

Improving veterans' overall health and academic success

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About two-thirds of veterans using Veterans Affairs Department education benefits earn a degree or complete a certificate or training program. The remaining third drop out, however, overcome by challenges in transitioning from service member to student.

Now a study led by a [health](#) services researcher at the University of California, Riverside offers a solution: peer-led services, which, the researcher says, are ideal for connecting student [veterans](#) to resources and healthcare services.

"Peer-led supportive services offer veterans a sense of community and have the potential to increase retention rates and help ensure [academic success](#)," said Ann Cheney, an assistant professor in the Center for Healthy Communities in the School of Medicine and the lead author of the study that appears in the fall 2016 issue of *Progress in Community Health Partnerships: Research, Education, and Action*.

She explained that many university campuses already have supportive services for students.

"But these most often are neither veteran-initiated nor veteran-led," she said. "Some veterans are deterred from accessing these services because of values and attitudes promulgated within the military, such as self-reliance and pride."

The research paper stresses that veteran-led programs connect students

with fellow veterans and veteran faculty members who share military experience.

"Such faculty members can help veteran students transition from the military's rigid structure to that of a student, which tends to be more self-directed," Cheney said. "By seeking help from VA and community providers and researchers, campus communities can play a vital role in improving veterans' overall health and well-being and academic success."

The study was conducted at six campuses in rural Arkansas to describe challenges and lessons learned in the first year of a VA/Student Partnership for Rural Veterans project. To develop veteran-to-veteran services, Cheney and her colleagues leveraged established community advisory boards. They also collaborated with student services, faculty with vested interest in veteran health, and leaders of student veteran organizations.

"Engaging veterans, campus leaders, and community stakeholders in grass-roots efforts to develop peer-led services and resources that are locally tailored to the needs of veterans can result in long-term collaborations and sustainable programs," Cheney said. "Supportive services can help veterans transition into higher education and potentially set them up for academic success, but the evidence base still needs to be established. This study leads us one step closer to understanding the value of peer-led services for our most recent generation of veterans."

Cheney sees the process of engagement described in the paper as an ideal way to engage members of at-risk [student](#) groups and the community to build partnerships to develop peer-led services for students in need of supportive services.

She was joined in the research by co-lead Justin Hunt and several researchers in Arkansas: Tracy H. Abraham, Angie Waliski, Shane

Russell, and Cliff Hudson, at the Central Arkansas Veterans Healthcare System, North Little Rock; Steve Sullivan, Dianne Swaim, and Caleb Lewis at the Central Arkansas Veterans Healthcare System Chaplain Services, North Little Rock; and Brian Candler and Sonya Hall at the VA/Student Partnership for Rural Veterans Community Partner.

The study, initiated in 2013, was supported by the VA Office of Rural Health and the South Central VA Mental Illness Research Education and Clinical Center.

A medical anthropologist with research experience in mental health and substance use health services, Cheney researches health disparities in underserved, primarily rural, populations, including women, veterans, ethnic and racial minorities, and immigrants.

More information: Ann M. Cheney et al. Using Community Advisory Boards to Build Partnerships and Develop Peer-Led Services for Rural Student Veterans, *Progress in Community Health Partnerships: Research, Education, and Action* (2016). [DOI: 10.1353/cpr.2016.0042](https://doi.org/10.1353/cpr.2016.0042)

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