), assistance with preparation for and completion of the necessary, complicated paper work required to apply for a discharge upgrade is limited. Although the process is difficult to navigate and is frustrating, the DRBs have recently implemented a protocol for applicants with Post-Traumatic Stress Disorder (PTSD) or Traumatic Brain Injury (TBI) (Swords to Plowshares, 2016). If the application is based on the defense that the upgrade is in relation to a PTSD or TBI diagnosis, the final decision must be expedited. It is essential that documentation from the diagnosing practitioner is included with the application. The advocacy that facilitated this special expedited process for mental illness is discussed later in this thesis.

A discharge upgrade or correction may increase the chance to access benefits and some forms of employment and decreases risks of suicide and incarceration. Although there are resources available to assist with the difficult process, these resources are very limited and not consistent with the time sensitivity of the process. The decision-making process of the DRBs is also extremely subjective (Swords to Plowshares, 2016); two applicants could have very similar circumstances, but one may have resources and assistance in excess, leading to a successful application, whereas the other has limited support and is denied. The power that these correction and review boards have to place a potential label on applicants makes for an extremely daunting and defeating process.

The Role of Mental Illness

In 2014, 40% of Veterans Health Administration (VHA) patients were diagnosed with a mental health condition or substance use disorder (U.S. Department of Veterans Affairs, 2016b). Veterans diagnosed with severe depression completed suicide more than two times as often than those diagnosed with PTSD (U.S. Department of Veterans

Affairs, 2016b). Twenty veterans completed suicide per day in 2014, with non-VHA patients representing more than half of total suicides (U.S. Department of Veterans Affairs, 2016b).

Izzo (2014) suggested that many less than honorable discharges may have been a result of an undiagnosed mental health disorder. Out of the 560,000 Vietnam Veterans given discharges less than honorable, 260,000 were categorized as other than honorable, bad-conduct, or dishonorable (Izzo, 2014). According to the 1990 National Vietnam Veterans Readjustment Study, nearly 58% of Vietnam veterans experienced PTSD at some point in their lives. There is also some evidence that an undesirable discharge could be the result of excessive alcohol or drug use, which may be an outlet to self-medicate (Izzo, 2014).

Advocacy for Policy Change

According to Vietnam veteran interviews, many applications for a discharge upgrade through the Army Board for Correction of Military Records were denied, even when diagnostic evidence of a mental health diagnosis was presented (Izzo, 2014). This barrier to upgrade is greatly attributed to the late introduction of Post-Traumatic Stress Disorder (PTSD) into the Diagnostic and Statistical Manual of Mental Disorders (Izzo, 2014). PTSD was not recognized as a diagnosis until 1980, nearly five years after the conclusion of the Vietnam War, and, for some Vietnam veterans, even longer since their undesirable discharge (Izzo, 2014).

In March 2014, a group of veterans and The Yale Law School Veterans Legal Services Clinic filed a lawsuit on behalf of Vietnam veterans who received undesirable discharges as a result of undiagnosed PTSD (Moulta-Ali & Panangala, 2015). The

complainants stated that applications for a discharge upgrade were not appropriately considered, especially in the case of individuals' whose PTSD diagnosis was unknown at the time of discharge (Moulta-Ali & Panangala, 2015). The Secretary of Defense issued a memorandum in September of that year to ensure that the process gave "liberal consideration" to applications for upgraded discharge status that claimed PTSD as the primary reason for the upgrade (Secretary of Defense, 2014). As a direct result of this decision, accepted applications for a discharge upgrade through the Army BCMR on the basis of a PTSD diagnosis has risen from 3.7% in 2013 to 45% (Sidibe, Unger, & Frank, 2015). This made it possible for many veterans to upgrade their discharge status and receive benefits at the VA; however, the process for a discharge upgrade is still extremely cumbersome and is not expedited properly for those former servicemembers that may have varying struggles with mental illness that do not meet diagnostic criteria for a PTSD diagnosis.

A group of veterans recently established High Ground Veterans Advocacy, with the mission to help former servicemembers with less than honorable discharges (High Ground Veterans Advocacy, 2016). In January 2017, High Ground Veterans Advocacy was successful in introducing a new bill in the House of Representatives. The Veterans Fairness Act (HR.4683) addresses,

medical evidence reviews in the case of: (1) a former member of the Armed Forces who was deployed in a contingency operation and subsequently diagnosed as suffering from post-traumatic stress disorder or traumatic brain injury as a consequence of such deployment, or (2) a former member whose application for relief from the terms of his or her military discharge is based in whole or in part

on matters relating to post-traumatic stress disorder or traumatic brain injury related to combat or military sexual trauma (Veterans Fairness Act, HR.4683, 2016).

This bill could not only positively impact former servicemembers with PTSD, but those diagnosed with a traumatic brain injury or survivors of military sexual trauma. High Ground Veterans Advocacy has brought significant attention to the issue of former servicemembers with less than honorable discharges being denied access to care. They are heavily supported by Congressman Mike Coffman from Colorado, who has also made significant efforts to push this issue at the executive level.

On March 7th, 2017, Veterans Affairs Secretary David Shulkin introduced his initiative to expand VA mental health care to veterans with other than honorable discharges. The secretary stated,

This is a national emergency that requires bold action. We must and we will do all that we can to help former servicemembers who may be at risk. When we say even one Veteran suicide is one too many, we mean it (U.S. Department of Veterans Affairs, 2017).

The Secretary was persuaded to “change his mind” on this issue by Congressman Mike Coffman, “I am grateful for his (Congressman Coffman) commitment to our nation’s Veterans and for helping me better understand the urgency of getting this right” (U.S. Department of Veterans Affairs, 2017). This is a major shift in policy that could positively impact the estimated 500,000 veterans with undesirable discharges (U.S. Department of Veterans Affairs, 2017).

Chapter 3: Methods

Research Design

The research question for this study is as follows:

1. What are the experiences like for former servicemembers who have received a less than honorable discharge?

A qualitative design was used due to the exploratory nature of the research question. This inductive design utilized semi-structured interviews to explore the experiences of participants who have received “less than honorable” discharges from any of the five branches of the United States Military (Army, Navy, Marine Corps, Air Force, and Coastguard) and the National Guard/Reserves. Less than honorable included discharges that fall within four of the five categories of discharges: general, other than honorable, misconduct, and dishonorable. Although a general discharge is considered “under honorable conditions” and is meant to signify “honest and faithful” service, it still creates barriers to benefits (Department of Defense Instruction 1332.14, 2017, p. 30). As noted in Table 1, former servicemembers with a general discharge are disqualified for education benefits. For this reason, any participant with a general discharge met criteria for this study.

The study flyer advertised that anyone with a discharge that was not classified as honorable was eligible to participate. Two participants had uncharacterized discharges, and, technically, these discharges meet the criteria as advertised on the flyer. However, these former servicemembers do not qualify for VA benefits based on the fact that they were discharged before they completed basic training, and are not denied because of the

discharge status specifically. These participants were included in order to provide an adequate sample size and their stories also proved to be valuable.

Participants were invited to participate in a maximum of a ninety-minute long, semi-structured interview. Participants were also given a \$10 gift card for compensation of their time. All interviews were conducted by the student researcher. The participants were verbally read the informed consent form and were provided with a copy. Participants were informed that they could terminate the interview at any time and that termination before the conclusion of the interview would have no penalty on them receiving the gift card. As former servicemembers, all of the participants were adults and able to provide consent. All interviews were held in a private area to maintain privacy of each participant. Interviews were audio recorded for the purposes of transcription. Once transcribed, the interview data were thematically analyzed to identify common themes. This study was approved by the Institutional Review Board (IRB) at the University of Nevada, Reno prior to its implementation.

Confidentiality and IRB

For the purposes of this study, it was not necessary to collect any identifying information other than age, gender, branch of service, and discharge status. Basic introductions naturally occurred between the participants and the student researcher, but this information was not audio recorded and was not documented on any paper materials.

The student researcher utilized her personal, secure, password protected iPhone to record the interviews. When the student researchers' iPhone was not in use, it was placed in a secure location not accessible to others. Audio recordings of the interviews were

transcribed the same day that the interview took place and was immediately deleted following completion of transcription in order to minimize risk.

Contact information, for the purposes of scheduling meetings, was stored on the student researcher's password protected iPhone without any identifying information and was covertly recorded to signify participant order, i.e. "P1." After interviews were completed, participants were reminded of the student researcher's contact information if they had any questions, and their information was immediately deleted off of the student researcher's iPhone.

The Institutional Review Board of the University of Nevada, Reno determined this study to be of "minimal risk of harm." Participation in the study was deemed "similar in type or intensity to what a participant might encounter during their daily activities" (See Appendix D). It was expected that participants may have experienced some emotional discomfort depending on what they chose to divulge during the interview. Participants were reminded that their participation was completely voluntary and they had the option to not answer or elaborate on any question that made them uncomfortable or caused them discomfort.

In order to minimize risk, a list of local resources was provided in the event that the interview triggered a negative emotional response that required professional attention. No adverse reactions were reported to the student researcher as a result of the interviews in this study.

Sampling Procedure

This study utilized a snowball sampling procedure. Research supports the use of key informants in snowball sampling as these people may be known and more trusted to

potential participants (Sadler, Lee, Seung-Hwan Lim, & Fullerton, 2010). This was the preferred method of recruitment, as it was expected that potential participants may be hesitant to come forward due to the stigmatizing nature of a less than honorable discharge. The informants that agreed to distribute this study have direct contact with former servicemembers.

Key informants were asked to post and distribute copies of the recruitment flyer and to share the study with potential participants. These “key informants” included individuals who approached the student researcher about this project and expressed interest in sharing the study information with friends or family who met the criteria and placing the study flyer at their places of work (i.e. Catholic Charities). Study information was announced in bachelor and master social work student classes. Flyers were posted at student veteran centers and at multiple locations on campus. The Veterans Resource Center agreed to post flyers and inform their clients about the study. The GI Rights Hotline contacted the student researcher via email and requested to post the study information on their website girightshotline.org.

Each participant was asked to describe the recruitment method they subscribed to. The most common outlet for knowledge of the study was “word of mouth” and most participants contacted the student researcher based on the encouragement of trusted sources, including other participants. All participants were self-selected and contacted the researcher on their own accord after receiving information about the study.

Table 2 Participant characteristics

Participant	Characteristics						
	Gender	Age Range	Branch(es)	Time Period	Discharge	Transition	MH ¹ / SUD ²
Jane	Female	26-33	Army	2004	Uncharacterized	No	Yes
Paul	Male	18-25	Marines	2015	Uncharacterized	No	Yes
John	Male	34-41	Marines; National Guard	2002- 2007; 2006- 2009	Honorable; General	No	Yes
Adam	Male	26-33	Navy	2002- 2004	General	No	Yes
Matt	Male	34-41	Navy	2000- 2004	General	No	No

Note: Mental health condition¹; Substance use disorder²

Participant Characteristics

Table 2 describes the participant characteristics (all names have been changed in order to protect confidentiality). Five former servicemembers of the United States Military participated in the study. There were four male participants and one female participant within an age range of 18-41. The branches of service included Army (1), Marine Corps (1), Navy (2), and Marine Corps and National Guard (1). The time period of service ranged from 2000-2015, with an average of 2.85 years served. One participant served in a combat zone. Two participants had “uncharacterized” discharges, meaning that they served less than 180 days and did not complete basic training. Three participants had a general discharge, while one participant served in two branches and received both a general discharge from the National Guard and an honorable discharge from the Marine Corps. In Table 2, “transition” refers to whether or not the participants reported receiving effective assistance with transitioning out of the military. None of the participants reported helpful assistance with their transition into civilian life. Four out of five participants reported being diagnosed with a mental health condition or substance

use disorder. Only one participant specified that he was diagnosed with a mental health condition during his time in the military. The other three participants diagnosed with mental health conditions did not specify when they were diagnosed, and it is unclear whether they were diagnosed prior, during, or after their military service. All of the participants were students at various higher-education institutions in Northern Nevada.

Interview Description

Semi-structured interviews are commonly used in qualitative research and are highly recommended (DiCicco-Bloom & Crabtree, 2006). The semi-structured interview process was selected in order to encourage a narrative expression for each individual participant.

Prior to beginning the interview, each participant was given a demographic questionnaire (See Appendix A). The demographic questionnaire was developed originally for this study and assessed for age, gender, branch(es) of service, years served, combat history, highest rank achieved, and discharge status(es).

The semi-structured interview consisted of seventeen questions, broken up into seven categories (See Appendix B), 1) Military experience; 2) Discharge status; 3) Transition into civilian life; 4) Barriers; 5) Discharge upgrade knowledge; 6) Mental health/Substance use disorder history; and 7) Needs.

Data Analysis

Thematic analysis is widely used in qualitative research across various fields of study (Braun & Clarke, 2014). This research was “data-driven” (p.18), which allowed the data to guide the discovery of categories and themes, rather than approaching the data with specific theory in mind (Braun & Clarke, 2006). The thematic analysis processes in

this study were modeled after the recommendations and step-by-step guide created by Braun and Clarke (2006).

The audio recorded interviews were manually transcribed, verbatim, by the student researcher. The transcription data from each participant's interview was inductively analyzed for themes and general patterns of content across specific categories. The first wave of data analysis included the student researcher sifting through the data repeatedly and forming a coding procedure that separated the data into different categories. These categories were (a) joining the military, (b) discharge, (c) transition, (d) mental health/substance use disorder, (e) barriers, and (f) needs.

After the data were manually coded, the second wave of analysis was conducted, which included recording similar patterns across the data for each category. Due to the small sample size ($n=5$), a “pattern” was identified if content was mentioned by more than one participant. Conversely, data were also recorded if one or two participants reported a unique experience as compared to other participants across the different categories.

The third wave consisted of analyzing the coded content in the various categories. Through this process, themes were identified. A theme is not necessarily the most prevalent content within the data set (Braun & Clarke, 2006). Braun and Clarke (2006) define a theme as “something important about the data in relation to the research question, and represents some level of patterned response or meaning within the data set” (p.10). Three themes were identified that captured the experiences of the participants: (a) stigma, (b) purpose, and (c) resiliency.

Chapter 4: Findings

In order to break down the findings of this study, this section will be organized in the following format: first, the general findings will be discussed. This section will include participant reports about the categorical sections of the data, including “joining the military and transition”, “discharge”, “mental health and substance use disorder”, “barriers”, and “needs.” Table 3.1 demonstrates the common reports across participants in the respective categories. Next, the three themes that were discovered during data analysis will be discussed. Before discussing the findings, it is beneficial to establish context by briefly introducing the five participants. All participant names have been changed in order to protect confidentiality.

Jane enlisted in the Army in 2004 and reported that she didn’t really know where she was going in life, but she knew that she would want to go to college someday. The Army provided structure and a sense of direction, two things she was lacking in her life at that time. She was successfully going through her basic training for about five weeks until her parents delivered some devastating news. They announced they were getting divorced and Jane was severely affected by this. She was unable to concentrate, constantly making mistakes, and, eventually attempted to take her own life while struggling to complete boot camp. After an in-patient hospitalization, she was discharged “uncharacterized” and quickly transitioned out of the military. Today, she is a college student and has chosen to leave her short encounter with the military behind her.

Paul had a drive to make a difference in this world and wanted to be a part of something bigger than himself. He joined the Marine Corps in 2015 and expected to find a long-lasting brotherhood that would welcome him with open arms. Unfortunately, he

was instead confronted with months of verbal, physical, and emotional abuse. He eventually could not take it anymore and had an emotional breakdown. Subsequently, he was discharged three weeks before graduating boot camp and also has an uncharacterized discharge. He is still angry about the circumstances of his discharge, especially because he believes that he was discharged in order for his drill instructor to avoid any repercussions for the abuse that he allowed Paul to endure. Despite harboring difficult feelings related to his brief military background, he is pursuing a bachelor's degree and is involved in activities on his college campus.

John wanted to give back to humanity by means of a humanitarian mission in the military. He enlisted in the Marine Corps in 2002 and was discharged honorably in 2007. He had a very successful career in the Marine Corps, but was never given the opportunity to go on a humanitarian mission. He decided to re-enlist in the National Guard in 2006. Everything was lining up perfectly for him; he was selected to go on a prestigious humanitarian mission half-way around the world and was finally going to fulfill his dream. Unfortunately, his world came crashing down when he tested positive for marijuana use. He was given a general discharge from the National Guard, due to a set of very unique circumstances. John's story will be discussed in-depth later in the themes section of these findings.

Adam enlisted in the Navy in 2002. He was mainly interested in joining the military for the education benefits and was dedicated to serve his four years in order to go to college. However, the military was a lot more difficult than he anticipated, and he often found himself stuck in a dark depression that only subsided with alcohol. Adam was eventually dependent on alcohol and was required to go through alcohol

rehabilitation during his time in the service. He was unsuccessful in the rehabilitation program, and was ultimately discharged with a general discharge in 2006. Since his discharge, he has achieved sobriety, is working on a college degree, and works full time to put himself through school.

Matt grew up in the foster care system and didn't see much of a future for himself. He wanted to be more than the perceived low expectations others had for him, so he decided to join the Navy in 2000. Matt lacked a sense of direction for most of his life and felt even more lost during his time in the military. He was often in trouble and was sent to the brig on more than one occasion. He served his four years and got out of military with a general discharge. He didn't think much about this until he found out that he was denied education benefits due to his general discharge. He was angry for a while, but decided to pursue higher education through other means and is currently working on an associate's degree.

General Findings

Joining the military and transition. The most common reason for joining the military was educational benefits. Many of the participants wanted to use the GI Bill to fund their college education. It was also commonly reported that participants' experiences in the military fell short of expectations. Reasons for joining the military will be discussed more in-depth during the theme, "purpose." None of the participants reported receiving any kind of helpful assistance with transitioning out of the military. Jane noted, "It took forever to get in, but then it only took two weeks to get discharged." Similarly, Paul reported, "They gave me my paperwork, they had me sign off, and then

Table 3.1 Participants' report under respective categories

Joining the Military	Discharge	Transition	Mental Health/ Substance Use Disorder	Barriers	Needs
<ul style="list-style-type: none"> -Purpose -Lack of direction/ structure -Education benefits -Part of something bigger -Comradery -Shattered expectations -Felt lost 	<ul style="list-style-type: none"> -Others got worse for less -Lucky -Failure/ disappointment /blindsided -Stigma -More than discharge -Unfair -Upgrade seems hopeless 	<ul style="list-style-type: none"> -Unprepared -No direction - "Joke" -Purpose -Wanted military career -Felt cheated -Thrown away -Fast process 	<ul style="list-style-type: none"> -Misdiagnosed -Cheated -Forced out -Can't handle stress -Alcohol use supported by military culture -Exacerbated -Stigma 	<ul style="list-style-type: none"> -Financial -Education -Job opportunities -Scared to access resources -Stigma 	<ul style="list-style-type: none"> -Support Education/ Research -Success stories -Comradery -Acceptance

they took me to the plane and then they just took off. That was it.” Adam stated, “They didn’t have anything to prepare us.” John described his transition as a “joke”, but remained hopeful that, “it’s gotten better I’m sure.” Participants reported feelings of “being thrown away” and a sense that the military “washed their hands” of them. All of the participants described their experience with transition as a challenge emotionally, with common feelings of devastation, hopelessness, shame, doubt, depression, and anxiety about the future.

Discharge. The participants reported a variety of feelings related to their discharge status. All of the participants reported being disappointed by their discharge, using statements like, “I felt like a failure”, “I was devastated”, “I was blindsided”, and “It felt like my life was over.” Some of the participants reported mixed feelings of disappointment and gratitude for the discharge they received. Matt said, “I feel like I

should be grateful for what I did get considering how many times I [got in trouble].” Similarly, John stated, “I knew the consequences. So, I feel like I got lucky.”

All of the participants described some level of shame associated with their discharges, with many of the participants reporting that they avoid disclosing that they were ever in the military. Jane said, “I don’t even talk about it to this day. I tell people who have confidentiality.” Most of the participants reported feeling “blindsided” by their discharge. Adam described, “I thought I’d do my four years and get out with an honorable. It never occurred to me to think about the levels of discharge until I was getting processed out.”

Four out of five participants indicated a sense of ownership for their discharge and clearly articulated the reason for their discharge. Only one participant believed that he was discharged unfairly; however, many of the participants reported feelings of hopelessness associated with their discharge. For example, Matt stated, “Sometimes I wonder what would have happened if I would’ve fought it and didn’t just accept it...but they were gonna give me what they were gonna give me. What could I do?”

In regard to discharge upgrade, all of the participants had heard about the discharge upgrade process in some respect; however, all participants appeared discouraged when discussing the discharge upgrade process. Paul stated, “I have a better chance of winning the lottery than having them review my discharge and determining whether or not it should be upgraded.” Similarly, Matt said, “You’re just at their (the review board’s) mercy.” None of the participants could explain how the discharge upgrade process works, suggesting that the process is as complicated and discouraging as described in previous sections of this thesis.

Mental health and substance use disorder. Four out of five participants were diagnosed with a mental health condition or substance use disorder. Mental health diagnoses included borderline personality disorder, bipolar disorder, and adjustment disorder. All participants who reported being diagnosed with a substance use disorder were diagnosed with an alcohol use disorder. Out of the four participants who reported being diagnosed with a mental health condition or substance use disorder, two reported that their time in the military significantly exacerbated the symptoms associated with their diagnosis, while one participant believed that the military diagnosed him inappropriately. John stated, “The Marine Corps taught me how to be a functioning alcoholic.” Adam described self-medicating his feelings of depression with alcohol, “I was pretty depressed in the military and I think that alcohol helped a lot.” John noted the discrepancies between alcohol and other drugs. “The amount of times that I did things drunk I think was a way more serious consequence than anything I ever did while smoking marijuana. There’s that age-old argument.” The “age-old argument” that John referred to is the debate on alcohol versus marijuana; using alcohol is typically seen as more socially acceptable than using marijuana. In his experience, the Marine Corps appeared to tolerate alcohol more readily than other substances, leading him to use alcohol in excess.

One participant reported that they felt they were misdiagnosed and “forced out” by means of a mental health diagnosis, as Paul described, “It seemed like the company commander didn’t want me to stay because I reported some abuse from the drill instructor and other members of my company and by discharging me he could sweep it all under the rug.” Paul described this experience further,

I got my head shoved into the armory hatch, I was slammed against a chain link fence...the drill instructor just sat there and said, 'This is what's going to happen to you if you don't pick up'. I just broke down crying and they sent me to the hospital where they said I wasn't suicidal but I had a history of 'bad coping.'

Paul's experience indicates that he seemed to act appropriately to physical and emotional abuse that he endured during his basic-training. As a result of an "emotional breakdown", he was diagnosed with an adjustment disorder and is now unable to reenlist, despite his desire to have a military career. Paul's story will be discussed further under the theme "resiliency."

Barriers. The barriers reported due to discharge status were access to education and specific employment opportunities. Stigma was also reported to be a barrier, but will be discussed in-depth later in the "themes" section of these findings.

According to two of the participants, a less than honorable discharge has prevented them from obtaining government employment. Paul explained, "When I was trying to join the police force, I had to bring it (the discharge) up because they would have to look through my records." Adam provided an example,

I can't get any job anywhere that has a contract with the government. Like fast-food chains that they have on [military] bases, they have a government contract. Not that I would try to get a fast-food job, but that's just an example.

John described a different kind of barrier when looking for employment, "I was ineligible to receive a job because it was in the same building where I was receiving counseling." His main struggle is not being able to access the services he needs because of his extensive involvement in the veteran community. John described seeking addiction

treatment services from the VA, “I was filling out all the paperwork and just freaked out. I don’t want that information out there and documented. I may want to run for office someday and I can’t have that coming out.” Not only was he unable to be employed at the same place where he received services, but he also has fear associated with accessing services at all.

Needs. The most common needs reported were support, comradery, and acceptance. Adam explained, “In the beginning, I didn’t really have anyone who had been there before. So, I was just trying to do the best I could and didn’t really know what was going on.” He needed support and guidance when he was given a general discharge, and reported,

I think it helps having other people who are in the same boat...having people who have been there...gone through it or who have improved their chances. Somebody who could encourage you to improve your situation and can show you how they improved.

What Adam described above is a representation of support and comradery—it would have been helpful to him if he had a group of people with similar circumstances that he could rely on.

Paul also identified the biggest need for former servicemembers with less than honorable discharges as support and comradery. “Find something that will help you move on with your life.” Paul found some relief after his entry-level separation from the Marine Corps when he got involved in campus organizations. Paul described his discharge from the military as “probably the hardest thing I’ve been through” and the support he found through involvement in new activities is what helped him through that

difficult time, and is what he would recommend for other former servicemembers with less than honorable discharges. John described the biggest need as acceptance,

I want to say acceptance. I want to say honor. Some people are better at handling it (the military) than others and if you can't handle it, then they just say "see ya, dude." We abandon them. You can get a thousand "atta-boys" but you suck one dick and then you're just a cock sucker. And that's the military mentality.

John described the "military mentality" in regard to the unfair circumstances that may accompany a less than honorable discharge. In less colorful terms, a former servicemember may have done very well throughout their military career, but if they mess up even once, it could all be diminished and that undesirable discharge may be the only aspect of their identity that other people see.

Other needs were more education and research about former servicemembers with less than honorable discharges, as well as "success stories" about these former servicemembers. Matt described that not only do more services need to be available to former servicemembers with less than honorable discharges, but the services need to present themselves in a way that allows people like him to make an informed decision on whether or not that particular service will be helpful,

The success stories of people in my predicament and services that we have available to us need to be put out there more. There's some guy at a desk with a plethora of pamphlets but they don't really know. They need to make some kind of documentary of people who have gone through similar experiences. You could feel better about the decision you would make. What's the success rate? Show me

what you can do and what you've done. Just being able to share stories with similar services. Just have everything transparent.

Many of the participants appeared to believe that others (those who also have a less than honorable discharge) "have it worse" than them. For example, Jane described her opinion of needs for former servicemembers with less than honorable discharges, "Not really in my case, but other people should get access to counseling, healthcare, and medical benefits. People get dishonorably discharged even though they had PTSD from the war and that's not fair." Similarly, John stated, "The guys and gals who get a bad discharge because they get in trouble as a result of mental illness, substance use disorder, trauma, or the culture. That's not right."

Themes

After the data was coded, patterns of similar experiences became very apparent across questions. Participants' discussions consistently revolved around elements of stigma, purpose, and resiliency. This section will discuss each individual theme. First, it is important to establish context by defining the theme and referencing the literature. Next, each theme will be exemplified by one participant's story that best captures the essence of that theme. Finally, a summary will be provided that will include the other participants' experiences related to the theme.

Stigma. Goffman (1963) defined stigma as possessing an "attribute" that sets an individual apart from the others in that person's category or group. The different individual is then "reduced in our minds from a whole and usual person to a tainted, discounted one" (Goffman, 1963, p.3). Former servicemembers with a less than honorable discharge are often discredited for their service, ostracized from their veteran

community, and left feeling ashamed or “tainted”, consistent with Goffman’s (1963) description. However, unusual attributes are not stigmatizing alone. Acosta et al. (2014) argued that stigma is fluid and its presence, absence, and levels of severity are contingent on shifts in relationships and context. This suggests that in the context of former servicemembers’ discharge status, the stigma associated with each discharge is different because the desirability of each discharge changes the context. For example, the stigma associated with a general discharge is likely going to be extremely different than the severity of stigma a former servicemember with a dishonorable discharge may experience.

In order to illustrate the theme “stigma”, consider John’s experience. John was discharged honorably from the Marine Corps in 2006. “My time in the Marine Corps was exceptional...the most useful I felt to my fellow human.” John described a life-long passion to serve his “fellow human” by means of a humanitarian mission in the military. Although his four years in the Marine Corps was exceptional, he was unable to quench his humanitarian passion through this service. A few years after he left the Marine Corps, he decided to join the National Guard in order to explore new opportunities.

John was ecstatic when he was selected to join a prestigious humanitarian mission in Afghanistan. “That really made me feel empowered and like there was a sense of purpose and destination to what I was doing”. Then, John’s world came crashing down when he tested positive for marijuana on a random drug test. “I was looking at a straight, dishonorable discharge. It was devastating.”

John reported to his superiors that he had eaten a pastry at his mother’s house that, unbeknownst to him, was made with marijuana, which explained the traces of THC

found in his urine. This is the story he fabricated in order to avoid the devastating repercussions of a dishonorable discharge. “This is something that I don’t divulge that often. I was smoking marijuana while I was in the National Guard.”

John was facing life-altering repercussions of this mistake, and didn’t feel like he had any choice other than to lie and commit fraud against the United States Government in order to avoid a dishonorable discharge,

My whole purpose and being a humanitarian, I saw it all going away...If I had gotten the dishonorable discharge, I could have lost all of my benefits from my four years in the Marine Corps...just that discharge next to my name would discredit me.

John ended up receiving a general discharge from the National Guard and said, “I’ll have to live with that lie for the rest of my life. It will always hang over me.” Although he will always have to live with that experience, he doesn’t necessarily regret it,

I avoided the full consequences of my actions. I knew the rules and I knew the consequences. But if I had gotten a dishonorable, I wouldn’t be where I am right here right now because I’m using most of my benefits that I got to keep for school. There’s a lot of people in the community that see me as a leader. If I had gotten a dishonorable, I don’t think I would’ve had this opportunity for the people I’ve helped to see my character and see who I really am. Today, I live my life honorably.

John’s experience illustrates the powerful fear of the repercussions of a dishonorable discharge in regard to his benefits and the stigma he would face. John illustrates this by

saying, “I was willing to compromise my integrity in order to avoid the stigma of a dishonorable discharge.”

Many participants described feelings of fear or shame associated with what other people might think about them if they knew about their discharge status. Paul was denied an opportunity to work as a police officer, because he is now labeled as “unable to adequately handle stress” due to his discharge status and mental health diagnosis. He described that he was frustrated not only with the stigma surrounding his discharge, but the stigma associated with mental illness. Jane described a similar experience with stigma, and was hesitant to discuss the circumstances surrounding her discharge, because she was discharged due to mental health concerns.

Matt did not report any issues with his mental health, but he did describe experiencing stigma associated with not only his discharge status, but his history of being in foster care. He explained that often when people find out he grew up in foster care, he can feel them lowering their expectations of him. In regard to his discharge status, he expressed,

You can just be walking around school and you’ll see a program for veterans and I won’t even open the door to ask anymore. There’s a lot of services and a lot of benefits out there but that door is closed to me.

Many of the participants reported that they don’t disclose their military history very often due to the uncomfortable discussion that often occurs if their discharge status is brought up in conversation. Their experiences are similar to what Goffman (1963) described as an awkward interaction when “normals and stigmatized...enter one another’s immediate

Table 3.2 Illustration of mirror relationship between joining the military and transition

Joining the Military	Discharge	Transition	Mental Health/ Substance Use Disorder	Barriers	Needs
<ul style="list-style-type: none"> -Purpose -Lack of direction/structure -Education benefits -Part of something bigger -Comradery -Shattered expectations -Felt lost 	<ul style="list-style-type: none"> -Others got worse for less -Lucky -Failure/disappointment/blindsided -Stigma -More than discharge -Unfair -Upgrade seems hopeless 	<ul style="list-style-type: none"> -Unprepared -No direction/structure -“Joke” -Purpose -Wanted military career -Felt cheated -Thrown away -Fast process -Felt lost 	<ul style="list-style-type: none"> -Misdiagnosed -Cheated -Forced out -Can’t handle stress -Alcohol use supported by military culture -Exacerbated -Stigma 	<ul style="list-style-type: none"> -Financial -Education -Job opportunities -Scared to access resources -Stigma 	<ul style="list-style-type: none"> -Support Education/Research -Success stories -Comradery -Acceptance

presence” (p.13). Matt stated, “I’d understand if I got a dishonorable, but I got the next best thing you can get [general discharge].” As evidenced by the participants’ experiences, simply having a discharge that is not honorable opens former servicemembers up to judgement, criticism, and assumptions.

Purpose. During the data analysis process, a very interesting theme appeared that was not anticipated (see Table 3.2). A theme of “searching for purpose” was consistent throughout every single participant’s story, and, most interestingly, their experiences when first joining the military and when they were being transitioned out of the military mirrored each other.

Baumeister (1991) determined that purpose involves three elements:

The goal or state is imagined and conceptualized, current behavior options are analyzed and evaluated according to whether they will help bring

about this desired goal state, and the person makes choices so as to achieve the goal (p.33).

Weinberg (2013) identified learning, relationships, and spirituality as common elements of purpose and meaning. One key component of purpose and meaning, “learning”, was consistent with the participants’ commitment to find a purpose through their education.

As Table 3.2 illustrates, searching for purpose, lacking direction/structure, and feeling lost were experiences that the participants consistently reported both during their initial contact with the military and when they were transitioning out. This suggests that the former servicemembers were searching for a sense of purpose, structure, and direction and potentially found those things after enlisting in the military. Those same elements that they were looking for disappeared after they were discharged, leaving them to rediscover their purpose and direction in life.

In order to exemplify “purpose”, consider Matt’s story. Matt grew up in the foster care system and lacked a sense of direction for most of his life. “They (the foster care system) don’t do a good job of giving us any real-life skills. I had nowhere to go. So, I figured the military sounded good.” Matt didn’t feel like he had options when he aged-out of the foster care system. He felt lost and the military provided him a path and purpose to follow,

Statistically, we (people who grew up in foster care) aren’t expected to make it.

You’re either incarcerated, homeless, or dead when you age out. You’re not expected to be successful. So at least I got out and joined the Navy.

Unfortunately, Matt’s search for purpose was not a simple task. He stated that he “did well on the ASVAB (a test that determines what kind of duties one will perform in the

military)” and that he was looking forward to a cryptotech position; however, he was diagnosed with colorblindness soon after this assignment, and quickly found that he was unable to perform the duties required. He was resigned to mostly “grunt work” and described this experience as “unfulfilling...I was just lost the whole time.”

Matt described that, in his opinion, the military does not account for “prior life history.” He explained that he was not provided enough guidance to succeed in the military and suggested that the military may intentionally seek individuals who are lacking direction in their life,

I think a lot of people have a similar story like this and go into the military for different reasons. It’s one of two things: either there is a long history in their family or what other choice do they have? They’re not recruiting the cream of the crop. Especially the young ones.

Matt had a long pattern of disciplinary action taken against him during his time in the Navy. He expressed gratitude for his chief, who reportedly spoke up for him, resulting in a general discharge rather than an other than honorable discharge. “Considering all the things I did in the Navy, I’m lucky I got a general.” After he was discharged, Matt was left feeling lost and uncertain about where to turn next,

To this day, I wonder what would have happened if I didn’t just accept it (the discharge), but I just wanted the pain to end. What could I do? I had nobody. I went into a group home at 6-years-old and graduated at 18. There was no one to look up to, no father figure, no nothing. I didn’t know what to do. And that was the story of my life.

Ultimately, Matt found his way and is now pursuing an associate's degree and plans to get a bachelor's degree as well. "School is finally the first thing I am going to finish. I'm doing it for me, to better myself." Matt has found a purpose for the time being; he intends to succeed academically and re-build a meaningful life for himself.

Matt's story is similar to the other participants' experiences. John also searched for purpose and described himself constantly rediscovering and redefining his purpose, in and out of the military. John said that the hardest aspect of transitioning out of the military was, "Purpose. Finding purpose outside of the [military]." Jane described a yearning for direction when she enlisted in the military, "I didn't really know where I was going in my life." Paul had a very difficult time with his transition back into civilian life, "I had no sense of direction. I literally didn't know what I was doing. I thought it was over. I thought my life was seriously over." Adam was interested in the educational benefits the military offered and intended to find his purpose through school, which he still found a way to pursue without education benefits.

All five of the participants went into the military with expectations that they would be able to find meaning in their lives and, ultimately, discover a sense of direction and purpose. Despite the barriers that they have faced during their journey, they have all managed to persevere and find purpose through other means.

Resiliency. Resiliency has been defined as the ability to "bounce back" from adverse situations and find success in adjusting to distressing change (Norman, 2000; Siebert, 2005). When someone is resilient, they are able to not only cope with distressing situations, but they emerge stronger than before (Siebert, 2005). Resiliency was displayed consistently throughout each participant's story. They all described finding

themselves in discouraging, overwhelming situations, and yet, they have all somehow found their way and have persevered despite the challenges they have faced. Norman (2000) noted that individuals who have been held to high expectations are encouraged to reach their full potential, which enhances resiliency. It may be that these former servicemembers all display resilient characteristics because of their time in the military and the high expectations they were expected to achieve.

Consider Paul's story as a representation of the theme "resiliency." Paul expected his enlistment in the Marine Corps to be a "no man left behind" experience and was "looking forward to be a part of something that was bigger than [himself]. Doing something that was worth it. Making a difference." Paul was extremely motivated and passionate about having a career in the military. However, this dream was shattered when he was discharged just three weeks away from graduating boot camp. "I feel pretty cheated. I feel like they should've kept me in still. I never wanted to leave." Paul endured physical, verbal, and emotional abuse during his time in boot camp:

I was struggling to keep up with everyone...another recruit picked a fight with me and shoved me into a wall. I fought back at first but stopped because I didn't want to violate the creed which was "a recruit shall not hurt another recruit." I got my head shoved into an armory hatch, I was thrown around the room. I was slammed against a chain link fence. I was struggling to do the post formation so I was put on fire watch and before I was, the drill instructor referenced the movie Full Metal Jacket and the other recruits picked up on it. A whole bunch of recruits surrounded me, they started pushing me around, telling me if I keep fucking up, they're going to fuck with me. They took my rack and destroyed it.

They took my cammies and they threw them all over the place. The drill instructor just sat there and said, “this is what’s going to happen to you if you don’t pick it up.” At first, I wanted to hit the nearest recruit, but I couldn’t bring myself to do it. And I just broke down crying and they sent me to the hospital where they said I had a history of “bad coping.” And then they discharged me with an adjustment disorder. They sent me on my way.

Paul believed that he was diagnosed inappropriately and was “forced out” due to reporting the abuse he endured. Since he was discharged before serving 180 days, Paul has an uncharacterized discharge and does not receive any military benefits. He described other barriers as a result of his discharge, “It prevents me from entering any military service without getting a waiver for both the discharge code and the medical reasoning.” He also is unable to obtain desirable employment opportunities, such as working as a police officer:

A lot of people would tell me that I can’t work in high stress level jobs because of the way I handled stress back in boot camp, which I completely disagree with but people won’t give me that opportunity. And I’m a hard worker.

At the end of his interview, John wanted to speak directly to other former servicemembers with less than honorable discharges and provide them with words of encouragement. He stated, “Just keep trying. Just try to find something that’s worth your time. You still have a life.” As expressed in Paul’s story above, he has had to overcome a lot of pain, disappointment, and hopelessness since being discharged early from the Marine Corps. Despite these setbacks, Paul applied for financial aid to pay for college, is

working towards his bachelor's degree at a university in Northern Nevada, and is an active member in campus organizations.

Education benefits were a key motivator for many of the participants when they joined the military; however, in order to qualify for the GI Bill, a servicemember must have an honorable discharge. Nevertheless, all of the participants are current college students pursuing various degrees. Four out of five participants are paying for school out of pocket, with loans, or other grants. Despite this potential financial pitfall, they did not let the loss of the GI Bill deter them from pursuing higher education.

Since John was discharged honorably from the Marine Corps, he was the only participant able to use GI Bill benefits for school. His resiliency comes from his determination to always better himself and give back to others, despite the guilt and shame he harbors from fraudulently avoiding a dishonorable discharge from the National Guard. "I don't even know how to made amends with this. I lied to the U.S. government about what I did and that could have serious, detrimental effects on my future." John developed a severe alcohol use disorder during his time in the military and still struggled with it post-discharge. He has been sober now for two years and is involved in recovery programs on his campus. John displayed some ambivalence about his discharge during his interview. On the one hand, he feels badly about the circumstances and on the other, he believes that it may have been a positive experience. "That discharge may have been the best thing that could've happened to me. If I would've gone to Afghanistan, I would've died out, I would've come back. Would I have remained sober? I'm not so sure." John used his difficult circumstance to enhance his quality of life instead of

hindering it; he enrolled in college, achieved sobriety, and positioned himself as a leader in many veteran-focused programs.

Matt experienced a great deal of instability, fear, and lack of direction for most of his life before he joined the military. Even after the discouragement he experienced when he found out he was ineligible to receive GI Bill benefits, he still found a way to enroll in higher education. He has continuously strived for more and has beaten the odds that he perceived to be against him.

Jane's story also demonstrates a significant amount of resiliency. During her time in basic training, her parents decided to divorce and she was devastated. "I had a mental meltdown. I couldn't focus or pay attention." This was such a shock and she was experiencing so much emotional pain that she attempted to take her own life. She was, thankfully, unsuccessful and has since received the support that she needs. Despite receiving mental health treatment and a past history of using alcohol to self-medicate, Jane has persevered and is nearly finished with her bachelor's degree.

Similarly, Adam experienced significant distress during his time in the military and also attempted to take his own life twice. He used alcohol to self-medicate his depression and, subsequently, found himself in disciplinary review constantly.

I kept going to work drunk. I drank a lot. I woke up in the hospital and they pumped my stomach because I had a .31 BAC. My chief made a big deal out of it, but that was my normal.

Adam attended many alcohol rehabilitation programs in the military and has found sobriety and recovery since his discharge. He is pursuing a bachelor's degree and has worked through college in order to pay his tuition. "Not having the GI Bill has made

school a slow process. Some years, I could only go one semester.” Consistent with the other participants, Adam has continued to pursue his drive to obtain a college degree and has not allowed his discharge status to stop him.

This group of former servicemembers’ determination to achieve their educational goals despite the struggles associated with their discharge statuses reflects resiliency. This drive to achieve an educational goal is consistent with a “sense of direction or mission”, which has been identified as key personality trait of resilient people (Norman, 2000, p.4). The participants also demonstrated resiliency by making comments that can be interpreted as not allowing their discharge status to define or deter them from achieving their goals.

Chapter 5: Discussion

The purpose of this study was to explore the experiences of former servicemembers with less than honorable discharges. Through this exploration, the main goal of this study was to give a voice to the former servicemembers who are often forgotten in the conversations about veteran services because of their discharge status. The study's findings illustrate what the experiences might be like for former servicemembers with less than honorable discharges and this section will discuss what implications these findings may have for practice.

The literature that has examined former servicemembers with less than honorable discharges mainly emphasized the impact of benefits, the barriers to a discharge upgrade, and mental health disorder associations (Izzo, 2014; Leroux, 2014; Moulta-Ali & Panangala, 2015). This study was conducted with these previous understandings in mind, but the experiences of the former servicemembers in this study were incongruous with that focus. The only barrier that was consistently reported was access to educational benefits. None of the participants reported much concern with upgrading their discharge, appearing to conclude that it is a hopeless, frustrating, and complicated process that wouldn't be worth the unlikely benefit it could provide. Their main concerns were about the stigma associated with their discharge, subsequently leading to the way that they are treated. They all consistently reported a determination to find their purpose and meaning in life, and each participant was attempting to find these things through their education. Finally, the resiliency displayed by these former servicemembers was remarkable, another aspect that was not thoroughly examined by existing literature.

Consistent with the literature, some of the participants perceived that they were discharged from their service on the basis of a mental health diagnosis or substance use disorder. Three out of four of participants who were diagnosed with a mental health condition or substance use disorder reported that the military either caused their symptoms or significantly exacerbated them. The literature examined former servicemembers with PTSD who were discharged less than honorable due to their symptoms (Izzo, 2014). Where the literature lacks, and did not adequately inform this study, is the implications for former servicemembers who were not diagnosed or experiencing symptoms of PTSD. None of the participants in this study were diagnosed with PTSD, nor did they report experiencing symptoms of PTSD.

It seems that there could be a less severe stigma associated with former servicemembers and PTSD, consistent to what Goffman (1963) said about stigma having the potential to be helpful or debilitating depending on the context. The literature on veterans with PTSD is overwhelming, suggesting a wider understanding and, possibly stronger compassion, towards former servicemembers with this mental health diagnosis. However, what kind of support is available to former servicemembers diagnosed with personality disorders, adjustment disorders, depression, anxiety, and other mental health disorders? The military typically screens for mental health disorders upon enlistment and will dismiss those servicemembers who do exhibit concerning symptoms (Leroux, 2014). However, Leroux (2014) found that servicemembers diagnosed with personality disorders are becoming more prevalent, suggesting that preexisting mental health disorders are not always determined prior to beginning basic training.

The Secretary of Defense's memorandum issued in 2014 that expedited discharge upgrades only applies to former servicemembers who are claiming that undiagnosed PTSD was the cause for misconduct leading to their less than honorable discharge (Secretary of Defense, 2014). This is a victory for those former servicemembers who were not diagnosed with PTSD until several years post discharge; however, the lack of attention to former servicemembers with a myriad of other mental health symptoms that are not consistent with PTSD do not have the same opportunities for expedited review of their discharge, and could be open to harsher criticism than those with a PTSD diagnosis.

This research was qualitative in nature, but the sample size ($n=5$) was still very small. It is not generalizable and it is arguable that it is difficult to ever generalize data that is collected based off of individual experiences (Diefenbach, 2008). It would be beneficial to examine the experiences of former service members among a larger, more diverse sample.

The snowball sampling method was both a limitation and a strength of this study. Snowball sampling is a useful tool when attempting to contact hidden populations, but it is a non-probability sampling method, which impedes a random sample (Sadler, Lee, Seung-Hwan Lim, & Fullerton, 2010). All of the participants were college students, despite recruitment taking place in other locations outside of a college campus. Not all of the participants attended the same institution, but participants reported that they heard about the study from friends and other participants, suggesting that other college students would be common in their social groups. This resulted in a sampling bias and, subsequently, directly impacted the findings of this study. The findings of this study would likely be very different if the study predominately consisted of former

servicemembers who were homeless, served in a different time period/war, never went to college, and many other factors that were not included in this sample.

Another indication of sampling bias was indicative of participants' discharge status. None of the participants had an other than honorable, misconduct, or dishonorable discharge. This is a limitation because the experiences of the former servicemembers with these discharges were not examined, thus their experiences may be very different than those reported by this sample. Even though the two participants with general discharges were disqualified from education benefits (John got to keep his education benefits because of his honorable discharge from the Marine Corps), they still have access to most VA benefits, whereas other than honorable and punitively discharged individuals do not.

The sampling biases described above had a significant impact on the themes discovered, particularly resiliency. The resiliency discussed in the findings of this study were predominantly based on the participants' success with attending higher education, despite their struggles. Since the sample consisted entirely of college students, of course they would have the common trait of pursuing educational goals. If the sample consisted of non-college students or former servicemembers with other than honorable or punitive discharges, resiliency may or may not have been displayed, and, if it was displayed, it may have been displayed very differently.

As described previously, this study did not originally intend to include former servicemembers with uncharacterized discharges due to the stipulation that these individuals did not serve at least 180 days. However, the stories described by the two participants with uncharacterized discharges exemplify a piece of military culture that

participants described as “weeding out the weak.” In Paul’s case in particular, he experienced what he described as the military “washing their hands” of him because he was perceived as not being “tough enough” to handle the constant abuse he experienced. He even reported that the military mental health professional that diagnosed him with an adjustment disorder described Paul as having a history of “bad coping.” In other words, he couldn’t “cope” with the “pick yourself up by your bootstraps” military mentality. Since he didn’t fit the mold, he was essentially kicked out. Jane also had an uncharacterized discharge, but her situation was very different. She did not report that the military had any effect on her mental health, as she negatively responded to a situation in her home life. It seemed to be reasonable for her to leave the service under those circumstances, as she also reported that she was going through a very hard time emotionally and mentally during that period of her life. However, if she had responded in a way that was perceived as “tough” or fit the military mold, maybe she would have been allowed to continue her basic training. This military mentality of “toughness” is consistent to what Acosta et al. (2014) described in regard to military mental health stigma. Having mental health issues is considered weakness in the military and the servicemember is often regarded as unfit for duty (Acosta et al., 2014). The experiences of the two participants with uncharacterized discharges demonstrate how quickly the military may discharge a servicemember for mental health issues, whether appropriate or not.

It is also important to acknowledge that the experiences of those with uncharacterized discharges are very different than those former servicemembers who served for several years and received a general, other than honorable, or punitive

discharge. The level of anger, shame, loss, and devastation associated with a less than honorable discharge would likely increase the longer a former servicemember was in the service. If a former servicemember has an uncharacterized discharge, they did not serve 180 days, which would be three months or less. While negative feelings would absolutely be expected if an individual received an early separation, as displayed in the findings of this study, those feelings would likely be compounded if they had served for a longer period of time.

More data is needed to accurately represent a problem of this scale. The percentage of former servicemembers that have received a discharge that is less than honorable needs to be examined, along with demographic information within that aggregate. It would be worth looking at the racial disparities between types of discharges, as well as the mental health issues in relation to discharge status. This type of research is challenging because of the sensitive nature of the issues. It is difficult to gain access to this information, because it is so stigmatizing and it may be hard to keep it confidential.

If the data can be retrieved to create a better representation of the target population as a whole, more information could be gathered about what these former servicemembers need and how providers can better serve them. Outreach materials could be created to encourage the VA and other veteran services agencies to provide more information to former servicemembers whose discharge statuses disqualify them from services. For now, information can be provided on how to get their discharge status upgraded if that is something they are interested in. Secretary David Shulkin's initiative to expand mental health care to former servicemembers with other than honorable

discharges may benefit the estimated 500,000 former servicemembers who could need those services. It will likely be necessary for the VA to increase the number of mental health providers in order to respond to the projected increase in demand for services.

The implications from this study for social work practice can be interpreted using Person-Centered Theory, with emphasis on Rogerian concepts including unconditional positive regard. Carl Rogers believed in the “actualizing tendency”, which is the human drive to grow, develop, and achieve autonomy (Rogers, 1959). This process can be disrupted when an individual perceives their worth as conditional, where they are valuable in some cases and disposable in others (Rogers, 1959). In the case of former servicemembers with less than honorable discharges, others may diminish their worth as a “veteran” once they discover that they were not discharged honorably. This demonstrates a conditional positive regard for former servicemembers. The perception is, according to the participants’ experiences, as long as servicemembers serve “honorably”, they are worthy of care and respect, but are unworthy of these things with a less than honorable discharge.

The recommendation of this study is to encourage all military providers to adopt an unconditional positive regard or acceptance towards all former servicemembers, regardless of discharge status. Carl Rogers said, “The curious paradox is that once I accept myself exactly as I am, then I can change” (Rogers, 1961). This concept could also be utilized in order to inform macro-oriented implications such as trainings for military practitioners. Social workers could be trained in order to possess adequate knowledge about this population, thus being able to offer appropriate services. Considering the reported needs of acceptance and understanding, this could be achieved

by military practitioners being better informed of how to offer appropriate care to these former servicemembers.

If former servicemembers with less than honorable discharges can receive acceptance, compassion, and understanding, as indicated as primary needs in the findings of this study, they will be able to move towards their purpose, be relieved of stigma, and demonstrate resiliency. It is crucial to keep in mind that, just because a former servicemember has a less than honorable discharge, this does not make them a less than honorable person.

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Appendix A

Demographic Questionnaire

- Age
 - a. 18-25
 - b. 26-33
 - c. 34-41
 - d. 42-49
 - e. 50-57
 - f. 58-65
 - g. 66+
- Gender
 - a. Male
 - b. Female
 - c. Transgender MTF
 - d. Transgender FTM
 - e. Prefer not to answer
- Branch(s) of service (circle all that apply)
 - a. Army
 - b. Navy
 - c. Marines
 - d. Airforce
 - e. Coastguard
 - f. Reserves/National Guard
- Years served
 - a. _____ to _____
- Did you serve in combat? If so, which zone?
 - a. Yes
 - b. No
 - c. Zone(s): _____, _____, _____
- Highest rank achieved

- a. E1-E2
 - b. E3-E4
 - c. E5-E6
 - d. E7-E9
 - e. W1-2
 - f. W3-5
 - g. O1-2
 - h. O3-4
 - i. O5-6
 - j. O7-8
 - k. O9-10
- Discharge Status
 - a. Honorable
 - b. General
 - c. Other than honorable
 - d. Misconduct
 - e. Dishonorable

Appendix B

Interview Questions

1. What was your expectation when enlisting in the military?
 - a. If drafted- what was that experience like for you?
2. How would you describe your experience in the military?
3. Describe your discharge status.
4. How did you feel about your discharge?
5. What discharge were you expecting or hoping for?
6. Why do you believe you received your discharge?
7. Did you receive any support to prepare for leaving the service?
8. What was the biggest challenge with transitioning into civilian life?
9. What benefits were you looking forward to after your service?
10. How has your discharge impacted your access to those benefits?
11. What has been the biggest barrier for you in terms of receiving the services you need?
12. What kind of struggles, if any, have you had with access to employment, education, healthcare, mental healthcare, housing, etc. (any other particular hardships due to your discharge status?)
13. Are you aware of any services to upgrade your discharge status?
14. Do you understand how the discharge upgrade process works?
15. Have you ever been diagnosed with a mental health condition?
16. Have you ever experienced symptoms during or post military service that made you concerned about your mental health? (depression, anxiety, “jumpy”, nightmares, etc)
 - a. If experiencing symptoms- do you think these symptoms are related to your time in the military?
17. If you could identify the biggest need for Former servicemembers who have a less than honorable discharge, what would it be?

Appendix D

Consent Information Sheet

Consent Information

We are conducting a research study to learn what barriers service-members who have a less than honorable discharge experience in regard to benefits, mental health care, health care, education, employment, housing, and other services.

If you volunteer to be in this study, you will be asked to answer a series of questions about your experiences with access to services. This is an opportunity for you to tell your story. You will be audio-recorded for the purposes of this study. The audio-recording will only be used for the purpose of transcribing the interview so that it can be entered as data. The audio-tape will be destroyed after it is transcribed.

Your participation should take about 90 minutes.

This study is considered to be minimal risk of harm. This means the risks of your participation in the research are similar in type or intensity to what you encounter during your daily activities. You may experience some emotional discomfort depending on what you choose to divulge to the interviewer. Please remember that your participation is completely voluntary and you may choose to not answer any question that makes you uncomfortable or causes you discomfort.

Benefits of doing research are not definite; but we hope to learn how our community can better serve past service-members who possess a less than honorable discharge. There are no direct benefits to you in this study activity.

The researchers and the University of Nevada, Reno will treat your identity and the information collected about you with professional standards of confidentiality and protect it to the extent allowed by law. You will not be personally identified in any reports or publications that may result from this study. The US Department of Health and Human Services, the University of Nevada, Reno Research Integrity Office, and the Institutional Review Board may look at your study records.

You may ask questions of the researcher at any time by calling Dominique DeVilbiss (Co-Investigator 702-355-4884) or Mary Hylton (Principle Investigator 775-784-6542) or by sending an email to ddevilbiss@nevada.unr.edu.

Your participation in this study is completely voluntary. You may stop at any time. Declining to participate or stopping your participation will not have any negative effects on your receiving gift card compensation.

You may ask about your rights as a research participant. If you have questions, concerns, or complaints about this research, you may report them (anonymously if you so choose) by calling the University of Nevada, Reno Research Integrity Office at 775.327.2368.

Thank you for your participation in this study!