MICHIGAN
VETERANS COMMUNITY ACTION TEAMS

Detroit Metro Veteran Focus Groups Report

September 10, 2014
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Preface

This document contains the Detroit Metro Veteran Focus Groups Report, produced by the Altarum Institute, Ann Arbor, Michigan. This report was a part of the Michigan Veterans Community Action Teams (MIVCAT) project sponsored by the Michigan Veterans Affairs Agency (MVAA). Address comments and inquiries related to this report to Patty Russ, Chief of Staff, MVAA, Phoenix Building, 5th Floor, 222 Washington Square North, P.O. Box 30104, Lansing, MI 48909, phone: (517) 284-5215 or email: russp@michigan.gov.
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The Michigan Veterans Community Action Teams (MIVCAT) project is a collaborative community model created by the Altarum Institute to enhance the delivery of services from public, private, and nonprofit organizations to Veterans and their family members. The MIVCAT project was introduced in Michigan by the Michigan Veterans Affairs Agency (MVAA) in August 2013, with pilots in two of Michigan’s ten Prosperity Regions – Detroit Metro Region 10, comprising Macomb, Oakland, and Wayne counties; and West Michigan Region 4, consisting of Allegan, Barry, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Oceana, Osceola, and Ottawa counties.

To discern the needs of Veterans and the services available to them, Altarum gathered information through several channels. Altarum conducted a community assessment that included interviews with key regional leaders, focus groups with Veterans, a survey of Veterans, and a survey of service providers. The focus groups with Veterans in Detroit Metro, reported here, collected information on: how Veterans find out about resources, services, and benefits; the best ways to reach Veterans; Veterans’ experiences with seeking services; sources of support for Veterans; and recommendations for improving the Veteran service system.

Altarum Institute conducted six focus groups as part of a community assessment for the MIVCAT project in the Detroit Metro Prosperity Region. There were two focus groups of primarily Operation Enduring Freedom (OEF)/Operation Iraqi Freedom (OIF) Veterans, two groups of primarily Vietnam-era Veterans, and two groups of women Veterans from multiple eras. Planning and recruiting for the focus groups was led by Altarum staff with support from regional coalition leaders. Four of the focus groups were held in Taylor, one in downtown Detroit, and one in Redford. Forty-two Veterans participated in the focus groups and all of these Veterans completed a survey that included questions about their background and characteristics.

Following are the key findings from the focus groups. Note that italicized text are direct quotes taken from transcripts of the focus groups. The words in brackets help clarify the meaning of the quotation by substituting a person’s position or organization for their name or adding information that was discerned from other parts of the interview or the tone used by the focus group participant.
Of the 42 Veterans completing the survey, 19 (45 percent) lived in Detroit; 3 (7 percent) lived in Canton; and 2 each in Farmington Hills, Livonia, Sterling Heights, Warren, and Woodhaven and the rest were from a variety of locations around the region. The focus group participants represented a range by age, gender, race, and ethnicity. The average age of the groups ranged from 44 for one of the OEF/OIF groups to 66 for one of the Vietnam Veterans groups. The groups were also diverse in income and employment status. Low-income Veterans were somewhat more represented in the focus groups than in the general population of Detroit Metro Veterans. This partially reflects that the groups succeeded in the assessment goal of including homeless and previously homeless Veterans among the focus group participants. Women Veterans were also a larger proportion of the focus groups than the general population of Detroit Metro Veterans. This reflects the design of holding two women’s focus groups to find out more about women Veterans’ needs. Some of the focus group participant characteristics are shown in the table below.

### Focus Group Participant Characteristics

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender (All Participants, N = 42)</strong></td>
<td></td>
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<tr>
<td>Male</td>
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<td>79%</td>
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<tr>
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<tr>
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<td>Other</td>
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<tr>
<td><strong>Annual Family Income Before Taxes (N = 42)</strong></td>
<td></td>
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<tr>
<td>Under $10,000</td>
<td>8</td>
<td>19%</td>
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<td>Greater than $75,000</td>
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<td><strong>Currently Serving in the National Guard or Reserves (N = 42)</strong></td>
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<td><strong>Served in a Combat Theater or Zone (N = 41)</strong></td>
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<tr>
<td><strong>Has a service-connected disability or condition (N = 51)</strong></td>
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<td>60%</td>
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</table>
LEARNING ABOUT SERVICES AND RESOURCES

**Knowledge:** Many Veterans lack knowledge about benefits and services they are eligible for and do not know where to start when accessing the Veterans service system.

> I think there are a lot of programs available, and I think a lot of people that I've met, even at the VA, I don't know if they are aware of them. I've met people who knew some information about the programs, but didn’t explain them properly because I found out the correct information later.
> — Women Veterans Group

Veterans indicated that unless you specifically ask for certain things, service providers are unlikely to refer you to services you may need based on your circumstances.

> If you don't know who to go to, if you don't know the proper name of what you are asking for, it seems like they are more confused than we are as to where to direct us, and often times once we get there. And if we have the correct name of the benefits, they don’t tell us about the other benefits we could be eligible for. That is why I struggle.
> — OEF/OIF Group

**Outreach:** Veterans discussed current outreach efforts and provided recommendations for ways to reach more Veterans with information about resources and services. There was not a consensus on the best single way to reach Veterans but Veterans shared a wide range of ideas for ways to improve outreach. Quite a few Veterans suggested newspapers or television or radio commercials.

> I see a lot of these commercials about the Army, the Navy, and, you know, the recruiting commercials; I guess that's a given because that will be there, but information and where to look for the information should be as available as the recruiting commercials are.
> — Women Veterans Group

Many Veterans suggested that because of generational and individual differences you need to use multiple means to reach Veterans.

> I would launch a website that is specifically geared towards Michigan Veterans. What resources are available with addresses, point of contacts, who you are supposed to connect with, a list of VSOs. I would do a massive campaign because you are right, not everyone has Internet. Everybody walks past the TV, everybody listens to radio. Incorporate places like the VFW [Veterans of Foreign Wars]. You can incorporate places like [the] Wounded Warrior project.
> — OEF/OIF Group

USING THE VETERANS SERVICE SYSTEM

**Navigating the System:** Focus group participants reported that it is difficult to navigate the service system and providers share information but do not guide Veterans enough in how to access and use services.

> I know that we have to do some footwork, but make it more user friendly for those Veterans for those who may have went straight from high school to military and may not have skills to read through [a] 20-page addendum about what needs to be done.— OEF/OIF Group

Veterans rely on the United States Department of Veterans Affairs (VA) as a main source of information but many think that is not effective because the VA is overwhelmed and many Veterans do not fully trust the VA because of bad past experiences.

> [Veterans need] a counselor who can assist them, or just strictly an arena or site where people can go and get all this information, that is separate from the VA administration. Because the VA is dealing with so many Veterans that it makes going through them hard. — OEF/OIF Group

**Sources of Support:** Veterans frequently mentioned other Veterans as a resource for sharing information, helping them navigate the system, and for dealing with a variety of issues.

> Ninety percent of everything I’ve learned, all benefits that I’ve learned that I’m entitled to, came from word of mouth—Veterans. They showed me you have to go do this. “No, don’t take it there;
take it here.” The organizations, they will scratch the surface, but to actually get [information] on how to actually get the benefits [you have to talk to other Veterans]. — OEF/OIF Group

When I first went in, they told me I couldn’t get anything. But later, down the road, I ran into Vets—men that have been there—and they show you the ropes and how to [get support]
— Women Veterans Group

Many Veterans in the Detroit Metro area reported relying on Veterans Service Organizations for support and information.

I think you learn from services members like at the American Legion. They guide you. — Vietnam Era Group

However, many Veterans in the groups noted that the younger generation was less likely to do this and often did not know that VSOs offered help accessing resources and benefits.

You pretty much get the idea when you are young that these are groups, like fraternities. You come out [of] the Marine Corps league, you don’t know that they are actual service organization[s] that help you get benefits and the information that you need. — OEF/OIF Group

### Education Benefits:

Obtaining education benefits is generally seen as fairly easy, in part because colleges have a financial interest in helping Veterans.

When it comes to education, I’ve never had a problem with navigation, with accessing the GI bill. [The] initial time I used the GI bill was the most difficult. After that, once I went, they explained to me how to put in an application. They also had Veteran administrative workers at the school to help you get in, do most of the paperwork needed for you to apply for school. That is where I found it was easier to navigate [than other types of benefits] because there was someone there helping you.
— OEF/OIF Group

However, there are Veterans who do not know what is available to them for education unless someone reaches out to them.

I didn’t know how to go about getting it [education benefits] started. Everything spurred from the one job event that I went to and running into that one person who helped me. — Women Veterans Group

### Employment Support:

Veterans often do not know how to translate their military experience into language that will appeal to a civilian employer.

They [most Veterans] don’t know how to adjust their résumés to get employment. They have no idea on what skill to obtain and don’t know how to get skills [they already have] to something readable to civilians. They look underqualified when they go in to get jobs when they are probably overqualified.
— Women Veterans Group

Veterans were frustrated by their experiences with job fairs because they often did not provide direct connections to jobs that needed to be filled.

[Job fairs are] pretty faces that have been sent by their companies to take résumés; there is no hiring managers on site that can sit and do an interview. [They] hand [out] pen, stress balls, brochures, [and say] “Here, take this application.” [The Veteran says], why did I come here? I could have went online, I could have went to your place of business. It isn’t really what it appears to be. It is extremely frustrating. — OEF/OIF Group

### Disability Benefits:

Most Veterans in the region reported positive experiences with Veterans Services Officers.

I think, what helps me get through the maze, is the fellow that represents us down in the federal building. The person with American Legion, he knows the buzz words. He knows. You don’t have to
open up. He knows a lot of questions to make you feel comfortable. Having people knowledgeable and that know the terms is important to get through the process. — Vietnam Era Group

However, many Veterans in the focus groups thought that many Veterans do not know about the support that is available or that they may be eligible for benefits.

Moderator: Do most Veterans know they can get help with claims?

[Everyone indicates no]

Veteran: A lot of Veterans don’t even know they have a claim. If they don’t meet that certain criteria, the first thing I thought about: walking wounded. The walking wounded are wounded but they don’t get the attention. People don’t even know. — Vietnam Era Group

Health Care: Veterans were very frustrated by the bureaucracy involved in getting health care through the United States Department of Veterans Affairs (VA) and the quality of customer service at the main medical center in the area.

Going to the VA is like going through a gauntlet. You are just waiting for them to prepare some insurmountable task that is just designed to say, you’ve hit a point where [you] say, “Screw it. It is not worth it.” — OEF/OIF Group

I was looking for something, and I never got answers. I went to probably eight different doors. Go to this person. Go to that person. I left the building that day and I never got the answers.

— Women Veterans Group

Veterans had better things to say about the quality of the health care they received.

They have taken care of me, my shoulder, the knee, this eye, and going to fix other eye—they have been good to me. — Vietnam Era Group

I went in and talked to a VA rep at the VA hospital, and they saved my life. Got rid of cancer, and I never had problem at the VA hospital, never. — Vietnam Era Group

Mental Health: Veterans reported that it was challenging to get a timely appointment for mental health services at the VA.

When I began having symptoms—harsher systems of PTSD—I really needed someone to sit me down and let me know what was going on with me. When I came into the medical, health division of the VA, I began to ask them the questions. One guy told me, “You don’t seem like you have a problem, so let’s make you an appointment.” It was set for six months later. — OEF/OIF Group

Veterans who had experience with the system indicated that it is not always easy to find out about available services though there are great services available but often times Veterans do not access them until they are in crisis.

[Once you find out it is available] it’s not as bad as you thought it was from the beginning. I could have [had] this [mental health services] and did this all this time ago. You feel like you got cheated. There isn’t a lot of preventative care — Women Veterans Group

Support for Women Veterans: The women’s Veterans groups thought that there needed to be more outreach and focus on issues specific to women because they are not always listened to in forums and events where males dominate.

There are special issues that female Veterans have that males don’t. It gets rolled up into one. They don’t do anything with the females, maybe she has kids. Maybe need to find out how to handle her school work and provide childcare for her kids or maybe trying to separate from [or] divorce [a spouse]. I had a fiancé in the military; they helped him and they didn’t help me. There is a lot of stuff that goes on that you need special assistance, and [it is] not addressed. — Women Veterans Group
Based on the findings from the focus groups, a series of recommendations were developed that are intended to inform the work of all organizations or entities interested in improving services for Veterans in the Detroit Metro region. These recommendations are summarized here.

**Learning About Services and Resources**
- Develop events designed to broadly inform Veterans about available services and resources similar to what is done at Stand Downs.
- Use a variety of outreach methods to reach Veterans.
- Use outreach messages to provide specific contacts to Veterans that need help, and make it a priority to keep the contact information up-to-date.
- Use messages communicating that support and help are available for Veterans who are facing a variety of challenges in their lives.
- Conduct outreach events designed to appeal to women Veterans.
- Reach out to Veterans who may have had bad experiences with the system or whose issues were not being addressed when they left the military.

**Using the Veterans Service System**
- Providers should be encouraged to effectively connect Veterans to other providers.
- Provide support and resources for developing peer-to-peer support specialists.
- Ensure that peer-to-peer support specialists are targets for outreach information and are encouraged to participate in regional coalitions.
- Veterans Service Organizations and County Veterans Agencies should conduct outreach around resources and information that they can provide Veterans.

**Needs, Benefits, and Resources**
- Reach out to college Veterans with information on such topics as disability benefits and the availability of Veterans Services Officers along with other Veterans benefits.
- Encourage all colleges to give Veterans adequate credit for courses and trainings they completed while in the military.
- All providers who work on employment issues with Veterans should be trained to access information on the Joint Service Transcript and be able to translate military experience into language that is suitable for civilian positions.
- Veterans job fairs should include navigators who help Veterans find what they are looking for and should be designed to provide information or resources that go beyond information available online.
- There should be assistance available to Veterans to help them prepare an effective résumé for positions with the Federal government.
- Provide a clear message that there is free support available to help with disability applications and that support is critical to putting together a successful application.
- Outreach efforts need to both acknowledge the challenges that are involved in obtaining services from VA and emphasize that it is an important resource for Veterans that has helped many of them be healthier and obtain needed help with many problems.
- Help Veterans navigate the VA system.
- Publicize the existence of the VA Vet Centers as a place where combat Veterans can seek help for mental health services outside of the regular VA health care system.
- Help Veterans understand how to become better involved in their own health care and give them the skills they need to ask doctors questions when they feel they are being over-medicated, misdiagnosed, or are having trouble working with a particular provider.
- Conduct outreach events that focus on women Veterans and that address their needs both as women and as Veterans.

There is one final recommendation that does not fit under a specific category and that is the need to seek continuous feedback from Veterans on service system changes.
INTRODUCTION

The Michigan Veterans Community Action Teams (MIVCAT) project is a collaborative community model, created by the Altarum Institute, to enhance the delivery of services from public, private, and nonprofit organizations to Veterans and their family members. This model aims to institute a community-based Veterans Services System of Care by establishing broad-based coalitions of Veterans service organizations; health, employment, education and quality of life community services providers, and other stakeholders. The MIVCAT model has previously been implemented in San Diego, California, and San Antonio, Texas, to demonstrate the value of community-based services coordination for improving the accessibility, scope, and quality of care available for Veterans and their families. Scores of government agencies, nongovernmental organizations, and community-based organizations have collaborated in the project.

The MIVCAT Veterans Services System of Care is a comprehensive network of service providers, empowered with knowledge, information, and tools, effectively ensuring that all Veterans and family members who these providers encounter are accurately and promptly connected to the appropriate service provider(s) and completely served. The MIVCAT project has two main goals:

- To establish a sustainable, integrated, community-based strategy that enhances the delivery of services from public, private, nonprofit, and voluntary organizations to Veterans and their families.
- To implement a replicable model of service delivery that informs the two pilot communities’ baselines for collaboration and identifies steps for achieving comprehensive service integration among participating organizations.

The MIVCAT project was introduced in Michigan by the Michigan Veterans Affairs Agency (MVAA) in August 2013 out of their commitment to provide the state’s Veterans with the services, benefits, care, and support they need and have earned, whether they are transitioning to civilian life or connecting or reconnecting with services for their specific needs. The project entails pilots in two of the Prosperity Regions in Michigan – Detroit Metro Region 10, comprising Macomb, Oakland, and Wayne counties; and West Michigan Region 4, consisting of Allegan, Barry, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Oceana, Osceola, and Ottawa counties. MVAA adopted the Prosperity Regions as part of the Michigan Governor’s initiative to create state-designated planning regions to develop a consensus vision and implementation plan for economic success. This effort is intended to encourage communities to collaborate on a regional basis. Exhibit 1 shows a map of the two regions. The two areas will be referred to as Detroit Metro and West Michigan in this report.

This report describes the findings and recommendations from focus groups that took place in the Detroit Metro region. These focus groups were part of a community assessment that included collecting available data on Veterans, interviews with service providers, and surveys of Veterans. Findings from those data collection activities are covered in other reports and documents. The next section of this report describes the focus group and participant characteristics; the third section includes the findings from the focus groups covering the key themes that were discussed across the groups; and the final section provides recommendations for those interested in improving Veterans services based on the findings from the focus groups.
Exhibit 1: Michigan Prosperity Regions with Pilot Project Areas Highlighted
DESCRIPTION OF FOCUS GROUPS AND PARTICIPANTS

Altarum Institute conducted six focus groups as part of the community assessment for the MIVCAT project in the Detroit Metro Prosperity Region. There were two focus groups of primarily Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) Veterans, two groups of primarily Vietnam-era Veterans, and two groups of women Veterans from multiple eras. The groups of era-specific Veterans included some participants who served earlier than the targeted era for OEF/OIF Veterans or just after the targeted era for the Vietnam Veterans groups. One of the OEF/OIF groups included a female Veteran; the other era-specific groups were all male.

Planning and recruitment for the focus groups was led by Altarum staff with the support of Veteran service providers in the Metro Detroit area and the groups were moderated by an Altarum facilitator with extensive experience conducting focus groups with Veterans and other populations. Participants were provided with $50 in appreciation for their participation in the group. Six focus groups were held in the Metro Detroit area with four being held at a National Guard Armory in Taylor, one at a Veterans of Foreign Wars (VFW) Post in Redford Township, and one at Piquette Square, a 150-unit apartment project for homeless Veterans in Detroit.

The focus groups were conducted using a focus group protocol (Appendix A) similar to one used in previous VCAT projects. The protocol included questions on:

- How Veterans find out about benefits, services, and other resources;
- Ways to improve outreach to Veterans;
- Experiences using a variety of services or pursuing benefits, including both Veterans services and community services not directed specifically to Veterans;
- Recommendations for reaching Veterans in need of social support because of mental health or substance abuse issues; and
- Recommendations for improving how the community addresses Veterans issues.

A total of 42 Veterans participated in the focus groups. Of the Vietnam-era Veterans groups, one of the groups had 12 participants and one had 11. Two of the groups had two participants, including one of the female Veterans groups and one of the OEF/OIF groups; one of the female Veterans groups had six participants; and one of the OEF/OIF groups had nine participants. Participants completed an informed consent form and were asked to complete an anonymous survey that included questions about their background and characteristics. Forty-two completed surveys were returned.

Of the 42 Veterans completing the survey, 19 (45 percent) lived in Detroit; 3 (7 percent) lived in Canton; and 2 each in Farmington Hills, Livonia, Sterling Heights, Warren, and Woodhaven. There was one participant each from Bloomfield Hills, Dearborn, Lapeer, Mason, Oak Park, Oxford, Pontiac, Redford, Royal Oak, and Southgate. The first table below summarizes information about each of the focus groups.

As shown in Exhibit 2, the age of participants in the focus groups ranged from 29 to 76 years. The groups with the youngest participant and the youngest average age were the OEF/OIF groups. Next were the women Veterans focus groups. The Vietnam Era groups had the oldest Veterans and the highest average ages. The start of service for the groups ranged from September of 1961 to September of 2003. The last of
the participants in the Vietnam Era groups completed their service in 2004. Both of the OEF/OIF groups had one participant who was continuing to serve in the National Guard or Reserves.

**Exhibit 2. Focus Group Characteristics: Age of Participants and Service Period**

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<tr>
<th>Group</th>
<th>Average Age</th>
<th>Age Range</th>
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<th>Latest Start of Service</th>
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<td>September 2003</td>
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Additional details on the focus group participants are shown in Exhibit 3. The focus group participants represented a diverse group of Veterans by gender and race and ethnicity. The groups were also diverse in income and employment status. Low-income Veterans were somewhat more represented in the focus groups than in the general population of Metro Detroit Veterans. This partially reflects that the groups achieved the assessment goal of including homeless and previously homeless Veterans among the participants. Women Veterans were also a larger proportion of the focus groups than in the general population of Metro Detroit Veterans. This reflects the design of holding two women’s focus groups to find out more about women Veterans’ needs. Since, in general, women Veterans have lower incomes, this also partially accounts for the income difference between the Veteran population and the focus group participants.

**Exhibit 3. Focus Group Participant Characteristics**

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<td>Characteristic</td>
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<td>21%</td>
</tr>
<tr>
<td>Unemployed, not seeking employment</td>
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<tr>
<td>Disabled, unable to work</td>
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<td>12%</td>
</tr>
<tr>
<td>Retired</td>
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<td>40%</td>
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<tr>
<td><strong>Marital Status (N=42)</strong></td>
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<td>Single, never married</td>
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<tr>
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<td>Divorced</td>
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<tr>
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<tr>
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<td><strong>Educational Attainment (N = 42)</strong></td>
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<tr>
<td>Bachelor’s Degree</td>
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</tr>
<tr>
<td>Graduate Degree</td>
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<td>17%</td>
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<td>Other (21 trade school courses)</td>
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<td><strong>Branch of Service (N = 42)</strong></td>
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<tr>
<td>Army</td>
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<td>69%</td>
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<tr>
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<td>17%</td>
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</tr>
<tr>
<td>Marines</td>
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<td>10%</td>
</tr>
<tr>
<td>National Guard</td>
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<td>10%</td>
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<tr>
<td><strong>Currently Serving in the National Guard or Reserves (N = 42)</strong></td>
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<td><strong>Served in a Combat Theater or Zone (N = 41)</strong></td>
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<td>Characteristic</td>
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<td>Percentage</td>
</tr>
<tr>
<td>----------------------------------------------------</td>
<td>--------</td>
<td>------------</td>
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<tr>
<td><strong>Rank (N = 40)</strong></td>
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<tr>
<td>Enlisted</td>
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<td>95%</td>
</tr>
<tr>
<td>Officer</td>
<td>1</td>
<td>3%</td>
</tr>
<tr>
<td>Enlisted then Officer</td>
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<tr>
<td><strong>Has a service-connected disability or condition (N = 42)</strong></td>
<td>25</td>
<td>60%</td>
</tr>
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</table>

* Of the two respondents who identified as Hispanic/Latino, one person marked their race as White and one marked their race as American Indian
** Percentage adds up to more than 100% because one participant indicated they were both retired and looking for work
***Percentage adds up to more than 100% because some participants served in more than one branch
The findings from the focus groups presented here are organized by the key themes that emerged during the focus group discussion. It is intended to convey what Veterans said about the various issues that were discussed during the group. The first section describes how Veterans learn about services and resources; the next describes Veterans’ experiences using the overall system; and the final section covers a variety of benefits and services that Veterans may need and that were discussed in the focus groups.

The report includes many direct quotations from focus group participants. These quotations were transcribed from tapes of the interviews. The only edits to the quotations were omissions of words that did not change the meaning of the quotations or omissions of specific names or services that could reveal the identity of a particular participant. The words in brackets help clarify the meaning of the quotation by substituting a person’s position or organization for their name or adding information that was discerned from other parts of the focus group or the tone used by the key informant.

A. Learning About Services and Resources

Veterans were asked about their knowledge and experience learning about services and resources for Veterans.

1. Discharge

In the course of discussing how Veterans learn about the Veterans Service System, Veterans discussed the process of discharging from the military and how important it is in learning about available benefits and resources.

Many of the Veterans who recently left the military indicated that information they are given at separation from the military is too general. One Veteran suggested the military should provide more specific one-on-one counseling focused on where the Veteran is moving.

Get me in that office 40 days 60 days prior, let’s look at my résumé, pull up Michigan, tell me where Vet Center is, tell me where McNamara is, tell me what they do in each building—they don’t do that. They get you in there, they take care of you for the most part, but once you go home, you are done. — OEF/OIF Group

Another Veteran reported that the discharge sessions do not focus on what is available if things go wrong.

I retired from Georgia, and I looked back on that program [the retirement briefing]. There were telling you everything you need to do. They gave us a timeline. I look back on that program, and it did not help me. Well, if you have problems and after everything they give you, if it doesn’t work out, if you lose your job, if you lose your home. I don’t remember that type of information being given out. I was kind of lost. — Women Veterans Group

Other women in one of the women Veterans groups indicated the focus when they got out was purely on employment and even that was not handled very well.

First Veteran: The transition class is a week long. They just shove it down your throat. It is about résumé writing, interview skills. [They] don’t tell you about mental health and VA. I don’t know how it is now because I got out in 2006.

Second Veteran: They give you [the] same information that you would get going into [a] Michigan Works office. They [the Veterans who go through these classes] didn’t
know what education or disability benefits are available. They don’t know how to adjust their résumés to get employment. — Women Veterans Group

The key piece of advice the military gives at separation for accessing services is that once the Veterans arrive in the area in which they will be settling, they should check in with VA. But these Veterans indicate that VA does not have a process for orienting Veterans to the full set of benefits available. The Veterans can get signed up for medical care without having a good sense of what benefits and resources are out there to support transition.

They give you separation counseling, but I don’t think they do a full coverage about your benefits. They say check into local VA when you get home and they will be able to assist you with the benefits you have. You come home and they don’t really give you the full extent of benefits that you are eligible for. If you have any mental illnesses or disorders, it is even harder to get indoctrinated into the mental health clinic of the VA hospital because of paperwork that needs to be sent out. The problematic area will be a lot of paperwork you have from active duty and transferring, is transferring paperwork from active duty to [the] civilian world takes time. — OEF/OIF Group

The separation seminar or information that you get when you become a Vet, it is so general, it is so vague. Going to different states it is not specific; then once you get here you really don’t know where to go because they don’t give you a name and address, they just say check into VA, no one takes your hand and says these are the steps you need to do. — OEF/OIF Group

I believe [they] should create infrastructure for people being discharged no matter if they have problem with military benefits, disability, honorable discharge, or even dishonorable discharge; so that we wouldn’t just be out here being discharged and might have a less-than-honorable discharge, and it is really—it is not something that you could document—it is our fault. — Vietnam Era Group

A few Veterans in several groups indicated that Michigan was particularly challenging for transition because of the lack of a military base and other supports.

Being here in Michigan, again there is no landing point for us. I said, “Where do you guys send people [in] Michigan?” “ACAP [Army Career and Alumni Program] Center.” I said, “Which one? I’ve never heard of it.” I talked to a bunch of different organizations. I said, “Where is ACAP center here in Detroit?” They say, “What is a[nn] ACAP center?” There is not one here. Not even a place we can go to at least check in and see what is available. — OEF/OIF Group

One Veteran who had been in the National Guard reported that the information provided after returning from deployment improved from 2008 to 2012.

After my first deployment in early 2008, there was not a lot of information out there. But after [my] second deployment, when I came back in late 2012, there was a big difference, even when it comes to the VA. — OEF/OIF Group

2. Knowledge of Services

Veterans in the focus groups indicated that most Veterans have limited knowledge of the Veterans Service System.

A lot of guys come in and they don't know anything. They don’t realize what they can get. There are so many websites that have information on them, but you have to have a computer—access to the computer—you have to know how to use it. It just spread everywhere. They have you a book of benefits—I don't know, I think it is like 1200 pages
long—by the time you go through all that, you won’t find out about anything unless you are talking to another Veteran—that is what it seems like. — Vietnam Era Group

I think there are a lot of programs available, and I think a lot of people that I’ve met, even at the VA, I don’t know if they are aware of them. I’ve met people who knew some information about the programs, but didn’t explain them properly because I found out the correct information later. I don’t think it is good; whoever is supposed to be putting the information out it isn’t getting it there for the Veterans. — Women Veterans Group

A number of Veterans knew very little until they met another Veteran or a service provider or joined a Veterans Services Organization (VSO).

I didn’t know about anything available until I lucked upon someone at a job fair that was working with unemployed and disabled Veterans. I ended up work studying in that office and found out a lot of information about that. — Women Veterans Group

I found out going through Michigan Works. I used to go in and check the computer for job services. I got to know two Veterans reps. The conversation got up, [and] he said go there and see if you can’t qualify for medical benefits. He said you might not get them. I filled out the paperwork. Two weeks later I was able to go through system. Michigan Works has really helped a lot. — Vietnam Era Group

When I became member of [the American Legion Post], I found out more information, a lot information I didn’t know when I was younger I found out later on what I could do what I couldn’t do. — Vietnam Era Group

Often Veterans do not learn about services until they experience a crisis.

After I became homeless and I had gone through suicide attempts, and I ended up in the VA—it was only place I could go to, the only place I could get any type of service. I ended up in B2 north. There is some great people that came forward and told me about what I needed to do to get stuff. But the word-of-mouth, again, is what did it. — Vietnam Era Group

I think it is not that easy to find out about services. I think for most Veterans the reason they find out [is] if they are sick or they have an enabling disability that causes them to go to the hospital. If they are unemployed, then they know they can get services from [the] VA hospital. — Women Veterans Group

Some Veterans try to stay informed about available benefits and services so they can help other Veterans.

I tried to stay abreast of those things so when I come across another Veteran in that situation [I can say], “Hey, you can go down to Michigan Veterans Trust Fund or Soldiers and Sailors Relief Fund.” — OEF/OIF Group

Two Veterans got into an extended discussion about how most Veterans do not realize how important their DD214 (Military Service Record) is until they go looking for services.

You are right. We don’t, most [Veterans] don’t realize how valuable that DD214 is. You need to keep [it] more than [a] driver’s license or anything else. If you want service through the VA, you have to have that DD214 and the right copy of that DD214. — OEF/OIF Group
3. Outreach

Veterans discussed current outreach efforts and provided recommendations for ways to reach more Veterans with information about resources and services. Veterans felt that there needed to be more outreach about what services are available.

Unless you know a person who is getting something already and he tells you, you will never receive anything through VA, nothing through the mail or postcards or TV ads. — Vietnam Era Group

The main thing is getting the word out. Shouldn’t have to go through the hoops; most of us been in here, we found out [about benefits and resources] through other Veterans. I didn’t hear from the news or the government. I hear from Veterans. Then you have to do legwork yourself. — Vietnam Era Group

They are not advertising nothing, that is for sure. If you don’t get involved in nothing, you ain’t going to learn nothing. Vet to Vet, get involved in that stuff. Going to hospital. I didn’t know about that until word-of-mouth from Veterans. I didn’t even know I qualified for that, and this was five years ago. They don’t advertise it. — Vietnam Era Group

There was not a consensus on the single best way to reach Veterans, but Veterans shared a range of ways to improve outreach. Many Veterans thought that television was an important tool for outreach.

TV I think is best. Most everyone has television. If they can have the news say, “Hey, this is going on,” say “Help our Veterans out.” Give that information daily until it becomes [well known]. — Women Veterans Group

I would like to see a television station step up and give an hour show once or twice a week dedicated to Veterans news, Veterans information, invite Veterans to be on the show. Don’t put a talking head on there. Talk about what we talked about here. They do it in states like Minnesota. They have a Veterans show dedicated to strictly getting the information out. — Vietnam Era Group

I see a lot of these commercials about the Army, the Navy, and, you know, the recruiting commercials; I guess that’s a given because that will be there, but information and where to look for the information should be as available as the recruiting commercials are. — Women Veterans Group

Some women Veterans did indicate that they had been seeing some select information about Veterans on television and that there needed to more of this.

As far as housing and jobs, I think that Veterans find that out mostly through other Veterans they know or maybe on TV. Now on TV, they are showing a lot about job fairs, and this should have been done years ago. I think there should be more information put out. — Women Veterans Group

The commercials now for PTSD [post-traumatic stress disorder] is great. I’ve noticed more people calling and family members calling. — Women Veterans Group

The Internet is also seen as a preferred means for getting information to Veterans and allowing them to access services.

Well, with the technology, everything is on [the] Internet. Should be a one-stop shop, [but] even there you have to go to four or five different websites. There is not one website that you can go to that [has] everything, and that is probably what needs to happen. — OEF/OIF Group

Yes, the computer has been awesome about finding out what is going on. You have to find the right websites. The information is out there. I have seen them posted in
different places for all the websites for Veterans to go to, to get hired. You got to go get it. — Women Veterans Group

I think the best way to get the information out would be the Internet. Ninety percent of the people, even if they don’t have a computer will go to library to use computer. VA has a learning center with six to nine computer[s]. Different organizations, like Michigan Works, you go in, you can go on their computers and look for jobs. Internet and TV. — Women Veterans Group

One Veteran explicitly mentioned social media as a way for Veterans to share information with each other.

Social media is exploding; so I’ve noticed a lot of Veterans. Actually, it is a good way to disseminate information. If you know Veterans who are suffering, you can hit [a] share button; it gives Veterans more of a one-on-one. A guy suffering from PTSD—I know a guy who is bipolar—I can send this over to his page and he can check it out, or I can send it to him in a message. — OEF/OIF Group

Other Veterans were more skeptical of the Internet as an outreach tool. One noted that false information that is on the Internet might discourage Veterans from using that as a source.

With the new media that is available now—the Internet, there is a lot of false information out there—that a lot of people, once they get tricked about false information, they don’t even want to bother anymore because of the fear of or apprehension of being caught up again. — Women Veterans Group

Others thought new media was of limited use for the sizeable group of Veterans who do not use the Internet for much or who lack easy access to computers.

There are a lot of Veterans without Internet access. That is where, what he said, we need a place where you can walk in, if you are homeless, if you don’t have Internet, where you can probably get some kind of person-to-person help. The Internet is good for a lot of people, but I see a lot of Veterans—drug-addicted, alcoholics, homeless, live in shelters—and they come down to VA. The VA John Dingell [VA Medical Center] does have a computer room, but [they] only have four computers, and the wait time to get to a computer is 45 minutes. — OEF/OIF Group

You have different generations. I would say for [the] younger generation it is going to be Internet. if you get me into email and get into your system, Wounded Warrior does a great job and they are not even local. I get stuff from them constantly to remind [me] what is going on, where to go. I think that is something we need to have in place: A system that [is] constantly in contact. For the younger generation, I think that is going to be email, some kind of application [they] can just plug into. For the older Vets, Vietnam era, things like that, I think there has got to be a different support system for them because [they] are older. My father-in-law doesn’t have Internet; I give him information and he goes with it. — OEF/OIF Group

Many Veterans suggested that because of generational and individual differences you need to use multiple means to reach Veterans.

I would launch a website that is specifically geared towards Michigan Veterans. What resources are available with addresses, point of contacts, who you are supposed to connect with, a list of VSOs. I would do a massive campaign because you are right, not everyone has Internet. Everybody walks past the TV, everybody listens to radio. Massive campaign saying, “Dear Michigan Veterans, you really want to say you are sorry and we are [going] to change our ways.” Go out and publically announce, “I know things have been done this way; this is the new face of it. Here are your points of contacts. When
you go [you will] get the service you are looking, you go get the support.” Incorporate places like the VFW [Veterans of Foreign Wars]. You can incorporate places like [the] Wounded Warrior project. — OEF/OIF Group

I think mobile services would be good—more billboards, and pamphlets; you have to spend money sending out pamphlets. I am more of a visual person, and that I have to see it in the community. You have addresses, telemarketing people calling you up and sending you things. Veteran’s organizations can do the same, or put the number on TV and advertise. — Women Veterans Group

Other Veterans suggested a need for direct outreach where Veterans can go and talk to someone about their needs and available resources and services.

When you ETS [expiration of time of service], there should be a place—an entry center that talks about these things—and we don’t have that in place. We find out these things by happenstance. I went down to a job fair and I happen to sign up at a table that said Vet-to-Vet Counseling, Vet-to-Vet communication services, that is how I found it. If you go to [the] VA hospital or McNamara building, there is nothing out there, very little out there telling you what your benefits are. I think they need to realize that they need to keep it out there. — OEF/OIF Group

It would probably be a good thing to work with agencies, organizations that are already in the community, like churches, synagogues, and religious organizations. I think the leaders of those organizations would be interested in putting out the word, putting advertisements out, making them available for their members. — Vietnam Era Group

A few Veterans mentioned Stand Down events as an effective way to reach Veterans.

Veterans Stand Down is what has gotten me into this position right now. When I was [down], they helped me. I happened to come across someone putting a flyer in my hand that said Veterans Stand Down. Once I got to Veterans Sand Down, I was given an immense amount of love, I was given an immense amount of information [on] how to apply for benefits. These fairs need to be at least bi-quarterly. — OEF/OIF Group

I would like to see the Stand Down bigger, more inclusive of all Veterans, not just homeless Veteran—more community outreach. I would like for the VA to host community outreach programs where they can address a multitude of issues. — OEF/OIF Group

Another Veteran suggested something similar without referring to Stand Down, and she contrasted what it would be like with job fairs she had been to.

More conference centers set up for Veterans, not just job fairs, but it should be [a] conference where, if you need any type of information. And it should be on a regular basis, not once a year—not when they want a tax write-off. I'm beginning to think that is what a job fair is. — Women Veterans Group

One Veteran described an event that did include a great many service providers.

The one that I went to was in 2013, July. It was called VA for Vets, at Cobo Hall. All the services for everything you wanted for Veterans. The other part was a job fair. But for what the VA had, all their services was in the front, they had anything that anyone was looking for: Benefits, they had homeless, all the different outreach programs they had. They had a clinic down there to help the Veterans. That was something that was really great. It took them a lot to put it together. There was a lot of Veterans went through there not just from Michigan, they were from all over the country. It was so good. — Vietnam Era Group
Another Veteran agreed that this event was well organized and provided him an opportunity to learn more about how his service had affected him.

*Same for me. I went for the job fair; I had no idea that all these services were available. You could get on a computer and get your DD214, whatever it was you needed from the system, they had all that available. More importantly for me, I met a guy from the Vietnam Veterans of America. I stopped by to talk to him, share some information with him, he said sit down and have a seat. He started asking me questions. Long story short, you said something [name of other Veteran in group] that resonated with me: you don’t know what your issues are when you come back. I had no idea; here I am years later, three marriages, all kinds of stuff, attachment disorders, all of this stuff going on, I had no clue. It all went back to my experience in Vietnam. — Vietnam Era Group*

The women Veterans group indicated that the VA Medical Center does engage in various outreach events to educate Veterans about benefits and services.

*They have good classes, in the auditorium, that have people come down there to help you with your disability, and all kinds, but you have to get up and come, they won’t come to you. It is help, but some people just don’t want to come, and that is where I got all my help, right there at the VA. — Women Veterans Group*

One group spoke admiringly of the effort of Vietnam Veterans to reach others in their generation.

*They came together. They went out to different places, passing out this at restaurants, passing out this and that. They got out and did the footwork. Today we are too focused on that new technology. We need to reach out to people, go to their homes, and go to where they go. — Women Veterans Group*

A few Veterans suggested there is a need for a single location where a Veteran can go and find out about all services and resources they may need.

*There should be a building—if looking for employment, boom!, if looking for services, boom!, if you are looking to get reconnected, looking for therapy or focus groups [so] you can vent like this. — OEF/OIF Group*

First Veteran: How come Michigan doesn’t have something set up like [they have] at Fort Hood building 21. They take any Veterans; you go in there and, say I’m having trouble paying my rent this month, they send you down the hall. It is a point of contact. Michigan is 11th largest state for Veterans; Detroit one of top 10 cities in America. It should be somewhere and it’s not at the VA hospital, not at the McNamara building. I don’t understand how come nothing is set up like that for Veterans here.

Second Veteran: If you had that here in Michigan, I guarantee Veterans would come out of the woodwork. It is like: Cool, this center is specific to us, we know how to navigate it, we know where to go, we know who we are talking to, they are speaking our language, I don’t have to translate anything. — OEF/OIF Group

Like they have Michigan Works, they should have buildings like that in the communities. A Veterans building that you can walk in and get services, and they will help it, rather than a hospital or regional office. — Women Veterans Group

A number of Veterans mentioned using the contact information gathered for driver licenses or the process of getting one to conduct outreach to Veterans.

*The State of Michigan could easily, with licenses, run a database, put something in the mail like, “Have you seen a service officer lately?” — Vietnam Era Group*
When go get your driver’s license or anything to do with the state, they should have a thing where they can tell a Veteran right there, “If you are a Vet, we have these service at the county”; that would be a start right there. — Vietnam Era Group

He made a great point. There are spots where everybody has to go—Secretary of State—when you sign up for your license, they ask if you are a Veteran. The minute you say yes, “Here are all the resources. What county do you live in? Contact Wayne county at this number and they will make you aware of all the Veterans benefits.” — Vietnam Era Group

Some Veterans mentioned specific groups that should be targeted for messages about available resources and services. One of the women Veterans groups suggested that it was important to have targeted outreach directed at women Veterans.

Advertising. There is not a lot of advertising for female Veterans. Information needs to be put out there more about female Veterans because we need to be taken care of too. That is probably why we are not being taken care of. We don’t like to ask for help because we will try to help ourselves before we get to the point, before we have to ask anybody. By the time we ask for help, it is usually too late. — Women Veterans Group

One Veteran who received benefits from Agent Orange exposure indicated that not enough has been done to ensure these Veterans know the health consequences of exposure and the benefits that are available to them.

I just ran into a Vet Sunday that was unaware of resources and what is available to him from his Vietnam exposure. I think the biggest problem is the letter I got [encouraging reevaluation] was very ambiguous: “We want to reevaluate you.” They need to send out a note that says you may have been exposed to this and here are some symptoms. It came over the news waves and the news is where you found out. Why not send out a note? — Vietnam Era Group

One Veteran, who owned a construction company and has hired many recent Veterans, said there needs to be outreach to those Veterans who for one reason or another are avoiding the service system.

I own a construction company. I got a lot of that came back the last few years to work through me. I’ve been trying to get these guys in to the VA, to the VA to get their benefits. One guy deployed three times in a four-year period; he hasn’t registered with the VA. Yeah, I tell him, it is your fault you don’t go and do something about it, but at the same I time I feel like there should be guidance where he isn’t isolated. Somehow we should be able to reach those people. He is not proactive by any means where he is willing to do things on his own. He hasn’t had any support, he doesn’t have any benefits, and he is struggling. — OEF/OIF Group

One of the Vietnam-era Veterans mentioned that he never needed VA services and was grateful because the stories he heard both in the focus group and before coming made him think he would never want to use the system. This suggests that these barriers may need to be addressed directly in outreach materials and messages.

Then when I started hearing this horror story, horror story after horror story, he has been on me [points to Veteran next to him], “Sign up for the VA, at least get in the system.” For what? To go through that? I’ve never had to use the VA, and, my God, I don’t want to be caught up in the system like that. I guarantee you there are thousands of Veterans like me who haven’t used the VA center. They would be in trouble if we signed up and wanted services as well. The stories, I mean it is horrible. I can’t imagine being caught up in a system. — Vietnam Era Group
Veterans in several groups mentioned a lot of negative news about Veterans that feeds stereotypes, and it is important to counter that with positive messages.

I think if the media and the advertising agencies put as much positive energy on media for Veterans as they put on the negative, that would be helpful. — Vietnam Era Group

One Veteran who had developed some familiarity with the overall system as a result of his work as a peer-to-peer advocate described a need for all the various levels of government to work together.

The VA and the Department of Defense are the heads—they are at the top. They can’t administer to me here in Detroit. They have got to provide the resources, send them to [the] state level, MVAA. Then they have got to go out and partner with county level [organizations] and get this to the man in the street. So that when a Veteran goes somewhere, even if you can’t help him, you know who to refer them to. But it is a communication breakdown between the VA, the state level, down to the county, and then to the city. If you go to [the] city of Detroit, they have simply no Veterans services; they would not know what to tell you, but Wayne County has the one-stop shop, and nothing is tied together. — Vietnam Era Group

Another Veteran mentioned that there are barriers to distributing information to Veterans that need to be addressed so that Veterans know what is out there and are able to access needed resources and services.

Even if you take information to VA, very seldom they will share it. I’ve taken flyers [thinking] if you put [information] on the desk, maybe other Veterans could pick it up. They don’t want any information in there. That is a problem. They won’t let you share information with [the] population they are supposed to serve. You are finding out about opportunities either by happenstance, or it is too late, or all [the] money is gone or some other crazy reason that could be avoided. We want to be more proactive with ourselves and Veterans. We see where the system has failed quite a few people. If we don’t deal with the core of what the problem is, making sure services [are] connected and people get information and people are actually helping us do what we need to do, it is going to be a revolving circle. — OEF/OIF Group

B. Using the Veterans Service System

This section focuses on Veterans’ overall experience using the Veterans Services System. It includes general comments on the challenges of navigating the system as well as some of the sources of support or potential sources of support that were discussed during the groups.

1. Navigating the System

Veterans reported that the Veterans Services System is challenging to navigate.

If you don’t know who to go to, if you don’t know the proper name of what you are asking for, it seems like they are more confused than we are as to where to direct us, and often times once we get there. And if we have the correct name of the benefits, they don’t tell us about other benefits we could be eligible for. That is why I struggle. — OEF/OIF Group

I know that we have to do some footwork, but make it more user friendly for those Veterans for those who may have went straight from high school to military and may not have skills to read through [a] 20-page addendum about what needs to be done. Also, if there is a problem with whatever benefits they are applying for, the turnaround time—that is one of my major concerns. Can be very frustrating when you reach, where you haven’t gone to VA to find out about benefits, now [you are] in [a] position
If there is a soldier [who] is eligible for application (you know the form), let us get that in the system, as opposed to giving us a book to figure out what we need. You have to get your computer to download it, then the instructions on that. Why don’t you give us the application along with the information; show us how to fill out the application; and then we can move forward. — OEF/OIF Group

Some Veterans suggested that there needs to be a local liaison or navigator who sits down with recently discharged Veterans and goes over their experience, the kind of support they need, and the benefits that are available.

First Veteran: I think that there should be a liaison once [you’re] separated from military service to come home to local liaison.

Second Veteran: I totally agree. Talk to the soldier and say, “What do you need? What was your skill set?” So you can transfer soldiers from [the] military to [the] civilian workforce. Then, “What are some of the medical conditions you may have.” Some people may not need all the sources and benefits that are there, but if you get those soldiers to identify things they may need, and they go into civilian life, it won’t be such a struggle for them or their family. — OEF/OIF Group

There needs to be a POC [point of contact] office that can refer you to all the other places that you would need to go. You should have to go through that office when you get out. There should be at least one in every city. The office that you are leaving—the post—should be in communication with wherever it is you are going home to, so they know that you are coming, when you get out, so you can find out what you need and how you need to contract so when people get out they are not walking blindly back into civilian life. — OEF/OIF Group

When using the service system, many focus group participants indicated that Veterans need someone who helps guide them through available resources and services or at least gets them started in accessing available services and resources.

People are not fine. They need a lot more assistance getting back to a regular life. The help is not there. You have to run around and ask other people who have done it. If you don’t have anyone like that available, you are in the dark. — Women Veterans Group

One Veteran said this is something VA really should do.

When we all went down to sign up to join the service, they sat us down and gave a lecture. The same thing, why can’t they do it here? — Vietnam Era Group

A few Veterans thought this function had to exist outside of VA because VA is already overburdened or ill-equipped to address the challenge.

A counselor who can assist them, or just strictly an arena or site where people can go and get all this information, that is separate from the VA administration. Because the VA is dealing with so many Veterans that it makes going through them hard. — OEF/OIF Group

When you come to VA, McNamara building, on a good Monday, there is about an hour-and-a-half to two-hour wait to handle Veteran services. — OEF/OIF Group

The thing is, you get tired. You go to the VA hospital downtown; you walk around … lost until you ask somebody. Half of the time it is another Vet. Even getting tickets for
parking, the guy had an attitude. Sign in the parking lot said you have to get your ticket stamped. Why have attitudes? — Vietnam Era Group

Another Veteran suggested that VA may not be the best source for reaching Veterans because a lot of Veterans are reluctant to deal with VA.

People don’t want to contact the VA. That is the other problem. There are a lot of Veterans that they don’t want to talk to the VA, don’t want to go in there. There is nothing wrong with them, they are going through all kinds of problems, but they don’t think the VA can help them, they don’t think it is VA connected. That is something that takes a lot of contact to understand that you are being affected by what happened to you in service. — Vietnam Era Group

VA can be a challenging place to navigate, especially for people who are in crisis. One Veteran who helped another in crisis indicated that it was difficult to get the information they needed.

It is so difficult and it is not easy to penetrate that little group of people that want to help you. I sat through with one guy, friend of mine. If you have a waiting room full of folks here, the people need to get down here. Or you send him to emergency because that is where he needs to be. — OEF/OIF Group

Veterans indicated that it was challenging to know where to go within the VA hospital.

I walk in the VA hospital and what do you do? No one is there to recommend where to go. — Vietnam Era Group

Another Veteran suggested the process was so frustrating that many Veterans give up.

Going to the VA is like going through a gauntlet. You are just waiting for them to prepare some insurmountable task that is just designed to say, you’ve hit a point where [you] say, “Screw it. It is not worth it.” — OEF/OIF Group

The VA has a problem with sending you anywhere for further resources. They do not communicate. They will not send you anywhere and if I can’t get on that floor [access particular services], it doesn’t exist. They don’t connect together except in meetings. We are stopped at [the] door at the VA 9 times out of 10. It is very rare for somebody to tell you about the other pieces. — OEF/OIF Group

Veterans who are healthy, not experiencing mental health issues, and have knowledge and skills that enable them to advocate for themselves effectively can get what they need at VA, especially if they encounter the right person to help them.

When I lost my job about two months ago, I went down to the VA center and sat all day. But I was able to then get my medical card so I could see a female doctor [she is a female Veteran]. I haven’t had any major issues with not getting some of things I applied for. I think, like you, I sat in front of the right person, who took the time to make sure I got the right information, they told me what I needed, I brought back what they wanted, other than [the] time it took to see someone [I didn’t face any challenges]. — OEF/OIF Group

However, the process of seeking services from VA is not always easy and user-friendly. Unless you know what to ask for, you are unlikely to be given information that will enable you to access services you need. Two Veterans compared the process to asking for a hamburger and not being given the bun unless you explicitly request it.

First Veteran: When you go in there [to the VA], if you ask for a hamburger, you are not going to get fries, you are not going to get ketchup, you are not going to get mustard,
you are not going to get pickles, until you say I need, and specifically, I want pickles, I want bacon...

Second Veteran: I want the bun. — OEF/OIF Group

A Veteran who had worked at a Veteran medical center in another state contrasted the experience with what she found in Detroit.

[I] worked at the VA for a while in Georgia. I remember we got a lot of training about helping the customers in the building. They said no one should walk through the VA looking confused. They said walk up to the individuals and say, “Can I help you?” I got that a lot down in Georgia. Here, I was looking for something, and I never got answers. I went to probably eight different doors. Go to this person. Go to that person. I left the building that day and I never got the answers. — Women Veterans Group

One Veteran suggested the VA hospital needs a better system for handing off a Veteran who needs help.

It takes one second to make a phone call. Say, “Hey, I’m sending [this Veteran] up there. He needs help. I want you to talk to him.” [Instead they] send you to an area, when you get there it is like you left the first area, have to explain everything again. I’ve told one story four times in one day. I need to see this, I’m trying to find… It is just a runaround...

— OEF/OIF Group

Another Veteran reported being frustrated with the lack of direct answers and indicated that it is easier to be told something is unavailable or cannot be done rather than having to chase down a resource or service that may be not be available or that you may not be eligible for.

I would rather take a quick no than a long maybe. Don’t have me sitting in limbo and me wondering. If you communicate and let people know, “Well, you know we tried this they are not going to do it.” OK, I’m [angry] but now I don’t have to sit around and wonder and twiddle my thumbs what is going on for four months. After four months, you tell me, “Well, they are not going to do it.” Give me a quick no so I can move on to something else. — OEF/OIF Group

There were fewer comments about the resources and services available through community-based organizations. Some individual organizations were discussed in positive terms, but overall there was a great deal of skepticism of the service system as a whole.

One of the issues we have too is we have a lot of companies, non-profits, organizations that have found a way to market to the government—market to people providing grants. [They think] we see an opportunity or we see something where, “Hey, we are here to help Veterans.” You find it is a setup; somehow they have funding, somehow they set something up. They [bring] Veterans in to make it sound like we are doing something and they are going to get credit for doing whatever they are doing. When you get there you realize you are not doing anything, you got me here, you give me a few freebies, [once we] really start talking about “OK, what do I need to do? What is my next step?” [The response is] a lot of fluff. It is frustrating part of the job fairs and things like that. — OEF/OIF Group

In one group the Veterans discussed how hard it was to find out about services outside of VA.

You have a lot of different organizations doing the same thing, but no one is talking to each other. Macomb is the only one [county] I know of that has quarterly meetings [of providers] for Veteran needs. — Women Veterans Group
A few Veterans suggested that VA needs to point Veterans to community resources so these resources get used and Veterans can get help.

“There are more outside organizations coming to help [than in the past]. They [community-based organizations that help Veterans] have issues with getting their name out and getting people to know, “We are here to help.” The VA, can help to a certain point, [but then should say] “We can’t do this right now but we know other organizations that can point you in the right direction. Go to any of these local resources that work with Veterans. They will be able to direct you more efficiently than we can.”
— OEF/OIF Group

So many nuggets out here, that if we can pull them together reasonably, our Veterans would not be suffering as much as they are. — OEF/OIF Group

One Veteran acknowledged the many difficulties in accessing services and resources but also stressed that situations change, and it can be extremely helpful to be able to access Veterans services in the event of a health crisis.

“The system needs to be fixed, but the thing is every Veteran I know that are not in the system, go down see if you can qualify. You don’t know you can’t qualify unless you try. In my case, it was very beneficial. I had two heart attacks; that is why I had to retire at 60. If it wasn’t for Veterans [benefits], I would be hurting right now.”
— Vietnam Era Group

2. Sources of Support: Peer-to-Peer Support

Veterans frequently mentioned peer support from other Veterans as a resource for sharing information, helping them navigate the system, and for dealing with a variety of issues. Sometimes peer-support was mentioned in relation to agency staff who have been hired as peer-to-peer specialists, sometimes in relation to volunteers, but most often it was in relation to more informal relationships with other Veterans.

“I mostly found the majority of the information that I received was from other Veterans. There was no VA liaison or representative to come out and explain to me what benefits I was eligible for.”
— OEF/OIF Group

“Ninety percent of everything I’ve learned, all benefits that I’ve learned that I’m entitled to, came from word of mouth—Veterans. They showed me you have to go do this. “No, don’t take it there; take it here.” The organizations, they will scratch the surface, but to actually get [information] on how to actually get the benefits [you have to talk to other Veterans].”
— OEF/OIF Group

“When I first went in, they told me I couldn’t get anything. These were people that work for the VA. But later, down the road, I ran into Vets—men that have been there—and they show you the ropes and how to. Some won’t tell you, some will. Most of the ones that will are those who have been in the military and done war time—they will help you a lot.”
— Women Veterans Group

“Anything I’ve ever found out here in Michigan has been from another Veteran. Typically it starts from a horror story, like that. “I’ve been injured for two years waiting on this. I can’t go to school. I can’t go to work. I can’t do any of this.”
— OEF/OIF Group

Some Veterans talked about how they played an informal peer-support role by gathering information and sharing it.

“At the VA, in the library, there is a little booklet, and it has benefits. It’s a benefits booklet, and I’m like, they don’t have enough of them. I’ll grab six or seven of them to take home and pass them out sometimes. I go to these physical therapy programs. One
of the girls that rides with me mentioned that her brother just got out of the military.
So I gave her one. I’m like, Wow; he doesn’t know. — Women Veterans Group

One Veteran indicated she had just signed up to provide information at the VA Medical Center in Detroit.

The VA, they do fairly, a little bit of letting you know. Today I signed up to volunteer to be a person that help Veterans who come in and to let them know what services they offer to try to help out in Detroit. — Women Veterans Group

A few Veterans suggested that there is a need for VA and other service providers to hire more Veterans as service providers who can offer peer-to-peer support and help other Veterans navigate the system.

We are looking for jobs. Give us an opportunity to come out here and help the VA to create a better system for the people we served with and the people that are coming home. Give us an opportunity to work closer with VA and these other communities to make a better presentation and a better opportunity for our Veterans, because we understand. It stands to reason if more Veterans had an opportunity to work more with Veterans, I think more would get done for Veterans. — OEF/OIF Group

Get Veterans that maybe just came back, get Veterans that know what is going on to help the Veterans. You got people out there... you have people out there that can't identify what you are going through, you're thinking process, what you feel, none of that. — Vietnam Era Group

Another Veteran was a trained peer-to-peer specialist but was having trouble finding a place where he could help Veterans.

I'm finding it very frustrating right now being a peer-support specialist. I was certified by the state. I offered my services to the VA, working without compensation, because I really didn't need them money, and they are telling me they don't have a place for me. They are telling me they don't have a job for me; they are the ones that sent me out to get training. I had to look outside of VA for somewhere I can go to help Veterans, even though I'm a Vet-to-Vet facilitator. — Vietnam Era Group

He indicated that there are many Veterans playing the role of peer-support specialist, but VA is not expanding the available positions fast enough.

Peer-support specialists that they have at the VA are a great help in [the] program they are in because they are Veterans who have been through what everybody else has been through. They have experiences to work with, and they have training, but the VA isn’t implementing that fast enough. They can take and put more people to work because they have a lot of people that want to be [a] peer-support specialist, but they don’t have the positions for that. — Vietnam Era Group

3. Sources of Support: Veterans Service Organizations

Veterans Service Organizations (VSOs), such as Veterans of Foreign Wars (VFW) and Disabled American Veterans (DAV), and the Veteran Service Officers who work for them were generally viewed positively by the focus groups participants in the Detroit Metro area. VSOs are a helpful source of general information.

When I do stuff here in Michigan—run into other Vets—I’d rather them go to [a] VSO and go to a VFW. If you want to get something done through VA, go to the VFW. — OEF/OIF Group

I think you learn from services members like at the American Legion. They guide you. — Vietnam Era Group
One Veteran discussed how his VSO service officer had made a connection to someone at VA who oriented him to the available services.

One member of the DAV talked about how the DAV conducts outreach events.

Most Veterans who worked with Veterans service officers had positive things to say about the experience and understood the importance of having representation when trying to obtain benefits.

One Veteran who had helped other Veterans seek out benefits and fill out applications acknowledged that the process was challenging and recognized benefits to having a good service officer.
Some Veterans felt that the Veterans service officers were not that well publicized and that they were not easy to access.

[The role of Veterans service officers is] not publicized that well. You don’t know there is one there [at the VA hospital], and they have certain hours. If [you] don’t get [there] at certain hours, you will be chasing them around from place to place not getting anything done. Then they are not that great at returning phone calls. — OEF/OIF Group

A few other Veterans mentioned that even though VSOs are a resource, Veterans do not always know that, even those who belong to the organizations.

You pretty much get the idea when you are young that these are groups, like fraternities. You come out [of] the Marine Corps league, you don’t know that they are actual service organization[s] that help you get benefits and the information that you need. — OEF/OIF Group

I have a service officer, but no one explains what the job of the service officer is. I was member of VFW since [I] got out. — Vietnam Era Group

if a member knows to ask service officer. No one [at the post he attends] ever said if you have a problem with the VA, go to [a] service officer. — Vietnam Era Group

One group got into a discussion about how VSOs are helpful, but that they are having a hard time attracting younger Veterans.

I see it from both sides. I came in [to a VSO] as a young troop. I am now the older troop. I need you. I want you because what I’ve learned along the way came from guys like me today. The only way they were able to keep another leg up is that I came along. I won’t be able to keep leg up if you guys don’t come along. But that age gap has to find a bridge. Where that bridge is at … [is a question without an answer]. Word-of-mouth doesn’t do it because your interests and my interests aren’t the same. Therefore we don’t communicate on that same plane. I’m not electronically motivated. You guys are. So again, another gap. My interests and your interests are not supported by the same tools. We don’t have a way to bridge those automatic bridges that get created over the time lapse. Nobody is helping. — OEF/OIF Group

4. Sources of Support: County Veterans Agencies

Compared with West Michigan, Veterans in the Detroit Metro area mentioned county Veteran agencies less often. There was one Veteran who reported very positive experiences.

Everything orange I got [benefits from being exposed to Agent Orange], when I went down, went to Oakland County services. Called [VA’s] 800 number, [and they] said you should go talk to representative there. I did and they helped me make sure I had all the paperwork filled out. — Vietnam Era Group

There were a few Veterans who discussed accessing the Veterans Trust Fund and noted that it had been challenging in the past but that efforts were underway to make it more accessible for Veterans in need.

I went down there yesterday [to the county office] because it was a rough winter—past [due] bills. When I get to [the] front window, they are ready to turn you away. Had I not known him [county staff person] and his assistant and his back office and called when standing in the lobby, [the] lady would have turned us away. They came out [of] the back office and said, “Oh no, come on in. Give us your paperwork; we can get you squared away. — OEF/OIF Group
There were a few comments that counties need to publicize the available services more.

- Oakland County is huge, but it is just in a little building for the county or just starting disability. One building is not enough. Knowledge needs to be put out there. You don’t know, you don’t know. — Vietnam Era Group

- Like she said it [information about the Veterans Trust Fund] is in the far back corner in the far back and it doesn’t have a big sign. They don’t promote, they don’t advertise. If [Veterans are] not aware of what they are there for [they] won’t utilize them. — OEF/OIF Group

C. Needs, Benefits, and Resources

This section covers Veterans benefits and resources and the experiences that Veterans report as they try to access them.

1. Education Benefits

Obtaining education benefits is generally seen as fairly easy, in part because colleges have a financial interest in helping Veterans.

- When it comes to education, I’ve never had a problem with navigation, with accessing the GI bill. [The] initial time I used the GI bill was the most difficult. After that, once I went, they explained to me how to put in an application. They also had Veteran administrative workers at the school to help you get in, do most of the paperwork needed for you to apply for school. That is where I found it was easier to navigate [than other types of benefits] because there was someone there helping you. — OEF/OIF Group

- I had no problems with the financial aid counselor telling me what to do. They are going to find money. Because they had professionals there that dealt with financial aid they then told us what we needed to do. They had a Veteran in the office that said that this is the form you need, you need 4 credit hours, these are the majors to consider. They walked you through it; they wouldn’t let you fail. — OEF/OIF Group

- When I first applied for education benefits, it was under the GI bill. They transitioned [to the] new education benefit, post 9/11. I transferred from GI bill to post 9/11. I did everything online on VONAPP [Veterans On-Line Application]. It was easy to fill out, help you along the way. The turnaround was really fast. — Women Veterans Group

There are Veterans, however, who for whatever reason may be reluctant to go directly to a college to find out about their education benefits and only initiate using them if a service provider or another Veteran helps them understand what is available.

- I didn’t know how to go about getting it [education benefits] started. Everything spurred from the one job event that I went to and running into that one person who helped me. — Women Veterans Group

Veterans vary in their experiences when it comes to colleges taking the lead in helping them obtain college credit for the education and training they received in the military.

- All of them took [military] experience as credits. Ones in California took all of them. Others picked and chose. — Women Veterans Group

- I ran into a gentlemen who told me how to change my credits into college credits. I don’t think anyone at school told me about it. I think I met a Veteran who was going to
the school at the time who told me, check out this website, you can get college credits.
He got me switched over. — OEF/OIF Group

Veteran: Only thing I got credit for was at OCC [Oakland Community College]. I didn’t have to take any physical classes, like PT-type classes. They considered it your military time. That is the only type of classes you get credit for.

Moderator: They looked at your joint service transcript?

Veteran: Only asked for DD214. — Women Veterans Group

Some colleges do review military transcripts for credits automatically.

With me, the school actually did the transfer. They pulled that information, whether they transferred it correctly or not, I don’t know. — OEF/OIF Group

2. Employment Support

Finding and maintaining employment was a challenge faced by quite a few Veterans in the group. One Veteran of multiple deployments who was still in the National Guard said with the military shrinking it is an increasing concern for him and others in his position.

I don’t have a civilian job; I’m actually [on active status]. Every six months I get renewals. I’ve been doing that, trying to find a civilian job. That is something huge in Michigan. I have a lot of friends that had been on five, six, seven deployments, now there isn’t anything left. Everyone is struggling because they don’t know what to do.

— OEF/OIF Group

This same Veteran and Guardsman indicated that the Guard was providing support but it was not as useful as it could be.

There is an organization that they recommend you use, but it is more like referrals. I think part of the problem is there is this whole gambit of stuff and you don’t know how to use it. Deployments, going from active duty to National Guard, and they give you all this stuff. You don’t have a starting point; [they] just give you binders of stuff.

— OEF/OIF Group

Other participants noted that Veterans often don’t know about all the available employment benefits.

Not a lot of Veterans know that if you only serve two years that you are entitled to continue your job—your employer is supposed to take you back. [Nor do they know] the benefits of, say, if you want to be an entrepreneur. — OEF/OIF Group

Most Veterans know about government hiring preferences for Veterans, but they do not necessarily know how to navigate the hiring system for U.S. government jobs.

Applying for a government job in and of itself is an ordeal. You need someone who can tell you. You have to have a special résumé to even get seen. To me, I thought I was crazy because when I came out, I’m 20 years old, I spent four years in the military, I come out, and I take a résumé to VA hospital, I say I want a job with the government, he said, “This is not the kind of résumé I want to use.” There is so much behind a government résumé. You think, “Hey, I served my country, I will give my résumé, and I will have a nice job with the VA hospital or... whatever.” You find in order for you to apply for these jobs you have to have the skills, your skills from the military also have to be put into a certain way, and if you don’t have anyone to tell you, it is not going to happen. You will keep trying over and over again and [still be] unsuccessful. It took me three years—my résumé I had put on usajobs.com—[I heard that] I was not going to get it [a government job] because it was not correct—it wasn’t done correctly. — OEF/OIF Group
Right now I've been out the army for quite a while and I still can't find a job hiring more than $12. They said they are hiring Veterans first. I've been to Veteran job fairs. On my résumé I’m proud to say I'm a Veteran. I've applied to VA hospital six or seven times. It is like, I don’t see them helping Veterans find employment, or receive decent-paying jobs.

— OEF/OIF Group

One of the Veterans in the group took the advice about how to write a résumé for government positions and used it for her résumé in general until she realized it was not helpful.

I went by the VA protocol on how to [do a] résumé. It took me like a week. It was tedious. That is what I did. I got that résumé, I thought it was good. I sent out I don’t know how many résumés. It is because I put disability on there. I took disability off; I took US citizen off. Civilians don't take that as [helpful or positive information]

— Women Veterans Group

Veterans often do not know how to translate their military experience into language that will appeal to a civilian employer.

The problem is I hadn’t been taught the website [that translates military positions into language civilian employers understand]. You can go there and it tells you your skills, basic résumé. It will make skills look basic, but if you get keywords you need from this website that I found three or four or five years later [after he had been unsuccessfully looking for employment] to put together, I was [a] logistics manager; that means I handled gear that was in the material manage skills, these skills weren't transferred to me when I get ready to leave. When they said what do you do? Ok, supplies, logistics, I didn't know that I was in charge of the entire financial planning for my unit. This can be put in a résumé. — OEF/OIF Group

I think there should be a résumé builder that takes you[r] MOS [Military Occupational Specialty] and builds the résumé for you and allows you to add whatever work experience you need to. Sometimes you don’t know all the jobs you did.

— OEF/OIF Group

They [most Veterans] don’t know how to adjust their résumés to get employment. They have no idea on what skill to obtain and don’t know how to get skills [they already have] to something readable to civilians. They look underqualified when they go in to get jobs when they are probably overqualified. — Women Veterans Group

Veterans’ experience with Michigan Works varied. One Veteran reported that he only got limited information.

He [the Veterans Employment Specialist] didn’t walk me through the process. He told me there are so many Veterans come in asking him, he is not even taking time to walk through and say well this is the kind of résumé you have. There is no workshops on how to write a government résumé that will reflect... get you the position. — OEF/OIF Group

Other Veterans had more positive experience at Michigan Works.

Getting back to the service through Michigan Works, the Veterans reps, they were outstanding. They weren’t permanent jobs, but it was something to hold over, to keep money in checking account and child support. — Vietnam Era Group
One Veteran got introduced to the Veterans Retraining Assistance Program (VRAP) through a Veterans Employment Specialist at Michigan Works.

She [did not provide] a lot [of] job leads, but she was the one that introduced me to VRAP. — OEF/OIF Group

One Veteran who worked in a job where she has opportunities to help other Veterans indicated that the reduction in Veterans Employment Specialists at Michigan Works Offices had affected her ability to help Veterans access their services.

That office doesn’t have a Veterans worker. Everyone who comes in for Veterans’ assistance they are shipping off to someone else. I don’t know who the person is anymore, so I can’t even refer people. — Women Veterans Group

A couple of the women Veterans had positive experiences with a local nonprofit that they connected with through the Veterans housing program they were involved with.

No, [they do not have a specific focus on Veterans] but they did help us on résumés and stuff; focus on the fact that we are Veterans. They helped us revamp our résumés because we were Veterans. You need to this; this should be here. Our emblems from branches are now on [our] résumés. She did a good job on rewording our experience from military to civilian. — Women Veterans Group

Overall, the Veterans in the focus group did not generally have good opinions of job fairs.

That is exactly what it is. It is a fair. Should be [he hums carnival music], walking around, introduce [yourself] to pretty faces that have been sent by their companies to take résumés; there is no hiring managers on site that can sit and do an interview. There is nothing more discouraging than [having] someone wave a flag at you. You don’t know if I scrapped together the last of my money to get gas in my tank to get there. You don’t know if I sacrificed eating to get there, scrapped money to get a suit so I look presentable or whatever the case may be. You want to hand [out] pen, stress balls, brochures, “Here, take this application.” Why did I come here? I could have went online, I could have went to your place of business. It isn’t really what it appears to be. It is extremely frustrating. — OEF/OIF Group

I’ve gone to these job fairs and usually the way it is, is basically an exchange. You give them your résumé; they give you a website. Yes, you have to go to the website to apply, and you have to go do this. It is not interesting anymore. I have stopped going to job fairs because of that alone. What a lot of people want to do is sit and fill out an application right there. It is less of a waste of time to me. A lot of people don’t have personal computers at home and they do not have computers available to them. So, that is why I stopped going to job fairs because of that. — Women Veterans Group

I was notified through the VA to go to a job fair, bring 40 résumés, have to bring 40 DD214, 40 transcripts, 40 disability, and this costs. I was following protocol. I went down the list. These are the things you would need. I had to register. I registered online. Went to the job fair. I didn’t need not one résumé. I was upset because I spent three packages of ink/paper, all these copies and nobody needs my résumé. They said go online and apply. Some of the ones online I applied for and never received a phone call. I don’t know if that was misleading or what, but to me the people that set up the Veteran job fair should know in advance if employers need résumé right then and there or just go online. What am I coming here for? They can say what they need to say on the news—apply online. That is time wasted, gas, after the second job fair I said, you know what, I’m not going to no more Veteran job fairs. — Women Veterans Group
I am thinking do they have anything for us Veterans here? We are walking around and not getting interviews. People might not have computers at home. I thought that was what job fair was for, see you in person and let them know about your personal experience, but they were just moving you along. — Women Veterans Group

What I didn’t find useful for me at the job fair... we do everything in military, but they seem to narrow down to a few chosen companies, and then they give you a short list. Sometimes you fill those positions. They just want to come out to say, “We are helping Veterans. We are showing Veterans preference.” They have a decent crowd, but the list of jobs that they have, most of the people I’ve ran into don’t qualify because it is not their entity and a lot less than middle management positions. You don’t have positions; for me, I was able to be VP [Vice President] of HR [Human Resources]. You don’t find those jobs at the job fair. You barely find middle management jobs at the job fair. You have to go under that, so to speak, in order to get a position at most of the job fairs. You can almost start over by yourself. You don’t need a job fair for the most part to start over, but they don’t cover every level. [They are] well spread out and they have a nice table, but when you look at [the] list, you find there are not a lot of jobs you can transfer civil or military experience [to]. — OEF/OIF Group

I have some young guys that work for me; sent them to job fair they had a couple weeks ago down at Cobo. The guy spent $27 for some ink for his computer. They wanted 40 résumés. Got down there and they weren’t accepting résumés. — OEF/OIF Group

I see Vets that go through it [job fairs] and have nervous breakdowns walking in because it is overwhelming. Nowhere to start, no welcoming committee, [no one says] “Hey, is this your first time at a job fair?” Never even hear that. — OEF/OIF Group

One Veteran went to job fairs hoping to find out information about how to expand his business with the goal of hiring more Veterans. He did not find the kind of information he was looking for.

Being a business owner, I try to go to those job fairs just so I can say, “Hey, I’m not necessarily looking for a job, I’m looking to take on more business and looking to hire Veterans. What opportunities are there for Veteran-owned businesses?” And you have a lot of people saying, “Well, you can do this, you can do that.” Steers you [in] different directions, but you never get a clear answer [in regards to] what is my next step.

— OEF/OIF Group

Another Veteran thought that job fairs were better suited for Veterans without barriers but that many of those who are unemployed and looking for employment would not be able to benefit because of issues they had.

I think job fairs help those with squeaky clean backgrounds. If you coming out from military and have no substance abuses, no legal, I think those are the guys that benefit most from those job fairs. I think when they have these job fairs, each Veteran could have barriers. — Vietnam Era Group

A Veteran in one of the groups who worked in career transition services had experiences both as a participant and exhibitor at job fairs. He contrasted the ways things should work at job fairs with the way they usually do work.

I ask anyone that comes up to our booth, I say, “What are you here for?” I’ve never heard any of those [other] groups say, “What are you here for, what type of job would you like? What do you think you apply for? What don’t you think you apply for?” I’m a Vet and I don’t know how to navigate this and most Vets don’t. I was guilty of it when I got out until someone sat me down and taught me. I would just grab stuff and I’m, like, I don’t even know who these are, I don’t even remember who these people even are.
How would I even give them my résumé? The résumé doesn’t matter. It is very superficial interactions all the way through. — OEF/OIF Group

Participants were asked what could be done to make job fairs more useful.

Useful job fair is one that you have to register. You have to have available open positions, legít positions, a listing of what those positions are and where they are at. Don’t send me a representative, I got no time for that. Send me someone with the ability to hire, whether it is a hiring manager, an office manager, someone with the ability to hire and conduct an interview. Someone that I can make a point of contact and [gives me] a stated follow-up process. I wouldn’t put 50 employers out there. I would do it industry-based. If you want to get into transportation logistics, boom!, here it is, if you want to get into retail, here are the companies. — OEF/OIF Group

Moderator: Did you ever go to one [a job fair] that was better?

Veteran: When we had the job fair at Cobo Hall a year or two ago, they had companies from Ohio, different states, I think that gave us a broader opportunity to take to a lot more companies, a lot more different positions, see a lot more opportunity. They talked about being an entrepreneur; they talked about a lot more things — OEF/OIF Group

[They should have someone at the door who can tell you] “You should go here.” “Oh, is that your profession? Let me show where you need to go.” I need to [be able to] leave there [the job fair] going home to prepare for a call tomorrow or later in the week for that job. Because if I’m a cook, I don’t want to hear about the transportation guy. If I’m a nurse, I don’t need to hear about an office. I don’t need to go all around the room to find the one job that I know I’m molded for. — OEF/OIF Group

One Veteran described a job fair in Detroit where they helped Veterans prepare ahead of time and said that this is needed to make such events a success.

They just had a job seminar on the east side of Detroit. What they found is when they put out the flyer, they said if you don’t know how to write a résumé, or dress for success, they team with an organizations Suits for Veterans, so that all you have to do is show up—they give you a suit, so that when they got to the job fair, they were prepared. Had a suit, had their résumé. Those are the best kind of job fairs to go to because the average Veterans, when they go, they just want a job. You have to dress for success. College folks, can’t get a job, you just can’t just have a job fair for Veterans; you have to plan for it. — Vietnam Era Group

When asked whether it was useful to have service providers at job fairs, a Veteran said it was but emphasized that it should be the appropriate people present.

Send Michigan Works, send the VA, send everybody that is actually doing something. Right now the biggest thing you got coming out is OIF/OEF/OND [Operation New Dawn] Vets. Where are the OIF/OEF/OND coordinators from the VA? I just want to the Dearborn Hiring Heroes event. It was a good event to network, if wanting to hire. If you want to meet other organizations, it was a good chance to be able to network. I went to VA table and their coordinator wasn’t even there. I’m going, “Well, what service are you providing? Why isn’t that person here?” — OEF/OIF Group

A female Veteran suggested the job fairs should also have a booth that reaches out to women Veterans and provides information on how they can get their needs met.

When we go to these job fairs, there is no booth for females. No booth for anything singled out for female Veterans. — Women Veterans Group
Another Veteran said that there are opportunities for Veterans with older felonies to have those expunged through Veterans Court and doing so might be necessary before they are able to find employment.

These people in job fairs, people got records; I know that they watch you, like I said, all goes down to advertising. You go to Veterans Court; judges take them off your records. What I’m saying is another tidbit; Macomb County got regular judges just for Veterans Court. If you are trying to get a job, if you come in with a record, they will remove felony. — Vietnam Era Group

A couple Veterans got into a discussion about what is needed to prepare Veterans for employment and one noted that the services are periodically available but are not always advertised.

First Veteran: There has to be pre-employment training for Veterans. Career planning, résumé writing, successful interviewing.

Second Veteran: Believe it or not, they have that at the VA hospital. They have people there to help you, have people coming from Michigan Works every so often. They show you how to fill out [a] résumé, how to get prepared, how to be.... Again, they don’t advertise this stuff. — Vietnam Era Group

One Veteran, who went to Vocational Rehabilitation, noted that it offered a great deal of support.

The other thing I want to say too: On the 12th floor of the McNamara building, you come to a long counter; over at end of the counter, go in the door; that is where, if you have a disability for service, you apply there and they will help you look for a job. They will send you through classes. I’ve been through a lot of the VA classes. They not only bought me a new computer, the printer, the desk, the chair, the whole nine yards, and they said, “Don’t set it up; we will send someone out to help. And sent a tutor for 6 weeks! It is on the 12th floor, you go right and then... it is vocational rehab. Believe me it works. They will put you through a class for 12 weeks. You get paid $600 a month to go through the class. — Vietnam Era Group

Another Veteran pointed out that many unemployed Veterans could be tapped as a hiring pool for agencies and organizations that serve Veterans.

You want it to be the Veteran initiative. You got a ton of unemployed Veterans that have qualifications to be able to provide the services we are looking for. People are charged up, amped up, willing to put up the extra hours to do that; a massive group of Veterans. — OEF/OIF Group

3. Services for Homeless Veterans

There was a limited discussion of services for homeless Veterans in the groups. Veterans who had been homeless cited Stand Downs as being effective because Veterans who are homeless could solve a large number of problems in one place and make direct connections with service providers.

They [homeless Veterans] can expunge their record, talk to Legal Aid. They get clothing, they get resources, they talk about hygiene. You get a lot of core services in the auditorium at that point in time to help Veterans understand or give them more information about what you can do—more information than a business card. — OEF/OIF Group

Another Veteran mentioned receiving help from a provider with a focus on homeless services.

Southwest Solutions was a good place, I think they jump into action doing things quicker than the VA does because they are driven by the grants. These companies that
have to fight for money tend to look at us and treat us a lot better than the VA.
— OEF/OIF Group

One Vietnam Veteran described help he received while he was homeless, including support from VSOs and Stand Downs, and he was able to access a variety of information about what was available.

When I was homeless, Veterans with chapters [VSO posts] and everything come down to Park Avenue—actually take them [Veterans who are homeless] out to where they are at, feed them, take them on day trips—that was real cool to me. See different posts, a lot in Michigan that help Veterans when they have the Stand Down, you can get a lot of information. — Vietnam Era Group

4. Disability Benefits

Participants in the focus groups noted that Veterans often do not know about Veterans service representatives when they first come out of the military.

When I retired, they give you the retire briefs. They kind of hit the surface, not very deep, so you are left doing that paperwork on your own basically. I was able to find an organization, I don’t even know the name of it—they helped me with my disability claim paperwork. They told me how to term everything so on and so forth. If I didn’t do that I probably wouldn’t have got what I got so far. — OEF/OIF Group

The second time I applied I went online and applied through eBenefits. They approved me. A lot of people asked me if [I] had a service rep. I said no, I just applied myself. I was tenacious. They were, like, Wow. I didn’t even know about service reps until recently. I just found out my service rep is my best friend. Whenever I have an issue or a problem, I’m supposed to go to my service rep. — OEF/OIF Group

Moderator: Do most Veterans know they can get help with claims?
[Everyone indicates no]

Veteran: A lot of Veterans don’t even know they have a claim. If [they] don’t meet that certain criteria, the first thing I thought about: walking wounded. The walking wounded are wounded but they don’t get the attention. People don’t even know.
— Vietnam Era Group

Many of the participants in the focus groups knew or learned about the importance of service officers in pursuing a claim.

The VA, in marketing with young men and women today, tell them to easily fill out the forms for yourself. My point: They shouldn’t do it, service officers know key phrases, the VA loves it when they do it by themselves because [they] just deny it. — Vietnam Era Group

As shown earlier in the section on VSOs, most Veterans in the groups reported positive experiences with service officers.

Disabled American Veterans helped me. They were really good. I was homeless so I was fast-tracked on my pension, so that helped. — Vietnam Era Group

Getting my medical records was a pain. It took me almost a year and a half. I went to the DAV, and they took it from there. They showed up in three months. They got the records. — Vietnam Era Group
In one group, Veterans discussed how military culture works against documenting injuries and how this then comes back to hurt Veterans when they apply for disability benefits.

I didn’t document anything when I got out because I was afraid it would be held against me, the fact that I wouldn’t be able to go in—“You’ve got this; you’ve got this. Sorry you are unfit for duty”—when I was doing it anyways; I just wasn’t telling anyone. So imagine getting out; you have a string of injuries, that over time it is just wear and tear. If [you are] on [a] ground unit [you] have back and knee problems, hearing loss, vision, no matter what, it is just normal wear and tear. When you are a soldier, you are being asked to do that stuff, you don’t want to do that, you will be called a variety of different names, but you also understand if you go down, everyone else has got to work that much harder, so you eat it. — OEF/OIF Group

The VA does not do a good job, active duty military does not do a good job of transferring you out of military into a civilian lifestyle. With that opportunity to say, “Let’s document things that happened to you.” Now come to the VA hospital saying “I had this issue, I have these issues.” They look at you [and] say, “Give me your military record.” Well, there is nothing in my military records. I fell three or four times; I’ve had a back injury; I was taking Vicodin, but it is not documented anywhere. The VA expects you to have that documentation or they will not sit down and talk with you. What do you do? You have to go out and do your own medical research, do your own medical doctor on a personal level, which you can’t afford. I got Tricare, so I’m able to do something, but it is a full-time job going to medical appointments. If you are trying to find work and trying to document stuff, everything is in disarray; your family wondering what the heck you are doing. Those are all things that I think are the spiral effect. — OEF/OIF Group

5. Health Care

Despite many complaints about the VA bureaucracy and how challenging it is to access services, there was also acknowledgement that services had improved in some areas, especially related to health care.

I relate that the care that we are getting now is because of the political system changes. They opened up to Veterans. That is why the Vet-to-Vet program, to me, is a good program because it takes an old Vet that knows what it is like to be a new Vet is and receiving treatment. If it wasn’t for the policy changing, we wouldn’t have probably gotten the attention we got. Now the atmosphere at the VA is better than what I ever knew it to be in this state. — Vietnam Era Group

As far as the VA in Ann Arbor, I love it. To me they have taken care of me, my shoulder, the knee, this eye, and going to fix other eye—they have been good to me. — Vietnam Era Group

Overall, the health care that was provided was generally viewed positively.

I went in and talked to a VA rep at the VA hospital, and they saved my life. Got rid of cancer, and I never had problem at the VA hospital, never. — Vietnam Era Group

However, there were some Veterans who suggested that VA health care had some of the same issues as other parts of the bureaucracy at VA.

She said I’m taking pills for my liver, and I say I want a blood test. She says good idea. If you don’t know what you need, they aren’t going to tell you. — Vietnam Era Group
One participant noted that Veterans often do not know they can request a change in doctors if they are not happy with the one they are given.

You don’t like the doctor, you can request to get another doctor. A lot of people don’t even know that. You can go in there and request a change; just talk to [the] patient advocate; tell them what’s going on and they will get you with another doctor.

— Vietnam Era Group

6. Mental Health

Veterans in one group mentioned that there are still stigma and negative consequences in the military for seeking help for mental health issues.

My last duty station I was so messed up that they pulled me off of my duty. They made me [get counseling]. I had [a] counselor; I had group counseling four times a week, and individual counseling. One of my group counseling sessions, I noticed there was a sergeant major there. He looked familiar to me. Post commander. They relieved him of duty because he has PTSD. They say, “Come to us. If you have a problem, we will work with you; don’t worry about your career.” There was a Post Sergeant Major relieved of duty because he had PTSD. Now, that will spread around the post, and if you have a private that has PTSD and he wants help, what do you think he is going to do? He is not going to tell anybody. — OEF/OIF Group

Veterans reported that once you are out of the service, there are often delays in accessing mental health services from VA.

When I began having symptoms—harsher systems of PTSD—I really needed someone to sit me down and let me know what was going on with me. Due to the fact that I was using alcohol at the time, I didn’t know the symptoms. When I stopped using alcohol, I realized I had more problems than just the alcohol. When I came into the medical, health division of the VA, I began to ask them the questions. One guy told me, “You don’t seem like you have a problem, so let’s make you an appointment.” It was set for six months later. — OEF/OIF Group

Another Veteran reported that, if you have mental health problems, you need to fit a certain profile and cooperate in order to get services and benefits, and that some of the expectations were unrealistic.

I don’t fit the profile because I [did not] want to commit suicide. I’m on medication. How come I can’t be who I am? “Well, we know what you did, could be PTSD, well here, take these pills.” They want you to fit a guideline. You got to come in there drunk up, psychologically going to kill myself before they recognize that you have a problem. Talking to psychologist, looking [at] you, you don’t know what is going in my brain here. I’m depressed. I’m about to blow [stuff] up, lit up, doped up—excuse me for yelling but a lot of people get called out there—they want you to fit that profile. If I want to kill myself, I’m going to hurt others, take your pills. I can’t take those pills and walk around [the] homeless shelter [because you need to keep your guard up at a shelter]. It affects the benefits; if you don’t go through a, b, c, or d, then we are not going to give you the benefits. — Vietnam Era Group

Another Veteran reported that VA was too reliant on medication for addressing mental health issues.

My first experience with the VA was in 2008; it was horrendous. I felt like a number. They finally got me in to see a counselor for PTSD, and their option was to give me a bunch of medication and send me on my way. And I didn’t want that. So I ended up on
my own through another organization. I got counseling on the outside, because I didn’t want it to affect me, and it was way better — OEF/OIF Group

One Veteran reported that the VA helped him with mental health issues and he is doing much better because of that.

I met the doctor; she told me that I was suffering from PTSD and that I’ve been in denial. I was self-medicating. I was violent, and I was out of my mind. When the VA did start giving me medical attention and medication, then that is when I seen the difference in myself. How I related to other people and what I was doing. — Vietnam Era Group

Veterans with experience with the Veterans mental health system in one of the women’s focus groups indicated that information about the availability of mental health services was not widely known or available.

I wouldn’t say it is easy at all [to find out about mental health services]. It is because it is difficult to know where to look for the information. If you don’t know you are SOL [out of luck]. It is like a big secret almost. “Do you know where to get counselor for mental illness?” “I don’t know but Ray said…” [she laughed]. It is a big secret. — Women Veterans Group

These Veterans said that once you access them you find that there are quite a few services.

First Veteran: [Once you find out it is available] it’s not as bad as you thought it was from the beginning. I could have [had] this [mental health services] and did this all this time ago. You feel like you got cheated.

Second Veteran: After being homeless and being on the street in order for them to bring you in. That’s how I got it. I was almost dead. After using and drinking and calling and saying I’m going to hurt someone or myself, then here they come.

First Veteran: There isn’t a lot of preventative care — Women Veterans Group

A lot of times you have to be at the bottom so you can get assistance. They don’t help you while you are in the middle. They don’t help you when you need an extra push. You have to be at the rock bottom before they will assist you to do anything.

— Women Veterans Group

A Veteran who had a less-than-honorable discharge pointed out that Veterans in that situation may be particularly vulnerable to mental health issues or mental illness may be the underlying reason they were given a less-than-honorable discharge.

I was [given] a less-than-honorable discharge for personality disorder, and that wasn’t my fault, but they didn’t give me no debriefing. When I left California, they didn’t even give me a bus ticket. When I got home I couldn’t get any unemployment so I was out there lost with a mental illness…. It took a long time to go through the system. If you are diligent to create…to stay in contact with the VA, seek medical help, some ongoing treatment, but right after discharged if you don’t have anything going, that would [be] best way to receive other services, that you might really need, like physical or mental health issue. — Vietnam Era Group
Groups were asked about the Vet Center as an option for mental health services. In one group it was clear that no one really knew about it. One of the Vietnam Veterans group explained that part of the issue was there was some confusion between the VA Vet Center that provides counseling and mental health services and a non-profit service provider that works with the homeless population that is commonly known as the Vet Center.

Veteran: He [the previous Vet Center Director] was saying they were the best well-kept secret because people kept confusing them with the Veterans Foundation [non-profit organization that mainly serves Veterans who are in the homeless population]. He was so desperate to get Veterans; they extended past Vietnam Veterans and included female Veterans with problems. I still bet you 1% of the Vet population in Detroit knows that.

Moderator: Anything they were doing to make it less of a secret?

Veteran: I know that, well we have a Veterans Day parade we started. This is our ninth year. They were there every year with banners, passing out information. Come to our post meeting, district meeting. But I think they could have done more. A lot of it was their fault too. Still people don’t know about the Vet Center. — Vietnam Era Group

The few Veterans who used the Vet Center for services said the services they received were excellent.

That is where I went [the Vet Center] 10 years ago when I started out. I went to a DAV meeting and a gentlemen who was a pilot during the ’65 campaign seen my CAB [Combat Action Badge], the first of 12. He said, “Getting any benefits?” I said, “Yeah, I was wounded, Purple Heart.” He said, “What about PTSD?” I said, “No problems there.” He said, “If you say you have no problem, then you have a problem.” He said, “Go talk to this guy at Vet center.” I called him and had a one-hour interview, which had nothing to deal with military. Was asking about family life, marriages, and things like, “Do you like the malls?” “I don’t like crowds,” I said, and I will sit in a bar with my back against the wall so I can see the door, I still do. He said, “Son, you have severe PTSD from everything I asked you.” I said, “How do you deduce that?” Then he goes back to this hyper vigilance. He said this is the game plan; I will see you every Wednesday and start attending the Vietnam Veterans group therapy. He said, “They are all like you.” I did that for three years. I had the paper and went to the VA. Next thing I knew, they said you are rated 70% disabled for PTSD alone. I still keep up going there for group therapy once a month with a brother that shares the same experience, comfortable talking about health and cancer. That helped me. — Vietnam Era Group

A Veteran indicated that the lack of a VA in-patient substance abuse treatment center in the Detroit area was a gap.

Battle Creek was nice place. [I] could spend 90 days there. [It] gives [an] opportunity to be in an inpatient setting. Here they don’t have [an] inpatient facility. Difficult for Veterans who need to get out of wherever they are at, to find housing or get back on [their] feet. I feel that is one part of program that can be added to Detroit, especially since Veterans’ homeless and alcohol and drug addiction are skyrocketing. We need a facility that can help these gentlemen with that particular issue. — OEF/OIF Group

Another Veteran noted that you can receive help for these issues through the domiciliary care program in the Detroit area.

I have no problem with the quality of service. Once I got to the domiciliary—excellent program that helped me change my life. That is why I knew it was necessary for other Veterans to know about this. — OEF/OIF Group
7. Women Veterans

Women Veterans were asked about their experiences seeking services as women, and some indicated that the services were good and that VA was welcoming to women.

Moderator: Is VA more or less welcoming to women?
First Veteran: I don’t see it as being bad, as being negative as far as welcoming females. No, I don’t see it negative.
Second Veteran: I think it is equal. I have my situation. There have been days I needed help, I think they jump to the gun. Timely amount for me. In terms of the men, I’m not sure. — Women Veterans Group

However, there was also a sense among many of the women that there needed to be more targeted outreach and services. In one group, the women Veterans talked about attempts to hold a Veterans Stand Down for women that were not entirely successful because there were limited numbers of service providers present.

We went to one in Lansing. That was decent. They had a lot of good stuff. Still the services you need aren’t there. There were services but mostly limited to people in that area. If you have an event…, it should be for all women Veterans not just for ones in that area. We traveled all the way out there, and we couldn’t make use of it. — Women Veterans Group

They noted that over 300 women Veterans had shown up at this event from around the state and suggested that the organizers were not quite expecting such a turnout.

They didn’t expect that amount of people. Women Veterans were coming by the bus load. — Women Veterans Group

When asked if there were any providers in the area that were doing a good job reaching women Veterans, the focus group participants had not heard of any.

First Veteran: No, not that we have heard about.
Second Veteran: I have seen posters, but they don’t lead anywhere. I’ve never seen a number or address. It is just a cute picture, and that is the end of that. I don’t see groups or places to contact, just [a] picture [telling you] to support women Veterans. — Women Veterans Group

The Women Veterans in one group that there needs to be more outreach and that it has to focus on issues besides sexual harassment, which is currently the main area in which outreach is being done.

I agree with [name of another Veteran in the group] about putting the information out there and having more stuff for women. You see sexual trauma everywhere, but there are other needs out there because not everyone was sexually harassed. There is more to it. Some people have mental issues or whatever. — Women Veterans Group

One of the Veterans pointed out that women Veterans need an opportunity to get together to share information and that events targeted at women Veterans send a message.

When we do get together, we find out a lot of information. In a little group like this, little groups like this can give a lot of information. It also shows that you care. I’ve been around and you do not see a lot of stuff for females. — Women Veterans Group

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Another Veteran discussed how women have different issues than men and how it is important that they get specifically addressed.

There are special issues that female Veterans have that males don’t. It gets rolled up into one. They don’t do anything with the females, maybe she has kids. Maybe need to find out how to handle her school work and provide childcare for her kids or maybe trying to separate from [or] divorce [a spouse]. I had a fiancé in the military; they helped him and they didn’t help me. There is a lot of stuff that goes on that you need special assistance, and [it is] not addressed. — Women Veterans Group

Other Veterans talked about how women’s concerns are often not heard when they are expressed in a forum dominated by male Veterans.

We had a meeting a couple of weeks ago. We got over ran by those male Veterans. We were not even heard. — Women Veterans Group

When you go in certain places and they speak to you as if you weren’t in the military. I am looking at them like, “I did more time than you.” They think that your service time was cute. We get discounted for being females. — Women Veterans Group
RECOMMENDATIONS

This section provides a series of recommendations based on the focus group findings. These recommendations are intended to inform the work of all organizations or entities interested in improving services for Veterans in the Detroit Metro area in particular, but many or all also likely apply to Veterans in other parts of the state and possibly the country as a whole. The focus groups were conducted as part of the Michigan No Wrong Door initiative and are intended to inform the work of the MVAA and the regional coalitions that are being developed under the initiative. The regional coalitions being developed as part of the initiative can help organize, share information about, and improve Veterans’ services and help connect local communities to state and federal services. While no group would be able to tackle all these issues at once, these recommendations are intended to help inform the strategies and priorities to be selected by the Detroit Metro regional VCAT and other coalitions that form in Michigan.

The recommendations are presented in the order in which relevant findings are discussed in this report.

A. Learning About Services and Resources

- **Veterans currently learn more about what is available from other Veterans than from other sources.** Veterans report that the way they most often learn about benefits, resources, and services is through other Veterans. This suggests there is a need for more formal outreach efforts but efforts should also be made to support these informal networks and to help Veterans who are interested in being conduits for information by making sure they have accurate information and are able to connect their fellow Veterans to the right source for particular kinds of benefits. Efforts should be made to strengthen both the informal peer-to-peer sharing and to develop more formal means of peer-to-peer support through hiring Veterans to help others navigate the Veterans service system.

- **Develop events designed to broadly inform Veterans about available services and resources similar to what is done at Stand Downs.** Veterans leave the military with limited information about what benefits, services, and resources they are eligible for. The main piece of advice they have been given, at least in the past, is to check in with VA. For a variety of reasons, VA is not effective at sharing information about the broad array of benefits, services, and resources Veterans are eligible for. There is a need to fill that void and one of the ways that Veterans would like that to be done is through broad outreach events that share information and offer Veterans an opportunity to access benefits, services, and resources whether they are provided by VA or state or county governments, or community organizations.

- **Use a variety of outreach methods to reach Veterans.** Veterans identified a variety of sources for reaching other Veterans with information about services and resources. No single source predominated, although television, the Internet, and community outreach events received far more mentions than other sources. Direct mailings also received a few mentions. Social media sites may be useful as a means of keeping Veterans who are already in Veteran service networks informed about events or resources, but it was not cited as a key way of reaching Veterans who are not already connected to the system except possibly through their connections with other Veterans who are better connected to the system. It may be useful to encourage well-informed Veterans to at least occasionally share information about Veterans services through their social
media connections, especially if their networks include large numbers of Veterans. The state could take advantage of Veterans’ information that is collected as part of getting a driver license and use that as a means of reaching Veterans either at the time they complete the form or later via the mail or other outreach.

- **Send messages that support and help are available for Veterans who are facing challenges in their lives.** The focus groups included a diverse group of Veterans at various points in their life who have faced a wide range of challenges. There are many services out there to help Veterans with many of these challenges, and Veterans believe that one of the goals of an outreach effort should be to help Veterans know that. If done effectively, it can help Veterans before their situation deteriorates. Quite a few Veterans who had serious crises reported not really learning about what was available to them until they were in a legal, mental health, or substance abuse situation that led them to being placed in confinement or in-patient treatment.

- **Conduct outreach events designed to appeal to women Veterans.** Women make up a relatively small but growing percentage of Veterans. While women Veterans have extensive experience in working in a male-dominated work environment, there is a need to hold at least some outreach events that specifically target women Veterans. These events are useful for addressing issues that are more common among women, for providing a venue for women who may not feel as comfortable in a male-dominated setting, and for providing women an opportunity to connect with other women Veterans who have had similar experiences.

- **Reach out to Veterans who may have had bad experiences with the system or whose issues were not being addressed when they left the military.** There are various conditions, symptoms, and issues that the military and Veterans service system did not address effectively during earlier eras. In addition, the Veterans service system faces challenges and had periods where there were issues with the quality of services for Veterans. Some Veterans were alienated from the service system because of their experience in trying to get their problems addressed, and special outreach efforts may be needed to encourage these Veterans to try again if those problems have not been resolved. These groups include Veterans who have experienced military sexual trauma, particularly, but not exclusively, women Veterans; Veterans from previous conflicts or who left the military early during the OEF/OIF conflicts who are experiencing PTSD symptoms; Vietnam-era Veterans who may have been exposed to Agent Orange; Veterans who had bad experiences using the VA medical system, particularly in the years after Vietnam but also in more recent eras; and Veterans who had negative experiences trying to file disability claims.

### B. Using the Veterans Service System

- **Providers should be encouraged to effectively connect Veterans to other providers.** Veterans are frustrated by the fact that providers often do not provide information about other services or resources available. They see this as an issue both within VA and among community providers. Providers should make an effort to better understand and connect Veterans to the Veterans service system, including VA, state, and community services. It may be useful to establish hubs for specific service areas that are able to connect Veterans to the full range of services available in the area. Michigan Works sometimes fulfills that function for employment services, but it faces more challenges in doing so because of reductions in staff focused on Veterans and changes in responsibilities of existing staff based on federal funding requirements. If hubs are not workable in all areas, it will be important to come up with alternatives that
enable providers to connect Veterans to the services that are the best fit for the Veteran regardless of what organization provides them.

- **Provide support and resources for developing peer-to-peer support specialists.** Peer-support specialists were seen as very helpful by Veterans. They appreciated having the shared experience of serving in the military, and many of the specialists were good at connecting Veterans to a variety of services. Support in developing both volunteer and para-professional peer-support specialists could help address some of the current Veterans system challenges. Peer-support specialists can be particularly helpful in rural areas where few provider agencies or organizations are located.

- **Ensure that peer-support specialists are targets for outreach information and are encouraged to participate in regional coalitions.** To ensure that peer-support specialists are kept informed and are knowledgeable about the service system, they should be considered as important targets for outreach information and efforts should be made to encourage their participation in regional coalitions.

- **Veterans Service Organizations and County Veterans Agencies should conduct outreach around resources and information that they can provide Veterans.** Veterans Service Organizations and County Veterans Agencies interested in reaching Veterans and providing them with information and support the need to reach out to Veterans and let them know what they are able to provide and how they can help connect Veterans to information, resources, and the Veterans service system.

### C. Needs, Benefits, and Resources

- **Reach out to college Veterans with information on such topics as disability benefits and the availability of Veterans services officers along with other Veterans benefits.** Colleges and universities are one of the few places where there is a concentrated group of OEF/OIF Veterans. They appear to be doing a good job helping Veterans enroll and take advantage of their education benefits. Communities and states should take advantage of the presence of Veterans in these settings to help ensure these Veterans are informed about available resources and benefits. These Veterans also represent a tremendous resource for the Veteran and larger community. Gatherings of college Veterans represent an opportunity to engage Veterans and encourage them to take leadership positions serving their fellow Veterans and the community at large.

- **Encourage all colleges to give Veterans adequate credit for courses and trainings they completed while in the military.** It is unclear how well colleges and universities are doing in regard to giving Veterans credit for their military training and experience. Outreach efforts should encourage colleges and universities to maximize their efforts in this area. The regional coalition could play a role in encouraging colleges to become more Vet friendly through efforts to identify colleges and universities who are taking positive steps in this area.

- **All providers who work on employment issues with Veterans should be trained to access information on the Joint Service Transcript and be able to translate military experience into language that is suitable for civilian positions.** Many Veterans have had the benefit of getting college credit for their military experience and using resources that enable them to translate that experience into language that will appeal to civilian employer. However, there are still instances where the use of these tools to support Veterans does not appear to be routine.
Efforts should be undertaken to ensure that all service providers and peer-support specialists who encounter Veterans know about these tools and that those focused on education or employment are skilled in using them to help Veterans.

- **Veterans job fairs should include navigators who help Veterans find what they are looking for and should be designed to provide information or resources that go beyond information available online.** Veterans have developed negative impressions of job fairs and do not see most of them as providing a useful service. Too many Veterans job fairs are not effective. Many Veterans have grown cynical about the practice and promises of employers who indicate they are eager to employ Veterans. To make job fairs more effective, there should be people available onsite who ask Veterans what they are looking for and who can review a Veteran résumé if the Veteran asks. Employers who are at the fairs should have jobs available and should be providing more than directions to a website where Veterans can apply for a job. This could range from initial job interviews to concrete information that can help the Veteran put together an effective application for that company or organization.

- **There should be assistance available to Veterans to help them prepare an effective résumé for positions with the Federal government.** Résumés for Federal government positions require a special format that is not suitable for other positions and that most Veterans do not appear to be familiar with. Special courses, classes, or assistance should be available to help Veterans prepare these résumés and ensure that they receive their appropriate Veteran preferences for Federal positions.

- **Provide a clear message that there is free support available to help with disability applications and that support is critical to putting together a successful application.** Overall, Veterans in the Detroit Metro area had positive experiences with Veterans Services Officers. Compared with the West Michigan Veterans group, there were far fewer complaints about this source of support. However, many Veterans are not aware that Veterans Services Officers are available to help them with disability or pension claims and that such help is extremely beneficial in increasing the likelihood of filing a successful claim. Both the availability of help and its importance need to be emphasized. Veterans need clear information on where they can go for help, including county offices in places where the county office has service officers who handle claims.

- **Outreach efforts need to both acknowledge the challenges that are involved in obtaining services from VA and emphasize that it is an important resource for Veterans that has helped many of them be healthier and obtain needed help with many problems.** Even with various community organizations and resources helping Veterans, VA remains at the center of the Veterans services system. Veterans need to know what VA can do for them and steps they need to take to find out more information and to access services. Community providers need to acknowledge some of the challenges of the VA system while letting Veterans know that if they need VA services or resources, they should find out what is available. This may be especially important with older Veterans who have had experiences with VA when there were more serious quality issues on the health care side.

- **Help Veterans navigate the VA system.** The VA system can be intimidating and difficult to navigate. Ideally, VA itself would take steps to make it more user-friendly, and it has done some things such as put more of an emphasis on peer support. Realistically, it is not going to solve this issue on its own, and states and community agencies and advocates who work with Veterans can
play an important role in helping Veterans access and navigate the VA system and educating each other and peer-support providers about how to work with the system effectively.

- **Publicize the existence of the VA Vet Centers as a place where combat Veterans can seek help for mental health services outside of the regular VA health care system.** Many Veterans who may be eligible for services through VA Vet Centers do not appear to know about the availability of mental health care through this system. While it is not suitable for everyone, it does provide a resource that many Veterans might be willing to use when they are reluctant to use the mental health system based in VA medical centers and outpatient clinics.

- **Help Veterans understand how to become better involved in their own health care and give them the skills they need to ask doctors questions when they feel they are being overmedicated, misdiagnosed, or are having troubles working with a particular provider.** Some Veterans report concerns over managing multiple medications and side effects of drugs given to treat mental health issues or physical pain. Veterans may need support as they learn to be their own advocates, and they must be willing to ask questions about their treatment and the medications they are prescribed. The information provided should not be anti-medication, but it should help Veterans work with providers to ensure that they are getting effective treatment that minimizes negative side effects.

- **Provide support for women Veterans so they understand how to access both Veteran-focused services and other services, such as subsidized child care, that may be essential to their financial well-being.** Women Veterans can benefit from targeted outreach efforts that focus on their specific needs because they may differ from a male Veteran’s needs. Women Veterans may also be more likely to engage in a setting that focuses on women Veterans and are less likely to have their needs overshadowed in such a setting.

There is one final recommendation that does not fit under a specific category and that is the need to **seek continuous feedback from Veterans on service system changes.** The Veterans in the focus groups very much appreciated the opportunity to share their experiences and concerns. Many of them shared information with each other and some were planning on getting together again. Community coalitions should look for opportunities to foster the development of groups of Veterans who can provide feedback and work to improve the Veterans services system. Some Veterans may want to engage with the coalition as a whole while others may not find it as useful to be part of a service provider group and may want to form a separate group that helps inform the work of the coalition.
I. WELCOME/BACKGROUND INFO (10 minutes)

Welcome to our group discussion. Thank you for taking the time to participate in our focus group discussion for Veterans. My name is __________, I am here with my colleague __________ and we work for The Altarum Institute based in Ann Arbor. Altarum is a nonprofit institute that focuses on health systems research. As part of its goal to improve veterans services, we are working with the Michigan Veterans Affairs Agency to find out more about veterans experiences finding and using services and their ideas for improving services. We will use your ideas to provide recommendations for improving services for Veterans and their families.

Have any of you ever been in a focus group before? The purpose of focus groups is to get the honest opinions of small groups of people about a specific topic. These topics may range from what people think about a particular soft drink, soap product, or in our case, a far more important issue, services offered to Veterans and their families. In order to be an effective way of obtaining information there are a few rules that it will be helpful to follow.

I would like to review these ground rules now, some of which we talked about when we went over the informed consent form:

- There are no right and wrong answers. We are here to find out about your experiences. We do not work directly for the government or for any agency or organization that provides the services we will talk about today, so feel free to tell us your thoughts, whether they are positive or negative.

- It is ok to disagree with one another. We want to hear everyone’s point of view. However, if you disagree, please do so respectfully.

- Only one person should talk at a time. We are tape recording this session so that we do not miss anything important. If two people talk at once, we cannot understand what anyone is saying. I may remind you of this during the group.

- We would like everyone to participate. You each do not have to answer every question. If, however, some of you are shy or I really want to know what you think about a particular issue, I may ask you about it.

- We have a lot that we want to talk about today. So, do not be surprised if at some point I interrupt the discussion and move to another topic. But, if there is something important you want to say, let me know and you can quickly add your thoughts in before we change subjects.
We will be using first names only today. Everything you say is confidential. After we conduct several of these group discussions, we will write a report describing what people have said. Your name will not appear anywhere in the report. The tapes we make today will not be shared with the government or the organizations discussed today. Anything you say today will not be attached to your name at any point. Nothing that you say will affect your eligibility for or the services you receive through any of the programs we talk about today.

Do not worry about offending us. We really want to learn from you and find out what you think about the issues we talk about tonight. Please tell us your honest opinions.

I want to make a couple more points related to the tape recording. Please speak up. If you speak too quietly, it will be too difficult to hear you later on the tape. Also, please do not bump the table or tap your hands on the table. Anything close to the recorders sounds incredibly loud on the tape and it will drown out your voices. ________ is also taking notes in case the tapes do not come out clearly and he/she will be handling the tape recorders.

The group session will last two hours. You will not get out any later than _______. We will not be taking a formal break, but if you need to leave for a restroom break, the bathrooms are _________________.

At the end of the session, we will provide you with a payment in appreciation for you coming tonight. We will also ask you to complete a short anonymous survey.

Any questions before we begin?

II. INTRODUCTIONS (5 minutes)

Let’s get started.

Start with the participant to your right. Have them respond in round robin fashion.

Please tell me your first name, the years you served in the military, and the branch of service you were in.

III. MAIN FOCUS GROUP QUESTIONs

A. Finding Out About Veterans Benefits and Services (15 minutes)

I want to start by asking your sense of what it is like for veterans to find out about benefits and services for veterans in your community.

1. Overall how easy do you think it is to find out about benefits and services for veterans in your community?

2. Where do veterans or their family members go to find out about benefits and services? How effective are these places?
3. What do you think is the best way to communicate with Veterans? What methods would you recommend?
   What magazines or newspapers do you read?
   Are there websites you visit frequently?
   What TV programs do you watch?
   Do you listen to the radio?

4. What do you think about social media (meaning Facebook, Twitter, etc.) as a way to reach Veterans?
   Which type of social media would be most effective?

5. Overall, what could be done to make it easier to find out about benefits and services for veterans?

B. Initial Experience in Using Services (20 minutes)

Now I want to turn to your experience with pursuing services offered to Veterans. I want you to think back to when you first sought out these services.

1. (ROUND-ROBIN) Provide a brief description of your first experience in seeking out services offered to Veterans in this community? NOTE: IF THEY RECEIVED SERVICES PRIOR TO LIVING IN THE AREA THEY SHOULD TALK ABOUT THEIR FIRST EXPERIENCES WHEN THEY ARRIVED HERE
   PROBE: How did you learn about these services?

2. What was your first step in pursuing these services?
   PROBE: Internet, email, phone call, office visit?

3. What happened when you talked to someone about what you needed?
   PROBE: What information were you provided? What kind of questions did they ask you? Were you asked to fill out a survey or questionnaire about what you were looking for?

4. What made it hard to get services? Of those things what was the thing that made it most difficult to get services?

5. Who or what helped you get services? What was the most helpful?

6. How helpful were the services you received?

7. Were you connected with any services outside the organization where you first went for help? Describe how that worked.
C. Ongoing Experience with the Veterans Service System (15 minutes)

Now I want to ask about your current experiences with veterans services.

1. (ROUND-ROBIN) What veteran’s services are you currently receiving?

2. For those of you who are receiving multiple services how coordinated are those services? Do the organizations who provide services talk to each other? What works well about the way the organizations work together? What could work better?

3. Overall what works well about the veteran’s services you receive?

4. What could be better?

D. Experience Obtaining Services Outside the Veterans System (20 minutes)

Veterans are often eligible for services from agencies or organizations that do not focus just on providing services to veterans, for example, unemployment benefits, food assistance, or Medicaid. I’m going to ask you some questions about those types of services.

1. Overall how easy do you think it is for veterans in this community to find out about services they need and might be eligible for that are offered by organizations that don’t focus mainly on veterans?

2. (Round Robin) Who receives services such as health care or employment or economic assistance from agencies or organizations that focus on other groups in addition to veterans?

3. What is that experience like?

4. Did these outside organizations ask if you were a veteran? What do those agencies or organizations know about you in regard to your experience in the military or your status as a veteran?

5. How helpful do you think it would be for them to know more?
6. Are the services they offer coordinated in anyway with the veteran’s services you receive?
   Probe: Do staff from the different programs talk?
   Do the different agencies ask you about the services you receive from other agencies or organizations?

7. What works well about the services you receive from agencies or organizations that focus on other groups besides veterans? What could work better?

E. Social Support Services (15 minutes)

Sometimes as a result of experiences in military, veterans and their family members need support related to readjustment to civilian life or dealing with emotional or psychological issues. I have a few questions about that.

1. How easy is it to find this kind of help in the community?

2. What could make it easier?

3. What is useful about the help that is offered?

4. What could be done to make it more useful?

F. Recommendations (15 minutes)

I want to discuss your recommendations for improving veteran’s services in your community.

1. What could be done to make it easy for veterans to find out about services or resources they are eligible for and might find useful?

2. What could be done to improve the care and services offered to veterans?

3. If you could change one thing in how your community deals with veterans issues what would it be?
IV. CLOSING

(5 minutes)

We’ve come to the end of the questions but before we stop I want to ask, is there anything I haven’t asked about that you would like to tell me related to the topics we have discussed?

Check for questions or follow-up from co-moderator.

Thank you very much for coming. The discussion has been very helpful and we will do our best to convey your experiences and suggestions in the report we prepare.

Please complete the form with a few questions about yourself….be sure NOT to include your name on that form. Also please sign a receipt for the money you receive as a thank you.