

Veterans Returning From War Into The Classroom: How Can Colleges Be Better Prepared To Meet Their Needs

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ABSTRACT

Colleges throughout the country are bracing for a large influx of returning veterans over the next couple of years and the question is whether they can meet the needs of this population. There is a paucity of empirical literature on Iraqi and/or Afghan veterans' adjustment in the college arena and the factors that mitigate the attrition rate and facilitate success. This research offers a glimpse into the lives of the veterans returning into college life. An important implication of this research is to better inform educators, mental health professionals and administrators with regard to policy making, program development and restructuring efforts. A qualitative research design using structured interviews to obtain information about returning veterans from Afghanistan and/or Iraq was used in this study. This study discusses the many challenges that soldiers face when they return into the classroom. Experiencing symptoms of PTSD is an issue exacerbating the transition into student life. Campus health and counseling officials should have knowledge regarding symptoms and treatment strategies for PTSD and have an extensive referral list for veterans.

Keywords: Veterans as college students, PTSD

INTRODUCTION

Colleges throughout the country are bracing for a large influx of returning veterans over the next couple of years and the question is whether they can meet the needs of this population. There is a paucity of empirical literature on Iraqi and/or Afghan veterans' adjustment in the college arena and the factors that mitigate the attrition rate and facilitate success. The research literature primarily focuses on student veterans' adjustment post WWII and Vietnam (Ritchie, 1945; Berry, 1977; O'Neill & Fontaine, 1971; Morris, 1947; Moore, 1948; Williamson, 1944; Aaronson, 1949), but not on the more recent wars in Iraq and Afghanistan.

The wars being fought in Afghanistan and Iraq are the most sustained combat operations since the Vietnam War (Litz, 2006). Soldiers are exposed to multiple deployments and extended tours of duty and often pushed beyond their emotional and physical limits. The frequency and length of deployments increases soldiers' vulnerability to combat stress. Other factors affecting this vulnerability are related to the unique circumstances of the war in Iraq which is characterized by unpredictability and no recognizable front line. (Usher, 2006).

This research offers a glimpse into the lives of the veterans returning into college life. An important implication of this research is to better inform educators, mental health professionals and administrators with regard to policy making, program development and restructuring efforts. Although the results of qualitative studies have limited generalizability, clarification of issues and needs of veterans through this study can begin the process of helping colleges be better prepared with regard to veteran programs. A study of this nature is particularly pertinent because of the limited research to date on this very timely issue.

Many Iraqi and Afghan veterans are pursuing vocational and educational interests to build a secure future. The college setting has become the new front line for many of these returning veterans. Military members

depending on certain variables such as length of enlistment, rank and status when leaving the military, and experiences during wartime may experience culture shock resulting from the stark contrast between the military world and civilian institutions such as higher education. They are leaving a world in which authority is absolute, responsibility for actions lies in the hands of superiors and trust is based on life and death. Structure is at the heart of military life and the rules are clear (Black, et. al., 2007).

The conflicts in Iraq and Afghanistan are ongoing. That's why the full the impact the war has had on the mental health of soldiers in Iraq in not yet known. One study looked at members of four United States combat infantry units (3 Army and 1 Marine) who had served in Iraq and Afghanistan. The majority of soldiers were exposed to some kind of traumatic, combat-related situations, such as being attacked or ambushed (92%), seeking dead bodies (94.5%), being shot at (95%), and/or knowing someone who was seriously injured or killed (86.5%).After deployment, approximately 12.5% had post traumatic stress disorder (PTSD), a rate greater than that found among these soldiers before deployment. (Hoge et al., 2004)

Research has shown convincingly that the frequency and intensity of exposure to combat missions is strongly associated with the risk of developing PTSD (APA, 1994) and related impairment (Kaylor, King, & King, 1987). A study by Hoge et al., (2004) evaluated soldiers' reports of their experiences in the war-zones and reports of symptoms of psychological distress. The results of this study indicated that the estimated risk for PTSD from service in the Iraq War was 18%, and the estimated risk for PTSD from the Afghanistan mission was 11%. In many cases, the symptoms of PTSD worsen over time, leaving the victims at higher risk for alcohol and drug abuse, unemployment, homelessness, suicide, and domestic violence (Tyre, 2004).

PURPOSE

The purpose of this exploratory research is to explore the overall adjustment of veterans post-deployment and their transition from military life to the role of college student. An important implication from this study is to make recommendations to better inform colleges with regard to policy making, program development and restructuring efforts. A study of this nature is particularly pertinent because of the limited research to date on this very timely issue. In essence exploratory studies are undertaken to better comprehend the nature of the problem since very few studies have been considered in this area. Structures interviews with veterans enrolled in a community college were undertaken to get a handle on the situation and understand this phenomena.

METHODOLOGY

Subject Population

Ten subjects were recruited to participate in this exploratory qualitative study. The pre-screening criteria were as follows:

1. Participant must be a Queensborough Community College (QCC) student- part or full time.
2. Participant must be an Iraqi/Afghan veteran.
3. Any branch of military will qualify.
4. No gender restrictions.
5. No age restrictions.
6. No distinction between serving in combat or non-combat environment.

Recruitment was conducted at Queensborough Community College. Flyers were posted throughout the Queensborough campus stating that a research study on veterans who served in Iraq and/or Afghanistan will take place during the Spring 2007 Semester. These flyers were also given to veterans who use the services of the Counseling Center. The subjects responded eagerly to this study.

General Statistics on Veterans in Study

Pseudonym	Age	Gender	MOS	Ethnicity
Andy	26	M	Marines/Motor Vehicle Operator.	West Indian
Bill	21	M	Army Infantry	Hispanic
Susan	27	F	Army, Ad. Asst.	Eastern European
Joe	32	M	Marines Infantry	Hispanic
Fred	24	M	Marines Infantry	Hispanic
Sam	26	M	Army, Combat Soldier	Hispanic
Todd	24	M	Marines, Infantry	Asian
Jose	21	M	Military Police	Hispanic
Andres	25	M	Army Reserves	Hispanic
Jim	24	M	Army, Maintenance mechanic and recovery operator	Asian

Research Design

A qualitative research design using structured interviews to obtain information about returning veterans from Afghanistan and/or Iraq was used in this study (see Appendix 1 for interview questions). Qualitative research is useful for generating hypotheses and for obtaining nuanced information about participants' emotional life, perceptions, and thoughts that can't be obtained through other methods (Kruger, 1994). All participants were asked pre-selected interview questions.

All interviews were recorded after being granted permission by the participant. Observations made during the interview were audio-recorded and verbatim transcripts were typed by the principal investigators to ensure validity. Each transcript was read three times by the investigators. Line-by-line coding was used to identify major themes that emerged from the participants' responses. The researchers looked for indicators of categories from the questionnaire (social support, challenges, integrating into society and school...). Once they were found, the researchers named and coded them in red ink in the left margins. All above categories were counted (three times). Representative quotes were selected and rewritten verbatim under each category (e.g., challenges, emotional issues, school services...).

Confidentiality was protected during the interview process by addressing each participant by a pseudonym. This pseudonym was used on the label to identify each tape. All documentation connecting each participant to the pseudonym was stored in a locked cabinet in the office of the interviewer. Only the researchers involved in this study had access.

RESULTS

Reasons for Enlisting

A number of the veterans described having a difficult time staying motivated and focused in high school due to feeling unchallenged, family problems, immaturity, and teenage rebellion. One veteran discussed his hesitancy to apply to colleges, stating that he had no idea regarding what career path he wanted to pursue at the time. At one point during high school he recalled "hating" the idea of military service and had no interest in enlisting. Some of the veterans who had been challenged as a student in the past, were nonetheless motivated by the prospect of the GI Bill and getting tuition coverage for college.

Andy: "I went with a friend who was interested in joining to a military recruiting office around the time of graduation and ended up speaking to a recruiter. I told him my negative thoughts about the military but he challenged me and told me about his experience. He answered every question I asked and I felt like he was really honest. I started to become interested."

Bill: "I always was interested in getting a college degree but was concerned about the tuition. I enlisted as a way to pay for college."

Sam: "I joined the army because in high school I had a fear of math and thought that I wasn't going to make it in college so I figured it was better to join the Army and then get college paid for."

Jim: “My parents were divorced and I grew up with my uncle. I was having personal and family conflicts and hated school so I dropped out. I figured that the Army was the only option left to get my life back in order. My motivation to enlist was to obtain GI Bill benefits to pay for college.”

Some veterans described having a romanticized view of soldiering and an idealized self-image.

Sam: “My father was dead so I was the man of the house, taking care of my little brothers and sisters. I saw myself joining the Army and being a hero and coming home as a man.”

Todd: “I pictured myself to be a soldier like in the movie, Saving Private Ryan. I decided to join because of financial problems; I was promised that the GI Bill would pay for college.”

Jose: “I had no father but was very close to my mother and brothers and sisters. I felt like I had to be the man of the house. As a kid, I watched the military commercials on TV and I saw myself like the young men, brave, strong, serving their country.”

Experience in the Military/ Biggest Challenges/Pivotal Moments

The veterans discussed the mental preparation they went through in order to commit acts in Iraq which sometimes went against their moral code. Self-protective mechanisms included becoming numb or immune to their surroundings and drawing on rage to commit violent acts. Intense emotions alternated with desensitization. The foreign environment and different people made most of them feel very vulnerable and frightened at times.

Andy: “I had to become a different person. The person I became was someone with pure hate in his heart. That’s who you had to become to do what was asked of you. If someone is trying to harm you everyday you naturally develop this anger. You need to have anger to kill somebody. If you’re a nice person you can’t do what is asked of you. You’ll be in conflict everyday.”

Fred: “It was a mental challenge to constantly reinforce in your mind that death is all around and can be at any time.”

Sam: “My biggest challenge was being in combat and being in the middle of death-which became routine. The killing became “mechanical”. I lost three close friends in combat and just became numb. I didn’t have time to mourn. I was in a constant state of anger, violence, rage, stress and fear.”

Todd: “My mental state disintegrated while I was in Iraq. I would repeatedly ask myself, “Why did I join, I made a huge mistake.” I felt depressed and sad but was afraid to tell someone, so I isolated myself as much as I could.”

Jose: “My biggest challenges included 36 hours shifts and not knowing minute to minute if you would be alive. Vivid memories of watching my friend in a humvee die because of a roadside bombing made me numb to death.”

Jim: “My biggest challenge was dealing with the anger of being in Iraq. They kept promising my deployment was over but then kept extending it and it made me very angry and resentful. The higher ranks were delegating me to do everything. I started to become numb to the dead bodies and became immune to the violence that was happening around me.”

Bill: “There were many casualties during the first three months that I was in Iraq. It was so painful seeing the little cots empty after receiving news of a friend’s death knowing that the belongings were going to be packed up and sent to the family. I had a difficult time believing that someone my age who just graduated from HS had died.”

Susan: “The living conditions were abysmal. There were rats, bugs, unbearable heat, no toilets, sandstorms, and freezing nights. I became immune to the explosions which shook the ground and turned the sky pink. I felt very powerless being at base camp and not knowing when/where the mortars were going to be launched from. After I left Iraq, I found out that my unit got hit and there were many casualties. That freaked me out.”

Post-Deployment

The veterans described innumerable ways in which they changed after their military service. The challenges of readjustment entailed coping with PTSD symptoms, depression, physical injury, lack of structure in civilian life, and difficulties with personal relationships and social functioning. Many found it especially challenging being the receptacle for negative public opinion against the war. Some were uncomfortable with the reverence they experienced by civilians. Some veterans upon their return resorted to using maladaptive coping mechanisms. The veterans observed the shifting of their sense of self, the world and personal goals post-deployment.

Emotional Issues

Some veterans described one or more of the typical cluster symptoms of PTSD. (APA, 2000) which they continue to experience three years post-deployment as well as other difficulties that often co-occur with PTSD (such as depression, anxiety, and substance abuse).

Joe: *“When I hear the rain I feel like I am being attacked by mortars. Different sights, sounds and smells can make me feel like I am back in Iraq. Certain things people do, say, or certain emotions can trigger a strong reaction. Anger more than anything triggers a PTSD reaction.”*

Todd: *“One of the most difficult aspects of readjustment has to do with learning how to relax. While in the service I always had to be on guard. I never had a chance to relax my mind and now I am learning to chill out.”*

Sam: *“The most difficult aspect of readjustment is dealing with my anger. I react sharply because I still have quick reflexes. I have an aggressive streak that I am afraid of. One day I had a fight with my baby brother and I started to strangle him.”*

Many describe experiencing emotional highs and lows post-deployment.

Jose: *“I was a passenger in my mother’s car and someone cut us off. I jumped out of the moving car and hurled a glass bottle at the other car. When I came back I felt different, more somber. I look at life more seriously now. I don’t like to express my feelings; everything is bottled up inside. I feel cold-hearted.”*

Sam: *“Readjustment has been difficult because I still have vivid memories and trouble sleeping. For years, the only noise I heard was noise from combat, so when I got home the silence really bothered me. When I am in crowded areas I feel nervous and on guard waiting for something bad to happen.”*

Personal Relationships/Social Functioning

Veterans generally described having a difficult time reconnecting with friends and family upon returning from their military service.

Andy: *“I felt awkward around my civilian friends and when I came back I thought that they had changed but I later realized that I had changed. I had certain expectations about how my friends should act around me and I was often disappointed. I felt uncomfortable at times when they focused their attention on my military experiences.”*

Susan: *“I had a difficult time reconnecting to my friends after I returned from Iraq. I knew I had changed but I hadn’t thought that some of my friends would change as well. I felt like I didn’t have a place in their lives. I couldn’t relate to the friends that changed who were still partying.”*

Bill: *“I cut certain people out of my life since being back...people who were into drugs and had no goals. I met a lot of friends at Queensborough Community College who were on the swim team.”*

Jim: *“Readjustment has been most difficult with regard to connecting with friends and peers. I feel that I have lost so many productive years in Iraq and now all of my friends who are my age are college graduates with good jobs and in relationships or married. I feel like I am starting my life all over again.”*

Joe: *“My aunt has spoken negatively against the military to me. Both of my sisters have rejected me; one married a man who is Muslim. My brother served in the military and expects me to move quickly past this experience, but he was never in combat. It doesn’t compare to what I’ve been through.”*

Sam: *“I have communication problems, especially with girls. In the army you were taught to argue with fists.....how do you argue with girls?”*

A number of the veterans spoke about the challenge of dealing with public discontent or apathy toward the war and negative perceptions of them as soldiers, precipitating a general wariness of others.

Jose: *“The most difficult part of readjustment is the misconceptions people have of me being a muscle head, stupid or violent. This is extremely opposite of myself. I don’t know who to trust, who to have as friends. The camaraderie I experienced in the marines is difficult to find in civilian life.”*

Andres: *“The biggest challenge when I came back was that the country seemed to be moving along but no one was talking about the veterans. You don’t seem to matter. It is difficult dealing with people’s misconceptions that all Iraqi veterans are crazy. Other misconceptions are that the veterans want to be put on a pedestal. Some people are very insulting with their opinions and comments.”*

Bill: *“People think of veterans as killers. People shouldn’t give their opinions unless they have had a combat experience – soldiers don’t care about politics. They just want to protect each other and get home safely. We are involved with humanitarian efforts. People are not aware of what we really do.”*

Maladaptive Coping Mechanisms/Self-Destructive Behavior

A couple of the veterans interviewed described using maladaptive coping mechanisms to deal with the aftermath of military service.

Joe: *“I used alcohol to help me sleep after returning to the states. I couldn’t sleep for ten days straight. I abused drugs and alcohol and experienced many blackouts up until a year ago. I’ve been in jail twice for DUI....and crashed my car into a wall while under the influence.”*

Todd: *“The most difficult part of readjustment was not knowing about VA services to help me with my drug and alcohol problems.”*

Sam: *“I was binge drinking and chain smoking when I came back from Iraq. I thought I had bipolar depression because my emotions were severe and extreme.”*

Post-Deployment Reflections on Sense of Self/World/Personal Goals

Andy described going through a metamorphosis when he returned from Iraq. Feeling very conflicted about what he had done overseas. Andy struggled to make peace with this pivotal chapter of his life. He described experiencing a dichotomous self. Andy spoke about his pre-war self as being fun-loving, happy and good and described his post-war self as rageful. He discussed how the trauma of war irrevocably changed him and the challenge he faced of integrating his two selves to form a new identity.

Andy: *“That person was still inside me and that’s what I had to deal with. I felt like I could snap in a second and the idea of killing someone who angered me wasn’t far removed. You can’t just switch this off. Going to a counselor helped because I came to realize that I can’t go back to who I was before the war.” “When I came back from Iraq, I was convinced that the meaning of life was broader than how I defined it before going to Iraq. My early childhood dream of being a father didn’t satisfy my life’s purpose anymore.”*

Bill described going through a lot of personal changes post-deployment. His sense of self largely revolved around his identity as a student. He discussed the pursuit of a college education as his number one priority. Bill

talked about the pressure that he placed on himself as a result of not receiving financial or emotional support from his family.

Bill: *“I was barely passing classes when I was in high school because of family problems. I didn’t care about my future. After getting educational assistance through the GI Bill, I’ve become very focused and I’m extremely hard on myself. School is priority. My biggest fear is the fear of failure....not being successful.”*

Bill emphasized experiencing a deeper appreciation of everything when he returned from Iraq, comparing himself to the many civilians who take things for granted. *“I appreciate being a student, the importance of feeling safe, food, a warm bed. All I had in Iraq was a little table to put my deodorant on. In Iraq you are stripped of everything so when you come back you realize what you have. I grew up a lot. I became a man.”*

Susan talked about the impact that her military experience had on her sense of awareness and attitude toward learning. *“During my time in the military and afterward, I visited many countries and witnessed extreme poverty firsthand. I don’t take anything for granted anymore. I felt disgusted when I came back to the states and witnessed the wastefulness. Obese people make me so mad. McDonalds made me so mad. I came back to the blackout in NYC during the summer. People were complaining about this which I couldn’t comprehend.” “My military experience has made me more open to learning. I basically threw myself into school. It’s different from before. I want to learn. I get more out of my classes because of my life experiences.”*

Sam talked about experiencing his sense of self as obsequious, yielding to authority as a result of his military experience. *“For a short time after I came back I thought about going to Iraq again because I couldn’t handle civilian life. There was no structure, no one telling you what to do, where to go. I felt lost. I don’t feel normal. I still feel like a soldier.”*

Experience at QCC

Some veterans discussed feeling overwhelmed upon their transition to the role of student, and reported having a difficult time concentrating on their studies.

Many veterans reported that they felt different from their peers at QCC. Feelings of being alone and difficulty identifying with peers were common perceptions.

Andy: *“When I interact with people at QCC who find out I was a marine and in Iraq, their questions that are asked are not always sensitive and I experience this as unwanted attention. I wrote about my experiences as a marine in a journal assignment given by an English professor. The professor shared her admiration but I didn’t want it. She put me on a pedestal which made me feel uncomfortable. She seemed to be happy around me. I am not special; I did what I had to do. It was a job that needed to get done. The breaks my English professor gave me by letting me hand in assignments late felt unfair.”*

Joe: *“I met people at the VA who attempted taking classes at QCC but had to drop out because they felt disrespected by other students and faculty. I’ve had the same experience.... Some students say “thank you” but my history professor didn’t after learning that I was a vet.”*

Fred: *“My history professor brought up the topic of the Iraqi war in class and voiced his strong opinions against the war and the administration throughout the semester. The professor tried to get me to speak out against the war and the Bush administration, knowing that I am a veteran. There was another student in the class who was an Iraqi veteran. The professor tried to pit us two veterans against each other. At one point, the professor asked me in front of the class if I was violent. Afterward, other students in the class made insensitive comments stating that they didn’t care about what happened in Iraq. People have a lack of respect for what veterans have gone through.”*

Sam: *“In the army you never felt alone because everyone is in the same situation. I came to QCC and felt totally alone. I am older than the other students and more serious. The most common question that I am asked is, how many people did you kill? I never answer this question. I feel like I am GI Joe compared to the other students. I*

have associates at school but my closest friends are from the military. The bonds that were formed through the blood, sweat and tears that were shared with my military brothers can't be reproduced with anyone else. I feel so far behind in life and am struggling to catch up. When I see students wearing combat pants, it makes me angry because I start to visualize everything I did in those pants and students are just wearing them as a fashion statement. I want to tell them how much blood and sweat I lost wearing those pants in combat."

Todd: *"The students at QCC ask me stupid questions about the war and I feel that they are so immature. I am bothered by all the stupidity at QCC that I experience from the young students. The biggest misconception is that people think you are crazy to have enlisted and they feel that you will always be violent".*

Andres: *"My peers are immature and whiny and complain over nothing. My experiences have made me into a man and it is very hard to sit in a classroom and to try to learn when you are surrounded by kids who never shared the experiences I had."*

Support Services for Veterans at QCC

The veterans reported having varying experiences with different college offices. One veteran reported having continual problems processing her paperwork at the Bursars Office. Most veterans have attended the Veteran Club which they found very helpful. Unfortunately, most veterans reported that they had to go through the administrative process alone, and would have appreciated more guidance and help.

Susan: *"I had problems at the Financial Aid/Bursars Office every semester regarding processing my Persian Gulf – Veteran Tuition Supplement form. The form was continually processed as a Merit Scholarship form. As a result, I was asked to pay a certain amount of money back to the school each semester which I did not have. I was sent back and forth between the two offices and it was extremely frustrating. The Registrars Office was very helpful in processing paperwork. I made good connections with a couple of counselors in the Counseling Department and attended a Veterans Club that was run by one of the counselors."*

Bill: *"I came to Veteran Club meetings where I met fellow veterans and got referrals for health care and emotional support. I have become part of the swim team and work as a lifeguard to make extra money."*

Joe: *"Many veterans don't know about financial aid, scholarships, medical benefits, and there should be better organization of this information, like a brochure."*

Todd: *"At QCC I had to do everything myself to get my benefits. No one really knew how to help me. VA reps should do more to help veterans enroll, to show them their options and what benefits they're entitled to. I had to do this all myself."*

Jim: *"At QCC I had to do all of the paperwork myself with no help. The hardest part is that my QCC schedule is currently not working out with my National Guard Schedule and I am trying to get a job because I am running out of money. The most helpful thing that CUNY can do for veterans is to help them find jobs and accommodate their schedules."*

DISCUSSION

The influx of veterans entering colleges in upcoming years raises the issue of whether campus officials can meet the needs of this unique student population. During the college enrollment process the rules are not always clear. Veterans have to deal often on their own, with the ambiguity of securing the educational benefits that they were promised by the military. Many veterans are disillusioned by the complexity of rules governing the GI Bill, exacerbating the process of transitioning to college.

Transitioning from the battlefield into civilian life is very challenging for the returning soldier. The veteran enters into a different culture when he or she steps into the role of college student. It may be very difficult for veterans to process the effects of this culture shock on their own, as this change in existence is multilayered with

some obvious differences and some nuanced ones. Experiencing symptoms of PTSD is an issue exacerbating the transition into student life. Re-experiencing war trauma, avoidance/numbing and hyperarousal (APA, 2000) are symptom clusters that can potentially affect a veteran student's ability to deal with the stress of a college education. Physical injuries can be invisible like emotional issues. Veterans may suffer in silence with mild brain injury, hearing impairment, visual impairment or back injuries which can negatively impact their ability to succeed in college. The veteran student may minimize the actual impact of the injury, and feel that asking for help is a sign of weakness (Black, 2007).

Veterans often do not receive mental health counseling which can facilitate their transition, even when they are suffering from a serious mental health disorder. Hoge et al. (2004) found that only 26% of Iraq and Afghan soldiers who acknowledged experiencing acute distressing psychological symptoms actually received mental health care. Homecoming and subsequent interpersonal functioning is often difficult for the veteran especially if he/she was physically wounded during deployment. Younger families may be less prepared to deal with the stress of recovery, rehabilitation and adjustment to a chronic physical disability (National Center for Post-Traumatic Stress Disorder, 2004).

There are a multitude of other issues that present a challenge to the transitioning soldier. These include: learning how to function in a non-structured environment (Mares & Rosenheck, 2004), family discord (Dekel, Goldblatt & Keidar, 2005; Galovski & Lyons, 2004; Hendrix, Erdmann & Briggs, 1998), difficulties with authority (Lubin & Johnson, 2000), issues of perceived support (Greenberg et. al. 2003), and identity issues both as a result of military service (Herman, 1997) and as a result of leaving the military (Clewell, 1987).

The veterans interviewed in this study described innumerable ways in which they changed after their military service. The challenges of readjustment entailed coping with PTSD symptoms, depression, physical injury, lack of structure in civilian life, and difficulties with personal relationships and social functioning. Many found it especially challenging being the receptacle for negative public opinion against the war. Some were uncomfortable with the reverence they experienced from civilians. Some veterans upon their return, resorted to using maladaptive coping mechanisms. The veterans observed a shifting of their sense of self, the world and personal goals post-deployment.

Due to these profound circumstances, some of the veterans reported feeling overwhelmed to the point where they had to drop classes when they first enrolled. When describing their experience of peers and professors, many student veterans painted a portrait of feeling vastly different from those around them and of being painfully alone, without the camaraderie of their military brethren. The sense of aloneness they discussed also pertained to experiencing the unstructured nature of a civilian institution in comparison to the highly organized structure of the military world that they had come from. This ambiguity was very frustrating to the veterans with regard to administrative processes. Some veterans felt that overall, no one was there to guide them through the process of filling out GI Bill paperwork, registering for classes, finding a job, discussing benefits, etc. The veterans found some offices to be more helpful than others. The Veterans Club was mentioned as providing emotional support and referral information.

RECOMMENDATIONS FOR COLLEGES TO BE BETTER PREPARED TO MEET THE NEEDS OF VETERANS:

The purpose of this exploratory study was to obtain information regarding the overall adjustment of the Iraqi, Afghan veteran and on their transition from military life to the role of college student in order to ascertain their needs, and to offer recommendations to the college staff.

Many of the veterans interviewed described feeling alone due to experiencing a lack of support from college officials throughout the administrative process or because they didn't identify with their peers. One recommendation is to erect a Veteran Center on college campuses which would function as a centralized office. This office could be partially staffed by student veterans and could be a storehouse of information pertinent to veterans, i.e. scholarship information, health benefits, etc. Veterans could get help filling out various forms from staff members or get referrals to offices such as the counseling department, tutoring department, or outside agencies.

Having a central office, creates the opportunity for veterans to network with each other and get the social support that they need.

Many veterans in this study reported that attending the veteran club was very helpful and created a supportive atmosphere. It also enabled them to be in the company of other veterans with sharing similar experiences. Veteran support groups should be visibly advertised. A Veteran Group that meets weekly on campus provides another opportunity for veterans to get support.

College counselors should serve a pivotal role in the college community to help students with readjustment issues. They need to effectively help veterans communicate the issues which are most challenging to their success. Counseling these types of students requires a cross-cultural competency on the part of the counselor.

Sensitivity training workshops should be provided to both the student body and faculty, as some veterans have reported that the insensitivity that they had experienced from others has negatively affected them.

Campus health and counseling officials should have knowledge regarding symptoms and treatment strategies for PTSD and have an extensive referral list for veterans. Seventeen PTSD symptoms have been identified. These symptoms are listed in the 4th edition of the *Diagnostic and Statistical Manual of Mental Disorders* (or DSM-IV). These 17 symptoms are divided into three separate clusters. The three PTSD symptom clusters, and the specific symptoms that make up these clusters, are described below (Keane, 2002).

RE-EXPERIENCING SYMPTOMS

- Frequently having upsetting thoughts or memories about a traumatic event.
- Having recurrent nightmares.
- Acting or feeling as though the traumatic event were happening again, sometimes called a "flashback."
- Having very strong feelings of distress when reminded of the traumatic event.
- Being physically responsive, such as experiencing a surge in your heart rate or sweating, to reminders of the traumatic event.

AVOIDANCE SYMPTOMS

- Making an effort to avoid thoughts, feelings, or conversations about the traumatic event.
- Making an effort to avoid places or people that remind you of the traumatic event.
- Having a difficult time remembering important parts of the traumatic event.
- A loss of interest in important, once positive, activities.
- Feeling distant from others.
- Experiencing difficulties having positive feelings, such as happiness or love.
- Feeling as though your life may be cut short.

HYPERAROUSAL SYMPTOMS

- Having a difficult time falling or staying asleep.
- Feeling more irritable or having outbursts of anger.
- Having difficulty concentrating.
- Feeling constantly "on guard" or like danger is lurking around every corner.
- Being "jumpy" or easily startled.

OTHER COMMON SYMPTOMS OF POST-TRAUMATIC STRESS DISORDER

- Anger and irritability
- Guilt, shame, or self-blame
- Substance abuse

- Depression and hopelessness
- Suicidal thoughts and feelings
- Feeling alienated and alone
- Feelings of mistrust and betrayal
- Headaches, stomach problems, chest pain

The treatment options that staff should be familiar with are: (The National Center for PTSD).

- **Cognitive therapy:** In cognitive therapy, your therapist helps you understand and change how you think about your trauma and its aftermath. Your goal is to understand how certain thoughts about your trauma cause you stress and make your symptoms worse. With the help of your therapist, you will learn to replace these thoughts with more accurate and less distressing thoughts. You also learn ways to cope with feelings such as anger, guilt, and fear.
- **Exposure therapy:** In exposure therapy your goal is to have less fear about your memories. By talking about your trauma repeatedly with a therapist, you'll learn to get control of your thoughts and feelings about the trauma. You may focus on memories that are less upsetting before talking about worse ones.
- **EMDR:** Eye movement desensitization and reprocessing (EMDR) is a fairly new therapy for PTSD. While talking about your memories, you'll focus on distractions like eye movements, hand taps, and sounds. For example, your therapist will move his or her hand near your face, and you'll follow this movement with your eyes.
- **Group therapy:** In group therapy, you talk with a group of people who also have been through a trauma and who have PTSD. Sharing your story with others may help you feel more comfortable talking about your trauma. This can help you cope with your symptoms, memories, and other parts of your life. Group therapy helps you build relationships with others who understand what you've been through.

Flyers should be posted around campus offering the following information:

Help for U.S. veterans with PTSD: *If you're a veteran suffering from PTSD or trauma, you can turn to your local VA hospital or Vet Center for help. Vet Centers offer free counseling to combat veterans and their families. To find out more about the resources and benefits available to you, you can also call the VA Health Benefits Service Center at 1-877-222-VETS.*

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APPENDIX 1- INTERVIEW QUESTIONS

The questions that were included in the interview were divided into three categories as follows:

I. *Description of Service*

- Describe what you were doing in your life prior to your military service?
- What made you decide to go into the service?
- What was your role in the military?
- Describe your experiences in the military?
- What were the biggest challenges?
- Pivotal moments?
- What are some common misconceptions about you, the military, the current administration, etc. that non-military people have?

II. *Post-Deployment*

- How are you different as a result of your military service?
- Describe how you are relating to family, friends, peers, post-deployment?
- In what areas of your life has readjustment been most difficult?
- How would you describe your emotional life post-deployment?
- Have you gotten any professional counseling to process your military experiences?

III. *Experience at City University of New York (CUNY) Queensborough Community College (QCC)*

- How would you describe your experience of being a college student post-deployment?
- What experiences have you had if any with faculty and students' reaction to the Iraqi war and your military experience?
- Are your needs at CUNY being met and if not, how can CUNY serve your needs more adequately?
- Career goals

NOTES