





Are Faculty and Staff Ready to Support Student Veterans?

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INTRODUCTION

Veterans and military service members represent an important portion of the higher-education population, with over one million veterans using their education benefits since 2008¹.

While student veterans share attributes with other nontraditional student populations such as being adult learners or being a married student, their experiences make them distinctive from both traditional and nontraditional students. For example, many student veterans and military service members bring a wealth of unique military experiences to the classroom due to their interactions with foreign cultures and the ensuing world perspective that can lead to more robust classroom discussions². In addition, soft skills developed through military service, such as goal setting, time management, and discipline can aid student veterans in their studying and academic performance. However, student veterans may also carry the negative aftereffects of their combat experiences with them on campus, in the form of posttraumatic stress (PTS), depression, and thoughts of suicide, as reported in the larger post-9/11 veteran population³⁻⁵.

Preliminary studies on the prevalence of psychological distress suggest that over 40% of student veterans screen

positive for post-traumatic stress disorder, 24% screen positive for depression, and 8% endorse past-month suicide ideation^{6,7}. The rates of PTS among student veteran and post-9/11 veteran populations are higher than the rates found in college students generally (9.0%)⁸. The depression rate among post-9/11 veterans is nearly even with the reported college student prevalence of depression of 12.1%⁹, but the rate among student veterans appears to be much higher than college students in general.

40% of student veterans screen positive for post-traumatic stress disorder, 24% screen positive for depression, and 8% endorse past-month suicide ideation⁶⁻⁷

A study from the National Center for Veterans Studies at the University of Utah found that depression severity, in particular, is associated with significantly lower grade

Department of Veterans Affairs. (2014). Department of Veterans Affairs, Veterans Benefits Administration, Annual Benefits Reports, 2000 to 2013. Washington, D.C. Retrieved 12 1, 2014, from http://www.va.gov/vetdata/docs/Utilization/EducNation_2013.xls

² Ackerman, R., DiRamio, D., & Mitchell, R. (2009). Transitions: Combat veterans as college students. New Directions for Student Services, 126, 5–14. doi: 10.1002/ss.311

³ Hoge, C. W., Auchterlonie, J. L., & Milliken, C. S. (2006). Mental health problems, use of mental health services, and attrition from military service after returning from deployment to Iraq or Afghanistan. JAMA: Journal of the American Medical Association, 295(9), 1023–1032.

⁴ Milliken, C. S., Auchterlonie, J. L., & Hoge, C. W. (2007). Longitudinal assessment of mental health problems among active and reserve component soldiers returning from the Iraq war. JAMA: Journal of the American Medical Association, 298(18), 2141–2148. doi:10.1001/jama.298.18.2141

⁵ Lapierre, C. B., Schwegler, A. F., & LaBauve, B. J. (2007). Posttraumatic stress and depression symptoms in soldiers returning from combat operations in Iraq and Afghanistan. Journal of Traumatic Stress, 20(6), 933–943. doi:10.1002/jts.20278

⁶ Bryan, C. J., & Bryan, A. O. (2014). Sociodemographic correlates of suicidal thoughts and behaviors among college student service members/veterans. Journal of American College Health, 63, 502-507.

Rudd, M. D., Goulding, J., & Bryan, C. J. (2011). Student veterans: a national survey exploring psychological symptoms and suicide risk. Professional Psychology: Research and Practice, 42, 354-360.

⁸ Read, J. P., Ouimette, P., White, J., Colder, C., & Farrow, S. (2011). Rates of DSM-IV-TR trauma exposure and posttraumatic stress disorder. Psychological Trauma: Theory, Research, Practice, and Policy, 3(2), 148-156. doi:10.1037/a0021260

⁹ American College Health Association. (2014). American College Health Association-National college health assessment II: Undergraduate students reference group data report spring 2014. Hanover, MD: American College Health Association.





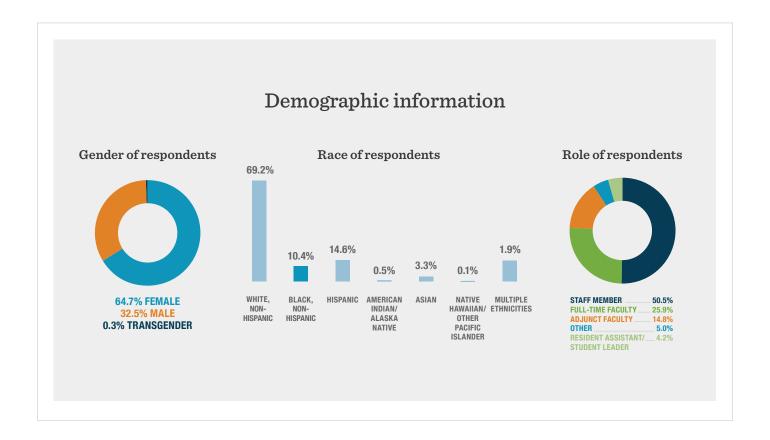
point average among student veterans, especially in the presence of elevated PTS symptoms¹⁰. This same study found that depression, but not PTS, was also significantly associated with turning in assignments late, failing exams, and skipping classes. Relatedly, Ackerman² found that student veterans with PTS reported more difficulty with concentration and focus, thus affecting their academic performance.

Alternatively, faculty and campus-wide staff have more contact with student veterans and can provide referrals to on-campus support services for them, yet many colleges and universities do not provide training on veteran or military culture for their faculty or staff¹¹, thereby limiting the ability of faculty and staff to provide help and referrals to student veterans and hindering student veterans' use of potentially beneficial campus support services.

THE SURVEY

Between September 2012 and April of 2017, Kognito surveyed 14,673 faculty and staff members from 20 geographically dispersed U.S. colleges and universities. Respondents were asked to complete the brief online survey as the first step in completing Kognito's evidence-based interactive military competency and mental health simulation entitled "Veterans on Campus for Faculty and Staff" which was purchased by their institution for purposes of professional development.

- No participants were required to take the survey or compensated for their participation.
- Participants' average age was 43 (SD = 13.7).
- Average years working in education was 9.66 (SD = 8.75).



¹⁰ Bryan, C. J., Bryan, A. O., Hinkson, K., Bichrest, M., & Ahern, D. A. (2014). Depression, posttraumatic stress disorder, and grade point average among student servicemembers and veterans. Journal of Rehabilitation Research and Development, 51, 1035-1046.

¹⁷ Ryan, S. W., Carlstrom, A. H., Hughey, K. F., & Harris, B. S. (2011). From boots to books: Applying Schlossberg's Model to transitioning American veterans. NACADA Journal, 31(1), 55–62.





SURVEY HIGHLIGHTS

The survey revealed that:

70.07%

do not feel adequately prepared to recognize when a student veteran is exhibiting signs of psychological distress including depression, anxiety, and thoughts of suicide.

75.06%

do not feel adequately prepared to approach student veterans to discuss their concern.

42.03% 43.66%

said that they feel prepared to manage a classroom discussion around a veteran sensitive issue.

said that they are not knowledgeable about the common challenges facing the student veteran population.

30.09%

reported that they are unlikely or very unlikely to discuss with a student veteran their concern about the signs of psychological distress they are exhibiting.

95.62%

said that it is part of the role of faculty, staff and administrators to help create a supportive environment for the student veteran population and to connect student veterans experiencing psychological distress with mental health services.

93.89%

said that all faculty, staff and administrators in their academic institution should take a course on military competency and veteran's mental health.

In conclusion, the survey strongly suggests that faculty and staff want to create a supportive environment for student veterans, and want to connect students experiencing psychological distress with support as part of their role. Still, a vast majority report not having the skills, knowledge, and self-confidence to follow through on these critical tasks. Institutions of higher education should tap into this motivated user group and engage them in effective learning experiences to build military cultural competency and mental health skills. With the right preparation, faculty and staff can become active participants in supporting student veterans as they pursue their academic degree and future career growth.





AUTHOR BIOS

Glenn Albright, Ph.D.

Co-Founder and Director of Research, Kognito

Dr. Glenn Albright is a clinical psychologist and former chair of the Department of Psychology at Baruch College, City University of New York. He is also co-founder and director of research at Kognito where his research evaluates the efficacy of game-based health simulations designed to bring about changes in health and mental health behaviors and can cost-effectively impact large numbers of geographically dispersed people that would benefit the most from such training. In his spare time, Dr. Albright volunteers his time running an equine psychotherapy practice for veterans with PTSD.

Craig J. Bryan, Psy.D.

Executive Director, National Center for Veterans Studies at The University of Utah

Dr. Craig J. Bryan, PsyD, ABPP, is a board-certified clinical psychologist in cognitive behavioral psychology, and is currently the Executive Director of the National Center for Veterans Studies at The University of Utah. Dr. Bryan previously served on active duty in the U.S. Air Force and deployed to Iraq in 2009. He has published over 150 scientific articles and several books, and is considered a leading national expert in military and veteran suicide prevention. For these accomplishments, he has received numerous professional and university awards.



About Kognito

Kognito is a developer of role-play simulations designed to prepare people to lead conversations in real life that result in measurable improvements in social, emotional, and physical health. Kognito's suite of mental health simulations for PK-12, higher education, primary care, and acute care settings has been utilized by over 500 organizations. Its higher education programs are also listed in the National Registry of Evidence-Based Programs and Practices.

Learn more at kognito.com.

For Questions about the Survey:

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About the National Center for Veterans Studies at The University of Utah

The National Center for Veterans Studies, based at the University of Utah, engages in research, education, outreach, and advocacy to improve the lives of veterans, and better position these skilled, experienced and well-trained veterans for continued service that further advances American values, prosperity, and security.

Learn more at veterans.utah.edu.





APPENDIX

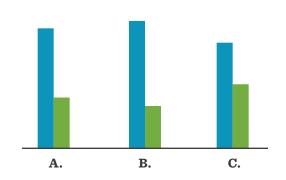
psychological distress

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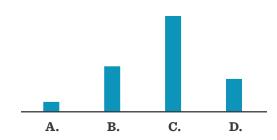
#1: How would you rate your preparedness to... (N=14,673)

| | Very Low, Low, Medium | High, Very High |
|--|--------------------------|--------------------|
| A. Recognize when a student veteran's behavior is a sign of psychological distress | 70.07% | 29.92% |
| B. Discuss with a student veteran your concerns about the signs of psychological distress they are exhibiting | 75.06% | 24.93% |
| C. Recommend mental health support services (e.g. counseling center) to a student veteran exhibiting signs of | 62.25% | 37.75% |



#2: How likely are you to discuss with a student veteran your concern about the signs of psychological distress they are exhibiting (N=14,190)

| 5.38% |
|--------|
| 24.71% |
| 52.05% |
| 17.85% |
| |



#3: How much do you agree/disagree with the following statements (N=13,882)

| | Very Low, Low, Medium | High, Very High |
|--|--------------------------|--------------------|
| A. I am knowledgeable about the common challenges facing the student veteran population | 43.66% | 56.34% |
| B. I feel prepared to manage a classroom discussion around a veteran sensitive issue | 57.96% | 42.03% |
| C. Part of the role of faculty, staff and administrators is to help create a supportive environment for the student veteran population | 3.23% | 96.76% |
| D. Part of the role of faculty, staff and administrators is to connect student veterans experiencing psychological distress with mental health services | 5.51% | 94.48% |
| E. All faculty, staff and administrators in my academic institution should take a | 6.11% | 93.89% |

