



Understanding U.S. Veterans and Military Connected Individuals' Needs

A Conceptual Framework for Identifying the Level of Need and Co-occurring Needs

Network for Nonprofit and Social Impact
Northwestern University

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Executive Summary

Veterans, service members, and their families often seek a wide variety of assistance, including access to health and benefits services from the U.S. Department of Veterans Affairs (VA), housing and homeless assistance, and financial and employment assistance.¹ These needs frequently co-occur and require the delivery of services by more than one organization. This research examines the various services veterans might need to develop a classification scheme of those services. This scheme categorizes services into basic needs, stressors, and nonessential needs. In addition, it describes commonly co-occurring needs.

We conducted a mixed-method study of veteran-serving organizations to develop this classification scheme. Combining qualitative interviews with 21 intake specialists and providers and surveys of 130 veteran-serving organization leaders, we found support for addressing veterans' needs using a holistic perspective. Based on practices of interviewee organizations and supporting evidence in the literature, this report presents five recommendations for veteran-serving agencies and organizations so that they may be better equipped to meet the needs of veterans:

- 1 Prioritize basic needs:** Participants identified basic needs as ones that can trigger emergencies or catastrophic consequences if unmet. They consistently noted that basic needs must be addressed before stressor needs. Basic needs included behavioral, mental, and physical health, employment, food assistance, clothing and household goods, housing and shelter, transportation, and utilities.
- 2 Address stressors after basic needs are met:** Participants identified stressors as serious needs that must be addressed because they will take energy away from a client's ability to make positive strides. Stressors included VA benefits navigation, legal aid, money management assistance, and education.
- 3 Offer comprehensive care coordination across healthcare and social services:** Respondents indicated a strong connection between physical and mental health needs and social needs, like employment and financial stability. We recommend adopting a whole-person care strategy that integrates health and social care. For instance, this could mean providing transportation assistance to enhance veterans' employment opportunities and mental health.
- 4 Empowerment through financial and employment integration:** A multifaceted approach to financial assistance and employment support is vital to veterans' financial well-being. Incorporating job placement, career development, financial counseling, and emotional support can create a well-rounded support system for achieving financial independence and resilience.
- 5 Provide supportive housing assistance for lasting change:** Coordinating employment assistance, income support, and services within housing assistance programs creates a more complete approach to veterans' housing needs. Supportive housing enhances the quality of life through accessible household items and addresses financial stability to create a supportive environment that fosters self-sufficiency.

¹ Van Slyke, Ryan D., and Nicholas J. Armstrong. "Communities Serve: A Systematic Review of Need Assessments on U.S. Veteran and Military-Connected Populations." *Armed Forces & Society* 46, no. 4 (2020): 564–94. doi.org/10.1177/0095327X19845030.

About the Organizations

About AmericaServes

AmericaServes is a model for coordinated care intended to revolutionize the health and human service delivery process for veterans, service members, and their families throughout the United States. Designed by the D'Aniello Institute for Veterans and Military Families, 18 networks comprising over 1,080 providers have implemented the AmericaServes model with a mission to provide comprehensive support, coordinating requests across various services. Since 2015, AmericaServes networks have assisted more than 48,000 military-connected individuals in navigating over 111,000 resources. By fostering collaboration and coordination between public, private, and nonprofit providers, networks aim to deliver timely, tailored support, ensuring that clients receive the necessary care when and where they need it.

About Combined Arms

Combined Arms delivers innovative technology and data sophistication that optimizes connection to resources and drives network-wide efficiencies and transparency, ultimately improving the quality of life for veterans and military families. By streamlining connections between active service members, veterans, and other military-connected individuals with organizations that offer vital services, Combined Arms offers timely access to a network of 300 member organizations and more than 1,200 social service resources. As a backbone organization that has served 58,000+ veterans and military-connected individuals in Texas since 2017, Combined Arms prioritizes accountability and addresses crucial needs by preventing unemployment, homelessness, suicide, and more.

About the Network for Nonprofit and Social Impact at Northwestern University

The Network for Nonprofit and Social Impact at Northwestern University is a research lab. We are dedicated to discovering how organizations can better work together to move the needle on social issues. We thrive on projects that produce rigorously studied results and practical applications for the social impact sector. Our work has been funded by the National Science Foundation, the Bill & Melinda Gates Foundation, and the Army Research Office in the past eight years. Our research is featured in academic journals and venues like *Stanford Social Innovation Review* and *Nonprofit Quarterly*.



Introduction

A whole-person approach to addressing veterans' mental and physical health problems requires examining social needs that influence healthcare outcomes. Food insecurity, financial instability, unemployment, and housing instability all negatively influence an individual's health outcomes.² Without support, these issues worsen, and the suicide rates of veterans who do not receive services from the Veterans Health Administration (VHA) are increasing.³ For instance, food insecurity is associated with an increased risk of suicidal ideation and depression symptoms in veterans.⁴

Veteran-serving organizations (VSOs) provide various programs and resources to combat these issues and improve veterans' quality of life.⁵ For this report, veteran-serving agencies' staff members and intake specialists who are a part of AmericaServes and Combined Arms networks provided insight regarding their work to support veterans' needs. These agencies use referral technology and trained employees to coordinate care within their networks of VSOs, including the VA medical centers.

However, VSOs and VA medical centers may struggle with connecting uncoordinated services and resources outside of coordinated care systems.

Veterans may not receive integrative, high-quality care across several agencies and programs in a fragmented care delivery system. And veterans currently face uncertainty about the order of services they must follow to successfully address their needs, especially if some are co-occurring, regardless of whether they are connected to a coordinated care system or not. Consistent with the notion of "starving at the feast," military connected individuals experience overwhelm due to the number agencies offering assistance without a clear roadmap of how to approach them.⁶ Our research aims to help veteran-serving agencies determine how to prioritize and group veteran services to receive better outcomes.



2 World Health Organization (WHO). "Social Determinants of Health." https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1.

3 Yosef Sokol et al., "The Deadly Gap: Understanding Suicide among Veterans Transitioning out of the Military," *Psychiatry Research* 300 (June 1, 2021): 113875, <https://doi.org/10.1016/j.psychres.2021.113875>.

4 Nipa P. Kamdar et al., "Risk for Depression and Suicidal Ideation among Food Insecure US Veterans: Data from the National Health and Nutrition Examination Study," *Social Psychiatry and Psychiatric Epidemiology*, March 26, 2021, <https://doi.org/10.1007/s00127-021-02071-3>.

5 Note: Both Combined Arms and AmericaServes serve more than just veterans. For this study, the terms "client," "veteran," and "military connected individual" may be used throughout the paper. Further, regardless of discharge status, all veterans served by Combined Arms and AmericaServes are considered in this paper.

6 Duane France. "Military Transition," *Headspace and Timing: Veteran Mental Health from a Combat Veteran Perspective*, July 27, 2017, <https://veteranmentalhealth.com/starving-at-the-feast-a-parable-of-military-transition>.

This research achieves two goals.

- 1 We categorize commonly offered veteran services and programs into three categories, those addressing: 1) basic needs, 2) stressors, and 3) nonessentials.
- 2 We describe the most commonly co-occurring needs for veterans, identifying the needs that must be addressed for some programs and services to be most effective.

In this report, we categorize services into three types of needs and discuss suggestions for approaching each need successfully based on their characteristics. We further explore the findings of co-occurring needs and emphasize the interconnected nature of mental and physical health and holistic approaches to social needs.



Definitions

Client/veteran/military-connected individual:

Combined Arms and AmericaServes serve more than just veterans. For this study, the terms “client,” “veteran,” and “military-connected individual” may be used throughout the paper. Further, regardless of discharge status, all veterans served by Combined Arms and AmericaServes are considered in this paper.

Veteran Serving Organization (VSO): For this study, the term veteran-serving organization or VSO refers to both nonprofit organizations and designated county agencies that serve the client population noted above. In addition, these organizations may serve clients who are not veterans or military-connected.

Coordinated care system: “a community of local service providers that share vision, measurement outcomes, and communication strategies to ensure seamless service delivery and sustainable impact.” ⁷

- **Coordination center:** In this study, a coordination center refers to a provider responsible for overseeing referrals of services for clients for the network.
- **Sending & receiving referrals:** In a coordinated care system, service providers will route clients to other providers for needed services outside their agencies. The agency best equipped to handle the client’s needs will receive the referral and provide the service. ⁸
- **Holistic intake:** Participants in this study described their intake process as “holistic” when they consider all the needs a client may be experiencing concurrently.

⁷ Saitgalina, M., & Council, D., “Contextualizing Performance of Coordinated Care Network of Veteran Services in Virginia,” *Journal of Social Service Research*, 46(3), 299–312. (2020) doi.org/10.1080/01488376.2018.1560386.

⁸ Gibbons, D. E., & Samaddar, S., “Designing Referral Network Structures and Decision Rules to Streamline Provision of Urgent Health and Human Services,” *Decision Sciences*, 40(2), 351–371. (2009). doi.org/10.1111/j.1540-5915.2009.00230.x.

Method

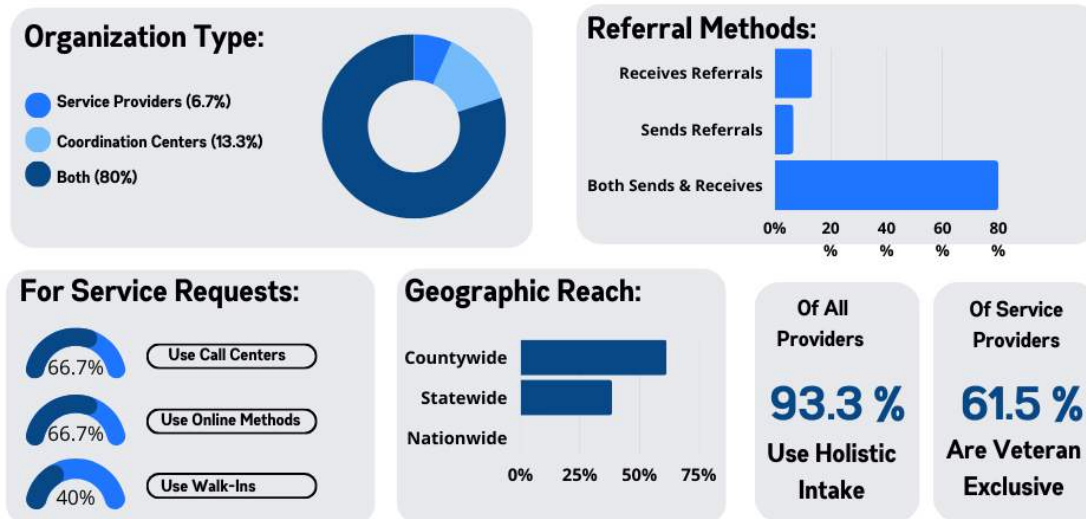
We adopted a mixed-method design, combining qualitative interviews and organizational surveys. To inform the creation of our survey questions, the research team contacted intake specialists from 69 providers in the Dallas/Fort Worth area of Texas via email and cold calls to participate in 30-minute interviews. Of these, 21 participated – a 30% response rate.

Then, we conducted a survey targeting case managers, coordination center employees, and service providers across AmericaServes and Combined Arms networks. The survey was administered using Qualtrics software and distributed via email to 361 participants: 28 coordination center employees from AmericaServes and 333 intake specialists and

providers from Combined Arms. There were 111 responses from providers affiliated with Combined Arms, achieving a response rate of 33%, and 19 responses from AmericaServes, achieving a response rate of 71%. Combined, both organizations provided 130 responses, reflecting a total response rate of 36%. Over ninety-three percent used a holistic intake approach, and 61.5% of providers exclusively catered to veterans. Amongst this sample, 81.11% of respondents identified as service providers, and 63% both sent and received referrals. Moreover, of all service providers, 50% reported adopting a holistic intake approach, and 76.5% catered towards an exclusively veteran audience. See [FIGURES 1 & 2](#) on the following page.

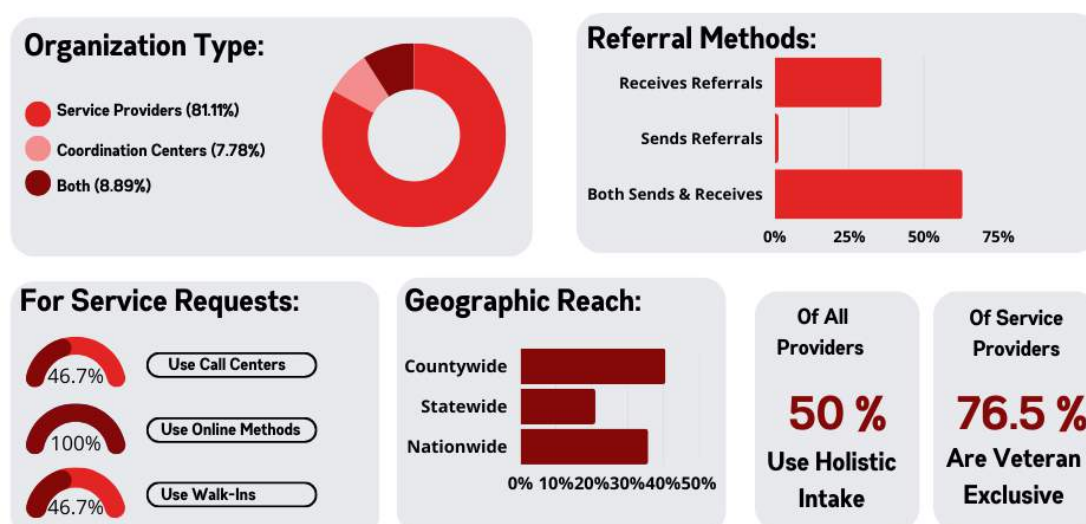


FIGURE 1 AmericaServes Respondent Characteristics



*America Serves demographic statistics, including organization type (N = 15), Referral Methods (N = 15), Service Request Methods (N = 15), Geographic Reach (N = 13), Intake Type (N = 15) & Audience Served (N = 13)

FIGURE 2 Combined Arms Respondent Characteristics



*Combined Arms demographic statistics, including organization type (N = 90), Referral Methods (N = 81), Service Request Methods (N = 15), Geographic Reach (N = 81), Intake Type (N = 86) & Audience Served (N = 81)

Services

In the survey, respondents from Combined Arms and AmericaServes were asked to select the services they offered from a comprehensive list of categories:

- Behavioral Health Assistance
- Clothing and Household Goods ^A
- Community Engagement ^C
- Education
- Employment
- Entrepreneurship ^A
- Financial Advice and Money Management
- Food Assistance
- Healthcare
- Housing and Shelter
- Home Loans and Realtor Assistance ^C
- Home Repair ^C
- Individual and Family Support ^A
- Mental Health Assistance
- Legal Aid
- Recreational
- Social Enrichment ^A
- Spiritual Enrichment ^A
- Transportation
- Unhoused Assistance
- Utilities
- VA & Other Benefits Counseling
- Wellness ^A

^A Unique AmericaServes Services

^C Unique Combined Arms Services

Notes: Please refer to the [APPENDIX](#) for a detailed breakdown of services that differed between the two organizations. For our analysis, we use the highest level of service grouping identified in the network service categorization scheme. This choice meant that some services were in both networks but covered under other categories. For example, entrepreneurship in AmericaServes is included in the highest service groupings. For Combined Arms, entrepreneurship is a subcategory of “career services,” which we harmonized as “employment” across the networks.

Categorizing Services

Based on our initial interviews, we categorized the services into three types of needs: basic, stressors, and nonessential.

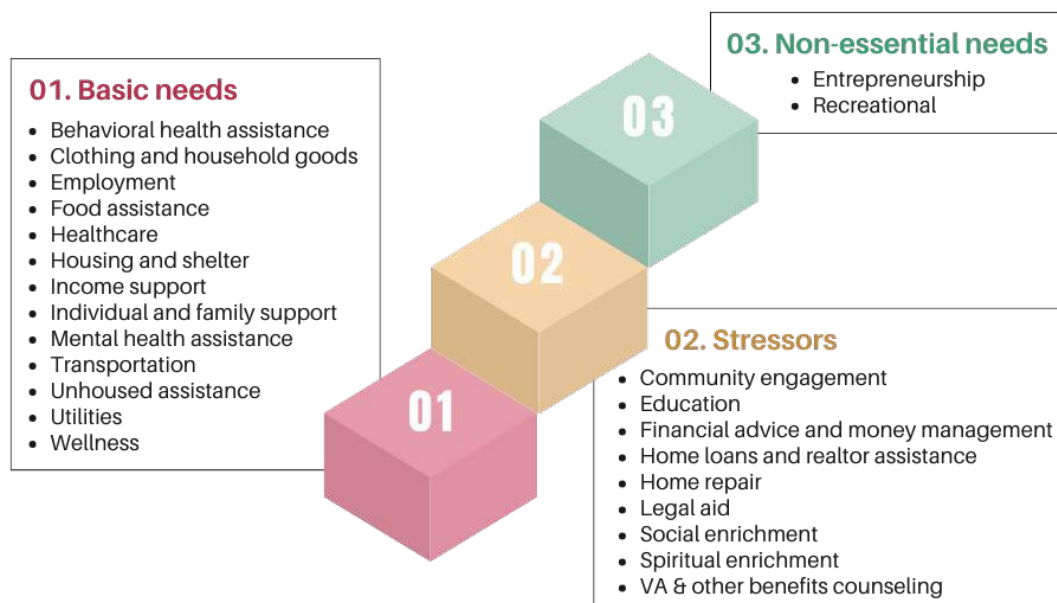
Basic Needs are critical issues that, if not met immediately, can trigger emergencies or catastrophic consequences. As one provider described, “I’m looking for those different things that could make them not successful in the program that we offer with training and employment because all those basic needs have to be addressed first before they can really be successful for career pursuits.” Basic needs are foundational, affecting nearly every aspect of a client’s life and ability to progress.

Stressors are serious needs that must be addressed because they will detract from the client’s ability to focus on other things. These needs couldn’t be addressed, according to participants, unless “some things in that top box (i.e., basic needs) are met prior to going to that second box (i.e., stressors).” These needs are “not as immediate needs but are still important.”

Nonessentials are services that are nice to have but not necessary. One provider interviewee shared, “A lot of the outdoor activities like hunting, fishing... [are] low because I don’t think that a lot of service benefit comes from most of those programs. They’re little weekend trips that don’t help somebody long term.” Although not all providers viewed the nonessentials as having no benefit, providers were consistent in viewing them as not urgent. They may, however, enhance the quality of life for veterans and foster social relationships among veterans.

In surveys, we asked providers to categorize needs into these three categories. The modal response among survey participants is noted in [FIGURE 3](#).

FIGURE 3 Categorization of Needs from Survey Responses



Social Services and Health-Related Services as Basic Needs

Veteran-serving agencies are essential in providing social and health-related services that meet the basic needs of veterans, encompassing services such as behavioral and mental health assistance, healthcare, housing, and employment support. These agencies are fundamental in tackling the social determinants of health (SDOH) outlined by the U.S. Department of Health and Human Services.⁹ These determinants encompass the environmental conditions influencing a range of health and quality-of-life risks and outcomes. By providing cohesive social and health services that address these basic needs, the agencies can significantly mitigate health risks among veterans. Our interviewees emphasized that these basic needs are fundamental for immediate support and long-term veteran well-being. There must be coordination between healthcare and social service agencies to

maximize the impact of these services. Interviewees noted that when agencies collaborate, service efficiency increases. The collaboration between healthcare and social service organizations is crucial for optimizing resource utilization and enhancing service delivery. Thus, this joint effort between organizations optimizes resource use and ensures consistent delivery of essential services, significantly improving the comprehensive welfare of veterans across their needs.

Providing Support for Identified Stressors

Interviewees noted that after addressing basic needs, clients gain the stability to address stressors. Two significant stressors that are often difficult for veterans to access are legal services and financial advice.

⁹ U.S. Department of Health and Human Services. "Social Determinants of Health Playbook." Last modified November 2023. <https://www.whitehouse.gov/wp-content/uploads/2023/11/SDOH-Playbook-3.pdf>.

Navigating the complexities of legal systems can be overwhelming and time-consuming. This perception may deter veterans from seeking legal help despite the existence of clinics and firms that offer discounted or pro bono services. Legal issues may arise due to veterans' unique circumstances, such as disability claims, benefits claims, or family matters impacted by their service-related experiences. Unresolved legal matters can exacerbate stress, leading to mental health challenges, strained relationships, and financial instability.¹⁰ Integrating accessible legal support within other service programs is essential to alleviate this stressor.

Many veterans and military families also face financial challenges due to the transition from military to civilian employment or struggle with managing the financial benefits they receive. The burden of debt, inadequate financial literacy, and unforeseen expenses can lead to anxiety and hinder veterans' ability to rebuild their lives.¹¹ Incorporating financial education, counseling, and assistance programs into veteran services is imperative to help veterans achieve financial stability.

A comprehensive service approach that provides essential resources and supports stressors, like legal services and money management, is needed. Stressors are important and often reflect more significant underlying issues that must be addressed to avoid future basic needs. But these are often longer-term issues that must be addressed over time.

Key Takeaways

Prioritize Basic Needs

Providers identified social needs like food, housing, clothing, and health-related services as basic needs for veterans. Investing in these basic needs fosters long-term well-being and resilience. Collaborative efforts with healthcare and social service providers optimize resources to meet these immediate and ongoing needs.

Address Needs in a Stair-Step Manner

Adopting a stair-step approach can ensure that veterans' support is comprehensive and strategic. The process should begin by addressing basic needs, such as food and shelter, ensuring veterans are stable to accept further support. Establishing this immediate foundational level of care secures the groundwork for improving their overall well-being and prepares them to navigate future challenges.

Once basic needs are met, the focus should shift to alleviating significant stressors, which include services like education, home repair, and community engagement. By providing assistance and reducing the burden caused by these targeted areas, veterans can steadily regain a solidified measure of control over their lives and dedicate more attention to complete recovery.

After managing these concerns, attention can be directed towards nonessential services, including entrepreneurship or recreational needs. These needs may not be urgent, but they can enhance the quality of life for veterans. These nonessential services foster a sense of purpose and fulfillment by allowing veterans to reconnect with their passions as they transition to civilian life.

Implementing this tiered system in a coordinated sequence can guide veterans through recovery and reintegration into society without overwhelming them or overlooking a need after addressing another. Instead, it ensures that each step builds upon increasing progress toward long-term success and fulfillment.

¹⁰ Tsai J, Middleton M, Villegas J, Johnson C, Retkin R, Seidman A, Sherman S, Rosenheck RA. Medical-Legal Partnerships At Veterans Affairs Medical Centers Improved Housing And Psychosocial Outcomes For Vets. *Health Aff (Millwood)*. 2017 Dec;36(12):2195-2203. doi.org/10.1377/hlthaff.2017.0759. PMID: 29200329.

¹¹ Elbogen EB, Zeber JE, Vogt D, Perkins DF, Finley EP, Copeland LA. Financial Status and Well-being in Recently Separated Military Veterans. *Mil Med*. 2022 Feb 27;usac030. doi.org/10.1093/milmed/usac030. Epub ahead of print. PMID: 35253060.

Co-Occurring Needs

For the veteran-serving agencies we interviewed, understanding the co-occurring needs of clients is not just about identifying patterns — it's about recognizing the intricate relationships between these needs and the profound impact they can have on clients' lives. One provider we interviewed said, *"A lot of times, they're spiraling out of control. And if you can help them prevent an eviction, prevent their car from repossession, or even retrieve it post-repossession, these actions can be life changing. Without such interventions, they might feel so desperate as to consider suicide."* This perspective demonstrates that services may not be effective unless these intertwined needs are addressed. In addition, it highlights the significant influence that social determinants of health hold on mental health.

"A lot of times, they're spiraling out of control. And if you can help them prevent an eviction, prevent their car from repossession, or even retrieve it post-repossession, these actions can be life changing. Without such interventions, they might feel so desperate as to consider suicide."

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Research reveals that each additional adverse social determinant of health — categorized into seven distinctions of “violence, housing instability, financial/employment problems, lack of access to care/transportation, and nonspecific psychosocial needs” — increases veterans’ likelihood of suicidal ideation by 67 percent and a suicide attempt by 49 percent.¹² This positive association between adverse social needs and suicide morbidity persists even after adjusting for mental health diagnoses, hinting that the problem lies among the broader spectrum of multiple fundamental social needs beyond solely mental illness. As another interviewed service provider stated, *"When looking at the mental health population, we see these individuals are more likely to be victims of physical abuse. They're more likely to be homeless. They're more likely to have financial issues and...other substance abuse issues. So, we link them to housing; we link them to transportation resources and...financial resources that help meet their primary needs for shelter and food and utilities."*

The social determinants of health are inextricably linked to health outcomes. A holistic approach is needed to address the co-occurring needs that influence well-being, acknowledging that effective support starts from accounting for the multifaceted nature of military-connected individuals’ experiences. In addition, it calls to attention the need for an integrative support system targeting adverse health-related social needs that not only addresses immediate concerns raised by co-occurring needs but also mitigates the long-term severity of suicidal ideation.

¹² Blosnich, J. R., Montgomery, A. E., Dichter, M. E., Gordon, A. J., Kavalieratos, D., Taylor, L., Ketterer, B., & Bossarte, R. M. “Social Determinants and Military Veterans’ Suicide Ideation and Attempt: A Cross-sectional Analysis of Electronic Health Record Data. *Journal of General Internal Medicine*.” *Journal of General Internal Medicine*, 35(6), 1759–1767. <https://doi.org/10.1007/s11606-019-05447-z>.

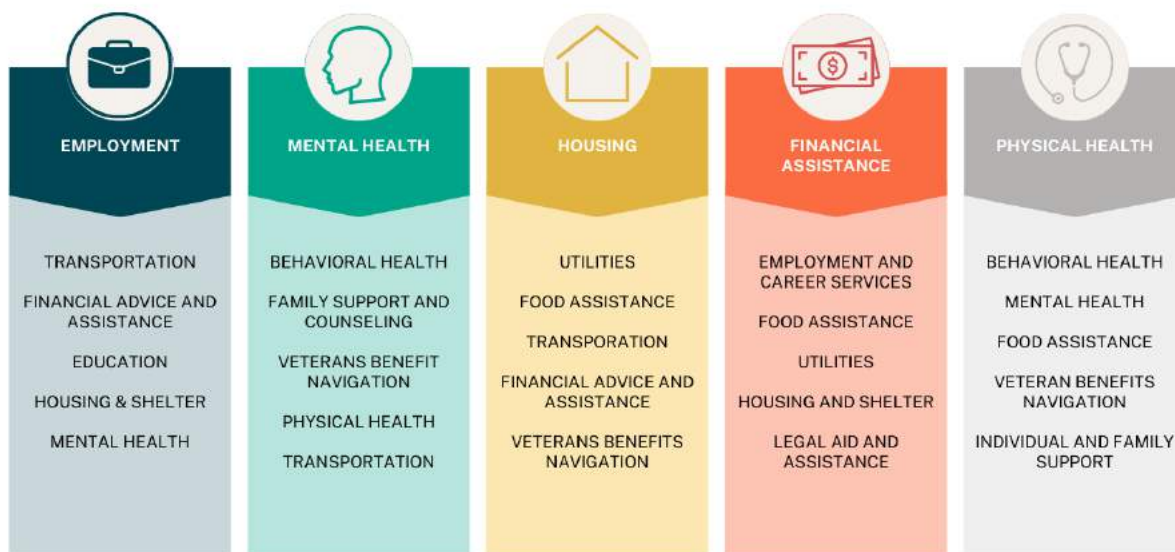
We asked survey participants which needs must be addressed for services in a particular domain to be successfully delivered. To reduce potential bias, we excluded the services the respondents' organization offered.¹³ **FIGURE 4** lists the top co-occurring needs across five critical service domains that must be addressed for the service category to be effective. These domains were determined by identifying the most frequently mentioned as affected by co-occurring needs in the interviews. The specific services that fall under each domain were then determined by analyzing survey data from service providers. For example, if a veteran initially requires employment assistance, this primary need often does not exist in isolation. As the figure below indicates, housing and shelter are frequently identified as a co-occurring need. While the veteran's immediate concern may be finding a job, confirming a stable

living situation is also essential. Effective service provision would simultaneously address the veteran's employment needs and offer support for securing housing, recognizing the interconnected nature of these needs for the veteran's overall well-being.

“When looking at the mental health population, we see these individuals are more likely to be victims of physical abuse. They’re more likely to be homeless. They’re more likely to have financial issues and...other substance abuse issues. So, we link them to housing; we link them to transportation resources and...financial resources that help meet their primary needs for shelter and food and utilities.”

¹³ Note: During the interviews, we found that participants often considered their own program's services to be most prevalent across all needs, regardless of demonstrated levels of co-occurrence. As such, we removed those services from consideration in the surveys.

FIGURE 4 Veterans Co-Occurring Needs That Must Be Addressed for Services to Be Effective



The Interconnected Nature of Mental and Physical Health

In the process of analyzing interview and survey data related to both physical and mental health categories, we uncovered a pattern of co-occurring needs among veterans. For physical health, frequent co-occurring needs include Mental Health, Behavioral Health, Food Assistance, and Veteran Benefits Navigation. For mental health, co-occurring needs frequently include Behavioral Health, Family Support and Counseling, and Veteran Benefits Navigation. These findings illustrate the interconnected nature of physical and mental health, highlighting that these aspects are deeply intertwined within a veteran's life.

Interviews with service providers revealed a consistent call for more holistic approaches that consider the whole individual, not just isolated health issues. By acknowledging the intricate link between mental and physical health, healthcare professionals can collaborate and create holistic treatment plans that address both aspects. This coordinated approach ensures that clients receive comprehensive and well-rounded care, considering their diverse needs. Providing more effective and person-centered care by integrating mental & behavioral health and wellness services is essential, catering to the entire individual.¹⁴ By being mindful of the various co-occurring needs within the mental health category, service providers can offer more tailored support to clients. This collaborative effort ensures that clients remain at the center of their care journey, receiving the support they need to thrive in all aspects of their health.

For instance, a consistent finding in recent research indicates that inadequate family support contributes to greater severity of psychiatric symptoms, depression, post-traumatic stress disorder, and drug use. Conversely, when patients have more robust peer support, there is an initial improvement in alcohol use severity.¹⁵ To optimize treatment strategies and better support veterans' recovery, healthcare professionals must identify areas of social support that may require strengthening, particularly focusing on family dynamics. Recognizing and bolstering these social support areas can help optimize veterans' treatment strategies.



¹⁴ Oster C, Morello A, Venning A, Redpath P, Lawn S. The health and wellbeing needs of veterans: a rapid review. *BMC Psychiatry*. 2017 Dec 29;17(1):414. doi.org/10.1186/s12888-017-1547-0. PMID: 29284431; PMCID: PMC5747125.

¹⁵ Haverfield, Marie C., Mark Ilgen, Eric Schmidt, Alexandra Shelley, and Christine Timko. "Social Support Networks and Symptom Severity Among Patients with Co-Occurring Mental Health and Substance Use Disorders." *Community Mental Health Journal* 55, no. 5 (2019): 768-776. <https://doi.org/10.1007/s10597-019-00396-7>.

Holistic Approaches to Social Needs

Veterans often experience co-occurring social needs as well. However, many veteran-serving agencies offer a limited set of services. Collaboration among veteran-serving agencies, especially human service providers, is needed to address veteran's co-occurring needs.

Enhancing Employment Opportunities

When examining the employment category, the data reveals that Financial Advice & Assistance and Transportation Assistance frequently emerge as co-occurring needs. Based on the interviews, many providers shared that veterans also grapple with financial management and transportation barriers when seeking employment, which can significantly impact their ability to secure stable and fulfilling jobs. Comprehensive support in these areas can improve veterans' financial stability, increase their chances of obtaining employment, and ultimately promote their overall mental well-being. A veteran-serving agency leader who provides job training summarized: *"A lot of times when they need financial assistance, they need training and employment. But I've seen where first they need to get their head right. I provide them financial assistance; in the meantime, they attend our course, and now they work and are self-sustaining."*

"A lot of times when they need financial assistance, they need training and employment. But I've seen where first they need to get their head right. I provide them financial assistance; in the meantime, they attend our course, and now they work and are self-sustaining."

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The survey data shows that effective Financial Advice & Assistance is a fundamental aspect of individuals' lives, and it holds particular significance for veterans navigating their mental health challenges. By providing comprehensive financial resources, such as advice on budgeting, saving, and credit management, alongside job placement and career development services, veterans can gain insights into managing their money effectively. Such programs help veterans make informed financial decisions and attain greater financial stability, keeping them on track to be financially responsible in the long term.

Transportation barriers pose substantial challenges for veterans seeking employment opportunities. Previous research finds a positive association between transportation and employment outcomes, with car ownership significantly increasing employment probabilities.¹⁶ Many interviewees highlighted the significant barrier to employment that the lack of transportation poses for veterans. The veterans without access to private transportation can struggle to reach job sites, severely limiting their job prospects. Service providers are pivotal in enhancing veterans' employment by addressing transportation needs and offering practical solutions.¹⁷ Access to reliable transportation enables veterans to commute to work, attend interviews, and participate in training or educational programs more easily, empowering them to achieve greater economic success.

¹⁶ Bastiaanssen, Jeroen, Daniel Johnson, and Karen Lucas. "Does Transport Help People to Gain Employment?: A Systematic Review and Meta-Analysis of Empirical Evidence, 2020.

¹⁷ Mineta Transportation Institute. "Exploring Transportation, Employment, Housing, and Location Issues for New Jersey Veterans with Disability." Mineta Transportation Institute, San Jose State University. Accessed December 18, 2023. <https://transweb.sjsu.edu/research/Exploring-Transportation-Employment-Housing-and-Location-Issues-New-Jersey-Veterans-Disability>.

Empowering Financial Well-Being

Our analysis of the financial assistance category among veterans revealed that employment services, food assistance, and utilities are frequently co-occurring needs. Providers shared in interviews that financial instability can often start a domino effect, leading to a downward spiral for veterans. Addressing this through targeted employment services enhances job opportunities and addresses broader emotional and stability concerns. Resolving food insecurity through food assistance programs and managing utility expenses can also help prevent these financial crises.¹⁸ Therefore, effective financial assistance is not merely about offering funds but addressing the fundamental issues that lead to financial instability. Such an inclusive approach acknowledges the interconnected nature of financial health, nutrition, housing stability, and employment.

Supportive Housing

The survey data analysis of the housing assistance category revealed five essential services that co-occur as critical needs: Utilities, Food Assistance, Transportation, Financial Advice & Assistance, and Veteran Benefits Navigation. Effective housing assistance is not just providing shelter; it also means expanding the scope of assistance to tailor to an interconnected web of crucial co-occurring needs by offering comprehensive services through supportive housing models. Incorporating principles from the Supportive Services for Veteran Families (SSVF) program, effective housing assistance can extend beyond shelter to include tailored, comprehensive services.¹⁹ The SSVF's use of temporary financial assistance for housing-related expenses exemplifies the supportive housing model, which integrates cost-effective housing solutions with access to various health and human services.²⁰

¹⁸ Sano Y, Mammen S, Houghten M. Well-Being and Stability among Low-income Families: A 10-Year Review of Research. *J Fam Econ Issues*. 2021;42(Suppl 1):107-117. doi.org/10.1007/s10834-020-09715-7. Epub 2020 Oct 25. PMID: 33132672; PMCID: PMC7585735.

¹⁹ Nelson RE, Byrne TH, Suo Y, et al. Association of Temporary Financial Assistance With Housing Stability Among US Veterans in the Supportive Services for Veteran Families Program. *JAMA Netw Open*. 2021;4(2):e2037047. doi.org/10.1001/jamanetworkopen.2020.37047.

²⁰ Rural Services Information Hub. "Supportive Housing Model." June 21, 2018. www.ruralhealthinfo.org/toolkits/services-integration/2/care-coordination/supportive-housing.



It guides veterans through finding housing and acts as an influential driving factor that encourages them to thrive along a path of wellness and self-sufficiency by providing robust wrap-around services. By adopting a supportive housing approach that acknowledges these co-occurring needs, housing assistance providers can better empower veterans to secure stable housing and rebuild their lives.

Integrating employment assistance and money management within housing assistance programs also presents a holistic approach to housing. Service providers emphasized in interviews that while housing is a critical starting point, support extends beyond simply providing a place to live. These sentiments and survey data advocate for a continuum of care where housing is a first step. However, services like job placement assistance and career development resources can follow to empower veterans with the tools to attain sustainable income. Additionally, incorporating money management services equips veterans with essential financial skills, enabling them to manage their finances effectively. This comprehensive support system helps veterans secure stable housing and promotes their long-term self-sufficiency. Moreover, recent research has emphasized the equal importance of addressing social services for homeless individuals, reinforcing the need for a multifaceted approach to housing assistance.²¹

Incorporating veteran benefit support is part of this holistic approach. Veteran benefits can range from healthcare coverage to disability compensation, and these play a pivotal role in a veteran's life. Assistance in navigating these benefits, understanding eligibility, and tackling the often-complex application process is essential. Overall, by addressing the co-occurring needs of housing, employment, and financial stability, housing assistance providers can create a supportive environment that fosters lasting positive change in the lives of veterans.

Key Takeaways

Comprehensive Care Coordination

The interconnection between mental and physical health, employment, and financial stability necessitates an integrative health and social care model. Integrative health and social care in this context involves providing referrals across medical specialties and ensuring that the social determinants of health are addressed as part of routine care. This whole-person care strategy holds promise for addressing critical concerns for veteran populations.

Empowerment Through Financial and Employment Integration

A multifaceted approach to financial assistance and employment support is vital to veterans' financial well-being. Incorporating job placement, career development, financial counseling, and emotional support can create a well-rounded support system for achieving financial independence and resilience.

Supportive Housing Assistance for Lasting Change

Coordinating employment assistance, income support, and household services within housing assistance programs ensures a more complete approach to veterans' housing needs. Supportive housing enhances the quality of life through accessible household items and addressing financial stability to create a supportive environment that fosters self-sufficiency.

²¹ Fleury, Marie-Josée, Guy Grenier, Judith Sabetti, Karine Bertrand, Michèle Clément, and Serge Brochu. "Met and Unmet Needs of Homeless Individuals at Different Stages of Housing Reintegration: A Mixed-Method Investigation." *PloS One* 16, no. 1 (2021): e0245088. <https://doi.org/10.1371/journal.pone.0245088>.

Concluding Thoughts

Military-connected individuals confront an intricate web of challenges. Our research highlights the depth of these needs, emphasizing the vital role of social determinants of health in shaping the overall well-being of this population. Key issues such as food insecurity, financial instability, housing challenges, and their resulting mental health consequences underline the urgency for a coordinated and responsive approach. Veteran-serving agencies and collaborative models, like Combined Arms and AmericaServes, stand at the forefront of this mission, not merely as service providers but as facilitators of holistic, comprehensive care. Their programs and initiatives do not function alone; instead, they create an integrative network responsive to the multi-dimensional nature of veterans' needs. By channeling resources, fostering collaboration, and harnessing expertise, these organizations address immediate challenges and lay the foundation for long-term resilience and success for those they serve.

The efforts of these organizations highlight two fundamental principles that lie at the heart of holistic approaches to veterans' care: communication and understanding. As articulated by an intake provider,

"Communication is what overcomes. We encourage [veterans] to communicate with us, starting with [the] first interaction. We know we can overcome pretty much anything working with them one-on-one, ensuring their success."

"Communication is what overcomes. We encourage [veterans] to communicate with us, starting with [the] first interaction. We know we can overcome pretty much anything working with them one-on-one, ensuring their success."

.....

This statement encapsulates the care that forms the backbone of successful veteran assistance programs. As we strive for a society that helps veterans receive the support they deserve, we must continually assess, innovate, and refine our existing systems. A commitment to open communication, holistic care, and a deep understanding of the social determinants of health will pave the way for a more secure future for our veterans.



Appendix

Interview Guide

Open-Ended Questions

- 1 Which county are you from?
- 2 What services and resources do you typically offer clients?
- 3 What services and resources do you typically refer clients for? Why?
- 4 What combination of services are typically co-occurring? Why?
Do these services complement each other or accelerate the client's progression from one need to the next?
- 5 Is there an order that you recommend to clients that is most typical?
- 6 If this applies, how do clients themselves influence the sequence of referrals?
- 7 How do you evaluate a client's readiness to progress from one stage of service utilization to the next?
Can you give some hypothetical examples?
- 8 Is there anything else you want to add before we move on to the next section?

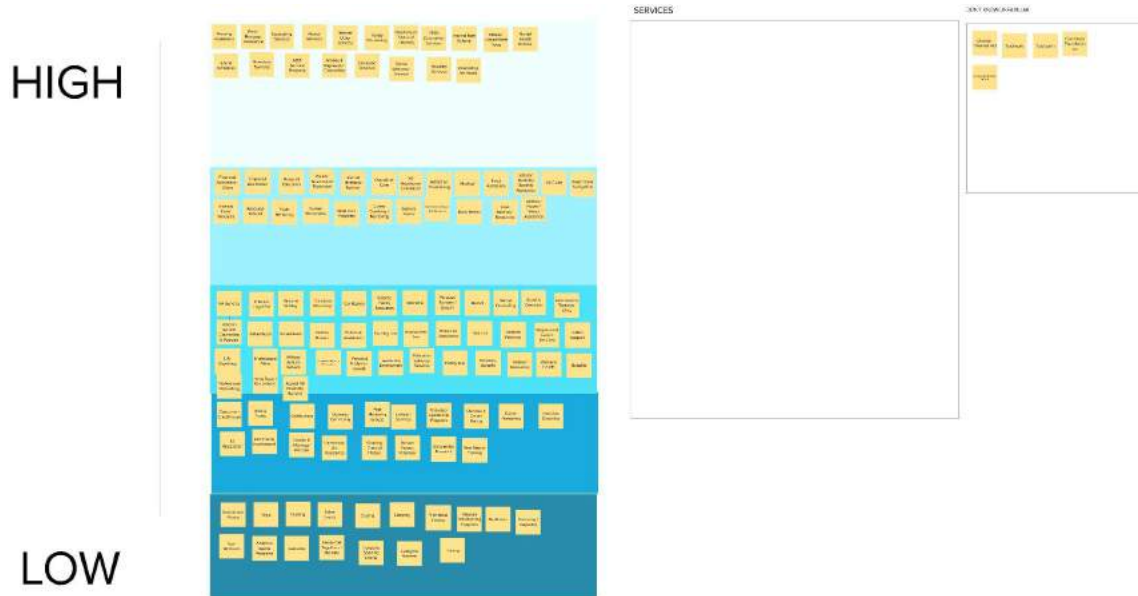


Ranking

Script: We would like you to rank the service groups using this website link to Mural. You can move the sticky notes wherever you'd like when ranking them, and you do not need to go in any order. You can also adjust the size of the sticky notes, zoom in or out, and use other tools to help illustrate your thoughts. Please take your time thinking about your ranking, and please talk out your thought process aloud as well. There may be some programs listed here that you are unfamiliar with. Feel free to put those in the “don’t know” box. Any questions before we get started?

- 1 How many categories did you create?
- 2 What are the different groups you put these services under?
- 3 What are the features of this category made you place these services together?
- 4 Is there anything else our research team should know about these services?
- 5 Are there any providers you have in mind that influenced your ranking for any specific resources?
 - a. For housing?
 - b. For employment?
 - c. For counseling?
 - d. For legal aid?
 - e. *bring up ones that are ranking very high or very low*

FIGURE 5 Example mural board from interview participant. Services are ranked from “High” to “Low.” Services that the participant is unfamiliar with are placed within the “Don’t Know” box.



Survey

The survey first collected data on provider demographics to gain insights into the scope of services offered to clients. The following aspects were assessed:

- **Provider Offerings:** We inquired about the specific services provided by each provider to understand their offerings.
- **Holistic Intake:** We investigated whether providers utilized a holistic intake approach, considering various aspects of clients' needs.
- **Referral Processes:** We examined how referrals were handled by providers, including whether they received referrals, sent referrals, or engaged in both processes.
- **Network Affiliation:** We assessed the network to which each agency belonged.
- **Client Scope:** We evaluated whether providers exclusively served veterans, regional clients, statewide clients, or nationwide clients.
- **Service Delivery Method:** We examined whether providers offered services exclusively in-person or virtually, considering the evolving landscape of service delivery.

After collecting demographic information, the questions varied slightly depending on whether the participant identified themselves as a service provider (e.g., in a veteran serving agency, human service organization, or medical center), a coordination center, or both. The most notable difference between the tracks was that participants who identified as service providers or both were asked about the services they offered to their clients. This information was considered during the subsequent data analysis process.

All survey respondents were first asked to categorize services based on the following criteria:

- 1 **Frequency:** Respondents assessed the frequency of service utilization by their clients.
- 2 **Dimensions:** Respondents classified services based on the dimension of human life improved by the service, including physical, spiritual, emotional, mental, and social/family dimensions.
- 3 **Basic Needs, Stressors, or Not a High Priority:** Respondents defined services as one of these three categories.

The survey respondents were then tasked with clustering services and assessing the co-occurring needs related to employment, mental health, housing, physical health, and finances. Respondents were asked questions such as, "Which of the following services must also be provided for employment assistance to be effective?"

AmericaServes and Combined Arms Services

The survey data collected offers insightful perspectives into the interconnected needs of veterans, service members, and their families. During the survey, participants were given an extensive list of service categories, applicable to all questions. Both AmericaServes and Combined Arms survey respondents were given a similar set of service categories, requiring us to think through the ways that they classify services. The crosswalk below provides our matching which resulted in the service categories used in the survey.

AmericaServes Services	Combined Arms Services
Benefits Navigation	VA & Other Benefits Counseling
Education	Education & Training
Employment	Career Services
Entrepreneurship	Career Services
Food Assistance	Food Assistance
Health	Physical Health & Disability Care
Housing & Shelter	Unhoused Assistance (i.e., homelessness) & Home Loans & Realtor Assistance
Income Support	Financial Advice & Assistance
Legal	Legal Aid & Assistance
Mental & Behavioral Health	Counseling Services
	Mental Health Assistance
	Behavior Health Assistance (i.e., substance use disorders)
Money Management	Financial Advice & Assistance
Physical Health	Physical Health & Disability Care
Social Enrichment	Social & Recreation
Spiritual Enrichment	Social & Recreation
Sports & Recreation	Social & Recreation
Substance Use	Behavior Health Assistance (i.e., substance use disorders)
Transportation	Transportation
Utilities	Utilities
Wellness*	Physical Health & Disability Care
	Mental Health Assistance
Clothing & Household Goods	—
Individual & Family Support	—
—	Home Repair
—	Community Engagement

Wellness Subtype (AmericaServes)	Service Type (Combined Arms)
Alternative Medicine	Physical Health & Disability Care
Health Literacy Classes	Physical Health & Disability Care
Mindfulness & Meditation	Mental Health Assistance
Nutrition Education	Physical Health & Disability Care
Therapeutic Programs & Retreats	Mental Health Assistance
Wellness Expense Assistance	Mental Health Assistance
NA	Mental Health Assistance

* Determined according to subtype (see table in next column)