Community Engagement Methods Related to Veteran Studies: A Scoping Review

Ayse Torres, Katherine Freeman-Costin, Kenneth M. Frankel, and Danica Garbett

Abstract

Community engagement in research enhances a community's ability to address its own needs and challenges while ensuring that researchers understand community priorities. Some confusion exists about the definition of community engagement in the context of veteran research. The purpose of this study was to search the literature to identify common applications of community engagement in U.S. veterans' research and to determine how and at what stage veterans were involved in the research process. A systematic scoping review was conducted using CINAHL Plus, Wiley Cochrane Library, Education Source, ERIC, APA PsycInfo, National Library of Medicine PubMed, ProQuest Social Services Abstracts, and SocIndex by two independent investigators. Forty-two of 1,977 studies from initial searches were included in this review. From these studies, we identified two aspects of veterans' involvement in research characterized as "community engagement": (a) veterans as participants and (b) veterans as partners in the research process. There is a need to encourage veterans' engagement and to standardize reporting of their engagement in the various phases of the research process.

Community engagement is defined as "the process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or similar situations to address issues affecting the well-being of those people" (Clinical and Translational Science Awards Consortium, 2011, p. 7). In general, the goals of community engagement are to build trust, enlist new resources and allies, and create better communication as successful projects evolve into lasting collaborations. Community-engaged research (CEnR) significantly enriches the research process by offering direct insights into the lived experiences of community members, thereby ensuring that investigations are rooted in the realities of those affected. CEnR can also foster a sense of ownership and empowerment among community members, as they are actively involved in the research process and in shaping its outcomes (Minkler, 2005a).

The past 2 decades have been marked by increased community involvement in the research process. CEnR is increasingly promoted in the literature and in academic programs with a community–academic partnership focus (Key et al., 2019). Actively engaging communities in research to a more significant degree allows the context in which people live to be considered in designing research studies and setting priorities among research questions. This research approach is guided by the ecological model, in which people are seen as nested in an array of ever more complex social and environmental systems, including families, neighborhoods, communities, and nations. CEnR offers a form of research most beneficial for contextual dissemination and translation of scientific discovery (Barkin et al., 2013).

Researchers and practitioners need to understand the cultural dynamics of specific groups and institutions to build relationships, identify ways to collaborate effectively, and encourage respect and trust. This is an ongoing effort for all involved in the community engagement process (Harrell & Bond, 2006; Minkler et al., 2005b; Shoultz et al., 2006). Communities are not homogeneous entities; they are made up of diverse groups with different histories, social structures, value systems, and cultural understandings of the world. To achieve successful collaboration with a community, all parties involved need to strive to understand the viewpoints of community members, whether they are affiliated with a neighborhood, religious institution, health practice, community organization, or public health agency. The key to developing such an understanding in a CEnR health sciences context is recognizing one's own culture and how it shapes one's beliefs and understanding of health and illness (Harrell & Bond, 2006).

The main objective of this study was to gain a deeper understanding of how the community

engagement approach is employed in the context of veteran research. Given the distinctive nature of the veteran population, as will be elaborated in the following section, our study examined the definitions and application of community engagement in research within the veteran community.

Veteran Studies and Community Engagement

The veteran population is distinctly different from larger U.S. society (Coll et al., 2011). Veterans' shared experiences in the military (i.e., training, reporting structure, exposure to harm, adherence to personal codes of conduct) often result in a deeply ingrained sense of camaraderie, mutual understanding, and shared identity. These factors often shape their worldview and influence their relationships and interactions within the broader community. Understanding these unique aspects is crucial for developing engagement strategies that resonate with this population and will pave the way for more inclusive and effective research methodologies.

Upon entering the military, servicemembers are systematically trained to develop a new sense of self-confidence and a military identity that supplants civilian orientations (Kintzle et al., 2018). Ultimately, the development of a "strong and stable identity" (Grojean & Thomas, 2006, p. 52) appears to be the prime goal of military training. Military culture has its own values, customs, ethos, sense of selfless duty, codes of conduct, and implicit patterns of communication (Burke, 2004). The collectivist approach encourages interdependence, group orientation, and group cohesion (Hoge et al., 2006). Joining the military offers a profound sense of purpose and provides individuals with structure, support, and the ability to thrive. The military instills a sense of direction and empowers its members to fulfill their potential (Petrovich, 2012). This distinct culture allows service personnel to cope with the isolation, ambiguity, danger, powerlessness, boredom, and intense workload that characterize military operations (Bartone, 2006).

For some individuals, separating from the military can result in an "identity crisis" (Higate, 2003, p. 102; Hunniecutt, 2022), or a culture shock in which individuals unable to resocialize appear to equate their discharge with being powerless (Higate, 2003). While transitioning to civilian life, veterans face a wide range of issues, such as homefront stressors (e.g., family, occupational problems; Elnitsky et al., 2017; Haselden et al., 2019), redefined roles within the family and community (McCormack & Ell, 2017), moral

injury due to postcombat deployments (Pyne et al., 2019), adjustment to service-related disabilities (Olenick et al., 2015), and chronic physical and psychological pain (Flynn et al., 2019; Phillips et al., 2016; U.S. Department of Veterans Affairs [VA], 2015). Neither the complex military culture nor the difficulty of this reintegration process is well understood by civilians (Angel et al., 2018). Therefore, engaging veterans in the planning and implementation of research activities and dissemination of results can increase the credibility and relevance of findings and lead to higher quality, veteran-centered, evidence-based services that are more readily adopted and implemented. However, we do not know how frequently this type of research occurs.

In general, "veteran engagement" refers to the meaningful, bidirectional involvement of veterans in the research process. In this context, veteran engagement is not limited to veteran participation as subjects of a study. Their engagement can and should include their participation as active stakeholders who contribute to the direction of a study during the planning, execution, and/or dissemination phases (Safdar & Brys, 2017). Various terms are used in the literature to describe community engagement related to research involving veterans; however, these definitions are unclear, and their prevalence is unknown. Wendleton et al. (2019) explored the relationship between community-based participatory research (CBPR) and CEnR in the context of veteran engagement in research. The authors stated that although these approaches share common goals (Clinical and Translational Science Awards Consortium, 2011), they are distinct. They described veteran engagement in research as not a study design but rather a theoretical perspective with CBPR and CEnR. Collectively, CBPR, CEnR, and veteran engagement in research aim to encourage collaboration among researchers and the communities they study.

In the past decade or more, emphasis has grown on engaging with community-based partners to enhance the patient-centeredness of research efforts (Wendleton et al., 2019). The Patient Protection and Affordable Care Act of 2010 played a significant role in fostering this momentum by establishing the Patient-Centered Outcomes Research Institute. This institute offers grant funding, training, and technical support to researchers who are dedicated to involving stakeholders in their work. Similarly, the VA Office of Research Protections, Policy, and Education,

along with the Health Services Research and Development Service and its Centers of Innovation for Veteran-Centered and Value-Driven Care, have influenced research priorities and practices through the National Workgroup on Veteran Engagement and the publication of a guide on establishing Veteran Engagement Groups (Fletcher et al., 2022).

Furthermore, numerous researchers have actively involved veteran cohorts throughout the research process from the initial design phase to the dissemination phase. For instance, Franco et al. (2016) collaborated with both academic and veteran partners to develop a survey investigating veterans' utilization of VA services. Chua and Evans (2018) documented their collaborative experiences in a 6-month exploratory ethnographic research project that involved semistructured interviews and focus groups. Their objective was to provide a detailed account of the research process while contemplating its implications. They shared their observations and reflected on the potential benefits that arise when faculty researchers share responsibility for the research agenda, process, and actions with veteran student researchers. In another study, VA researchers partnered with 45 veterans with traumatic brain injury (TBI) and 26 of their family caregivers on a participatory action research study that used photovoice methods to explore and convey experiences of community reintegration after TBI (True et al., 2021). Interview data and images captured by the participants were used to communicate stories, reflections, and insights. The authors concluded by sharing participants' recommendations to support community reintegration after military service–related TBI. This study demonstrated the power of participatory action research to engage veterans and family caregivers in generating knowledge to inform the programs, policies, and public discourse that affect their lives.

In recent years, there has been an increasing focus on engaging patients in research within the research centers of the Veterans Health Administration (VHA). This involvement, referred to as veteran engagement, encompasses a range of interactions between veterans and VA researchers, from consultation to collaboration on study ideas, question development, and study design. Rather than being mere research participants, veterans are partners who work alongside researchers to foster trust, establish collaborative communication, and ensure that the veteran perspective is actively represented in VA research

and research center priorities. For instance, Wendleton et al. (2019) outlined approaches for implementing veteran engagement groups and shared experiences, strategies, and lessons learned in involving local veterans in research activities across six geographically diverse VA facilities. They emphasized the importance of future directions to enhance research engagement, including the integration of strategies that maximize opportunities for veteran involvement at both the local and national levels. Similarly, the UCLA/VA Center of Excellence (COE) on Veteran Resilience and Recovery developed a veteran engagement group that was unique in recruiting homeless-experienced veterans with behavioral health issues to solicit guidance about studies funded by the COE or conducted by affiliated investigators (Fletcher et al., 2022). Additionally, Fletcher et al. (2022) outlined the development, operation, and impact of veteran engagement groups; highlighted best practices for stakeholder engagement; and addressed the challenges associated with shared leadership in research.

A recent special issue of the *Journal of Community Engagement and Scholarship* emphasized the limited representation of authentic voices of veterans and their families in the research literature. The editors recognized the importance of including the perspectives of servicemembers, veterans, and their families, as their lived experiences offer valuable insights to the scientific community. The special issue presented a diverse range of perspectives through scholarly contributions and shed light on the transition experience, veterans' and researchers' rvision for social change, evidence-based engagement models, and cultural competency in researching issues within the veteran community (Hamner et al., 2021).

Purpose

The primary objective of this study was to explore the existing literature in order to identify and categorize the various common applications of "community engagement" within the specific context of veterans' research. Additionally, the study aimed to investigate the extent of veterans' involvement at different stages of the research process, including research design, data collection, interpretation of findings, dissemination, and more. By exploring these details, this study provides readers a better understanding of the various aspects of community engagement in veterans' research and its impact on research outcomes.

Methods

Protocol

The study protocol for this scoping review was adapted from the Preferred Reporting Items for Systematic Review and Meta-Analysis–Extension for Scoping Reviews protocol (PRISMA-ScR; Tricco et al., 2018). Scoping reviews, a type of knowledge synthesis, use a systematic approach to map evidence on a topic and identify the main concepts, theories, sources, and knowledge gaps. The PRISMA-ScR was developed according to published guidance by the Enhancing the Quality and Transparency of Health Research (EQUATOR) Network for the development of reporting guidelines (Tricco et al., 2018). The protocol is publicly available at http://www.prisma-statement.org/Extensions/ScopingReviews.

Inclusion and Exclusion Criteria

Articles included in this review met the following inclusion criteria, which were determined at the outset: empirical studies (quantitative, qualitative, and mixed-methods studies were included in order to consider all types of community engagement) that (a) were published in a peer-reviewed journal; (b) were written in English; (c) included U.S. veterans in the research process; and (d) included community engagement in the research process. We also included studies that involved secondary analysis of veteran databases because the data originated from the veterans themselves. Theses or dissertations were included to reduce the potential effects of publication bias. Commentaries, opinion pieces, review articles, and meta-analyses were excluded from the final set of articles. In addition, articles that focused on international contexts outside the United States and those that involved active military personnel were excluded.

Information Sources and Search

Psychology, health care, education, social sciences, and social services databases were accessed to cover the scope of this review. The following eight databases were included in the search: EBSCOhost CINAHL Plus, Wiley Cochrane Library, EBSCOhost Education Source, EBSCOhost ERIC, APA PsycInfo, National Library of Medicine PubMed, ProQuest Social Services Abstracts, and EBSCOhost SocIndex. In addition, the interdisciplinary Directory of Open Access Journals (DOAJ) was searched to include the *Journal of Veterans Studies*, a recent peer-reviewed open access journal published by Virginia Tech that is not yet included in other major indexing and abstracting databases. Search terms for all databases included at least one identifier for U.S. military veterans and at least one identifier for community engagement in the article title, abstract, and/or key words. The final search algorithm used was "'community engagement' OR 'civic engagement' AND 'Veterans.'" Searches were not limited by publication type, and controlled vocabulary was not utilized to maximize the number of items retrieved. Search results were added to private groups in Mendeley, a reference management software, with subfolders for each database, and the full text of each article was added through the library's collection or obtained through interlibrary loan.

Selection of Sources of Evidence and Data Charting

Database searches for this scoping review were executed from their inception through September 2021. The search results were inclusive of all dates covered by each database, from the earliest date covered through the most recent update at the time of the search. This comprehensive search strategy ensured the inclusion of all potentially relevant studies. The initial search and transfer of studies to the Mendeley system were conducted by the third author, who is both a librarian and a veteran. The first two authors independently screened all references and applied the inclusion criteria. To increase consistency among reviewers, the two reviewers performed pilot calibration exercises on a random sample of 100 references. Specifically, each reviewer applied the inclusion and exclusion criteria to a common set of titles and abstracts. The reviewers met to discuss whether each article was included or excluded and to assess the level of agreement. The aim was to reach agreement on at least 90% of the articles. Regular meetings were set up to discuss discrepancies, and the process was repeated until the predefined goal of 90% agreement was reached. Once the reviewers reached this level, they proceeded to screen the full set of titles and abstracts. This calibration process was used to clarify and revise the inclusion criteria.

The process of data extraction in a scoping review (data charting) involves the use of a clear and comprehensive data charting form designed a priori to extract relevant information from the included sources of evidence (Tricco et al., 2018). Both reviewers screened all the publications, discussed the results, and amended the screening and data extraction manual. The reviewers independently developed a data charting table

format to extract the relevant information for the screening process. Titles and abstracts were screened using the same criteria to identify studies eligible for inclusion. If the reviewers were unsure about the title and abstract description, the full article was reviewed. If a conflict arose at any stage during the article selection and screening process, the reviewers resolved the difference via discussion until a consensus was reached. Articles were only included when the reviewers reached agreement. In the final stage, all full-text articles were reviewed at least once by each reviewer. Figure 1 shows the systematic process of initial selection, screening, and review, resulting in the final sample of studies included in this scoping review.
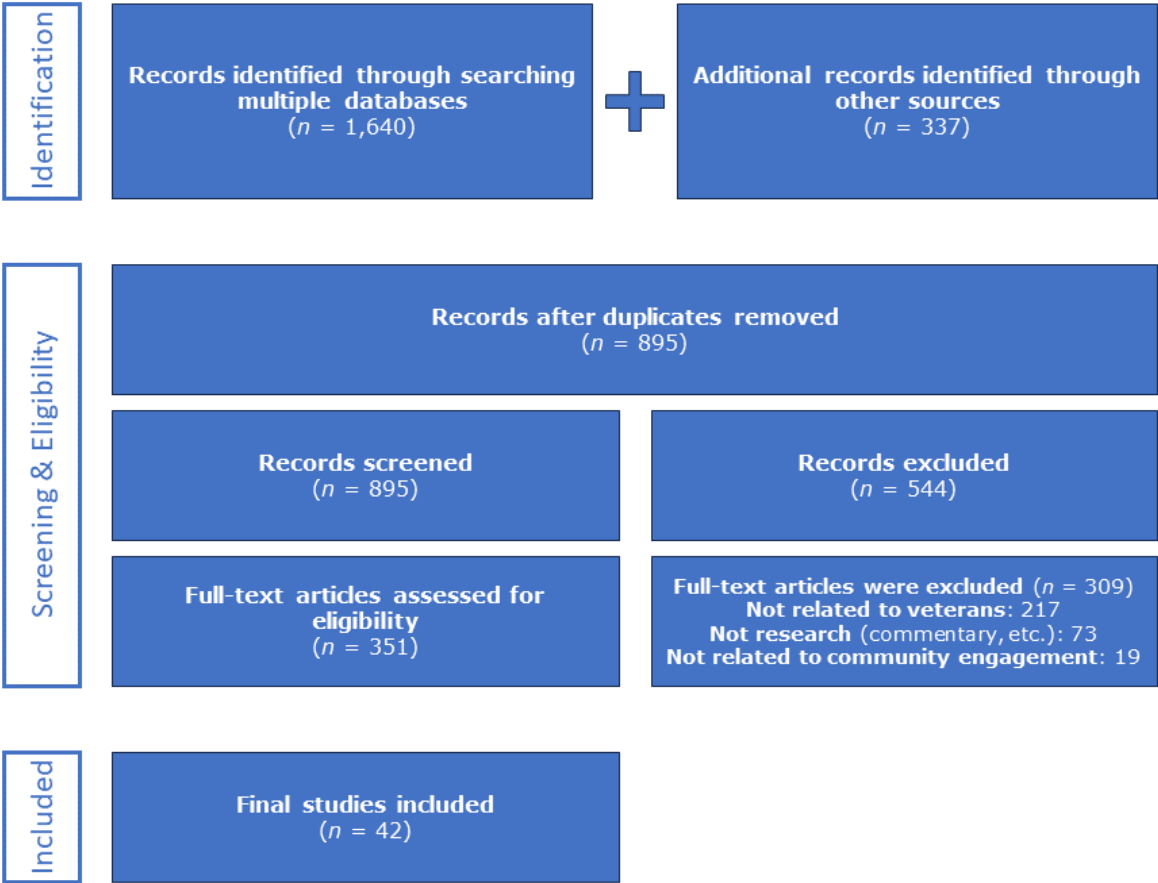
Results

In this scoping review, we identified a total of 1,977 published studies. Of these, 1,640 publications were gleaned from prespecified databases, and the remaining 337 were derived from the references from these articles. After duplicates were removed from the 1,977 studies, 895 studies were reviewed. Based on the study inclusion and exclusion criteria, 544 studies were eliminated. We analyzed the full text of the remaining 351 studies, of which 309 publications were excluded based on the following reasons: (a) 217 studies were not related to veterans even though the word "veteran" was included in the publication (e.g., one or more authors were affiliated with the VA); (b) 73 studies were not research and were often commentaries; and (c) 19 studies were not related to community engagement. The final sample comprised 42 studies identified for inclusion based on the research question and inclusion criteria. All 42 studies are listed in Appendices 1 and 2 with annotations including citation, research design, and type of community engagement activity utilized.

In this study, our objective was to categorize definitions of community engagement applied in veterans' research rather than to determine the

Figure 1. Summary of the Screening Process

Identification

Records identified through searching multiple databases
(n = 1,640)

+

Additional records identified through other sources
(n = 337)

Screening & Eligibility

Records after duplicates removed
(n = 895)

Records screened
(n = 895)

Records excluded
(n = 544)

Full-text articles assessed for eligibility
(n = 351)

Full-text articles were excluded (n = 309)
Not related to veterans: 217
Not research (commentary, etc.): 73
Not related to community engagement: 19

Included

Final studies included
(n = 42)

relative effectiveness of specific strategies used. We critiqued each article in the final list of 42 studies based on how community engagement activities were utilized, and two groups of studies emerged. The first group comprised a total of 8 studies (19%). Veterans in this first group were full partners in the research process from development of research methodology, to the conduct of the study, to the dissemination of findings. The second group comprised a total of 34 studies (81%). Veterans in these studies were recruited as participants; provided data through surveys, focus groups or semistructured interviews; and participated in cross-sectional, prospective cohort, or randomized clinical trial designs.

Discussion

This scoping review used standard systematic review methods to identify research studies with key terms "community engagement" or "civic engagement" as they related to research involving veterans. We found that the concept of community engagement of veterans embodies two definitions. The first pertains to studies that include veterans in overarching decision-making activities of study design, recruitment methodology, interpretation of findings, and/or dissemination of results to stakeholders. The second definition pertains to the limited involvement of veterans as participants in research studies; in this role, participants follow research protocols to provide data for analysis and interpretation by others. We found that there were more than four times as many articles involving veterans as participants as there were articles involving veterans as research partners.

It is crucial to understand that veterans form a unique community with specific experiences and perspectives that can greatly enrich community-engaged scholarship. Veteran partnership in research offers numerous advantages, including the opportunity for deeper insights and a more nuanced understanding of the veteran experience. However, it is equally important to consider other communities that could benefit similarly from active partnership in research processes. We encourage readers to reflect on different groups, populations, or communities and consider how their community engagement in the research process would compare to that of veterans.

The findings of this study reinforce the idea that research is substantially enhanced when the community under study is incorporated into the research process (Franco et al., 2021; Hamner et al., 2021). The articles reviewed provide some notable examples of this approach. For instance, veterans have been included as active participants, co-researchers, and even as the primary authors of several studies, contributing their valuable insights and perspectives. This active involvement not only elevates the quality of research findings but also ensures that the research remains grounded in the realities of the community. Because of the diversity of experiences and characteristics among veterans relative to the civilian population, their participation as full partners in research will not only help further veterans' access and utilization of military benefits and networks but also educate the population to help obviate persistent inaccurate images of veterans.

Limitations

A systematic review of the literature linked to community engagement sparks a comprehensive debate on the definition of CEnR. While this research is not itself community engaged, it provides a thorough review and evaluation of published research articles concerning veterans, thereby expanding the knowledge base and fostering a deeper understanding of the dynamics of community engagement with veterans. We believe that this will catalyze more inclusive and meaningful research practices in the future. This scoping review represents a transition from participant-focused veteran research to veteran partnerships in the research process. Given the relatively recent introduction of guidelines and interventions to promote veteran engagement in the research process, future research will allow evaluation of how these enhance the research process.

This study has several limitations. First, due to the limited number of publications involving veterans as partners in the design and implementation of research activities, it is not possible to assess trends in inclusivity over time. Second, there is a lack of documentation regarding the extent of veterans' involvement in various aspects of the research process. Not all source articles described the methodology used for recruiting veterans or the level of involvement of veterans in research planning and execution. However, to obtain the necessary information and themes, both investigators independently reviewed each article multiple times before analysis.

Conclusion

The findings of this study support previous literature that highlights the value of veteran CEnR as

an emerging methodological approach. By actively involving veteran communities (including veterans, their families and caregivers, and members of the community in which veterans reside) throughout the research process, researchers in veterans' studies can ensure that their findings hold meaning and relevance for the intended beneficiaries (Fletcher et al. 2022; Franco et al., 2021; Hamner et al., 2021; True et al., 2021; Wendleton et al., 2019).

Reasons cited as to why veterans abstain from serving as partners in research and/or as research participants include that they (a) are unfamiliar with both research processes and measures protecting them as human subjects and (b) are unaware of opportunities to participate (Flynn et al., 2019). To help counteract these barriers, it is recommended that veterans who express an interest in partnering on research projects receive training in clinical research methods including protection of human subjects. This education will be valuable to bolster their role as full partners in research; they will better be able to inform protocol design, including prioritization of research questions, and to participate in developing and implementing methodologies for recruitment, data collection, interpretation of findings, and dissemination of results.

We strongly support training of interested veterans in research methodology to increase their effectiveness as partners in research, and we encourage veterans' programs and institutional review boards or ethics committees to pursue veteran partnerships in all aspects of research involving veterans. To optimize the research process and outcomes, we also strongly recommend that researchers engage in additional training focused on the distinctive nature of military life and the resulting identity formation. Acquiring an in-depth understanding of these factors is paramount not only for ensuring effective research but also for nurturing relationships with veterans as research partners. This enhanced comprehension fosters empathy and respect, ultimately promoting a more effective and meaningful engagement with this unique population.

Finally, the articles derived in this review present varying degrees of veteran involvement, raising the question of whether they all meet the criteria for community-engaged scholarship. Not all studies that involve community members are necessarily community engaged. The field may need to reconsider how community-engaged scholarship is defined to ensure accurate categorization and recognition of this research approach. Developing well-defined criteria for "community-engaged scholarship" through collaboration with veterans can greatly strengthen future research endeavors. Establishing clear guidelines can enhance the quality and effectiveness of scholarly pursuits. This would likely result in clearer guidelines for researchers and offer a more precise framework for assessing community engagement in future studies. We encourage efforts to standardize the reporting of criteria to document veterans' involvement in each phase of the research process.

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About the Authors

All authors are affiliated with Florida Atlantic University. Ayse Torres is an associate professor of clinical rehabilitation counseling, Katherine Freeman-Costin is the biostatistics core leader in the Institute on Healthy Aging and Lifespan Studies, Kenneth M. Frankel is the head of research and instructional services at the Wimberly Library, and Danica Garbett is a graduate student specializing in clinical rehabilitation and mental health counseling.

Appendix 1. Partnering With Veterans to Develop Research Methodology for Conduct and Dissemination ($N = 8$)

Author/date	Study design	Participants	Methods of community engagement/results
Flynn et al., 2019	Qualitative Descriptive	$N = 283$ veterans $N = 101$ community stakeholders	U.S. veterans could engage in discussions of research priorities, barriers to partnerships, recommendations for engaging other veterans, and dissemination preferences. The outcomes of this veteran-centered community engagement project demonstrated that veterans want their voices to be heard regarding aims, designs, recruitment activities, and dissemination plans related to veteran-focused research.
Gorman et al., 2018	Qualitative	Over a 9-month period, an average of 8.5 veterans attended each meeting, for a total of 2236 veteran engagements across seven towns.	In seven target communities, certified peer specialists initiated and facilitated weekly "Veteran Coffee Socials"—open peer support groups for veterans held in local coffee shops or restaurants. After the initiation of a Coffee Social, the development of social support appeared to be an autonomous mechanism propagated by attendees whose relationships evolved over time, with limited or no encouragement required from the facilitator.
Hooyer et al., 2020	Qualitative and quantitative survey	$N = 3$ veterans $N = 139$ nonveterans	Community-engaged theater codesigned by veterans and aimed at training medical/allied health students on the unique experiences of combat veterans. Results suggested that interactive, performance-driven dissemination can provide deeper learning experiences regarding stigmatized groups who experience trauma.
Krause-Parello et al., 2019	Qualitative focus groups and engagement activities	$N = 22$ veterans $N = 16$ veteran friends and/or family $N = 22$ veteran service providers $N = 10$ stakeholders	Over 70 stakeholders of various backgrounds from the veteran community participated in discussion groups and engagement activities over a period of 33 months, split into three tiers. Evaluating and disseminating such strategies may lead to successful interventions that are more readily adopted by veterans, thereby reducing the burdens of mental illness and suicide in this population.
Krause-Parello et al., 2021	Qualitative and community engagement project	$N = 15$ veteran volunteers $N = 50$ veterans $N = 8$ National Advisory Board members	A patient-centered approach to research facilitated a partnership between patients, as the end users, and the research team. This partnership allowed input from patients—veterans in this case—about the acceptability of the treatment modalities to be investigated, the research design, and the selection of dissemination venues. Ninety-six percent of veterans exhibited overall satisfaction with the modules. Veterans also expressed increased willingness to participate in research projects.

Appendix 1. Partnering With Veterans to Develop Research Methodology for Conduct and Dissemination (*N* = 8), continued

Author/date	Study design	Participants	Methods of community engagement/results
Mamon et al., 2020	Quantitative and qualitative questionnaire	*N* = 12 veterans *N* = 88 community audience members	Engagement with veterans to plan and participate in a community event in an attempt to decrease isolation and suicide and increase quality of life. Survey data indicated an increase from pre to post in positive attitudes toward veterans as well as a shift in the veterans' perspective of civilians as receptive and supportive.
Monteith et al., 2020	Evaluation of community-based suicide prevention program	Rural veterans	Team developed a community-based suicide prevention program for rural veterans called Together With Veterans (TWV). TWV involved collaborating with rural veterans and their communities to implement community-based suicide prevention. TWV best practices aligned with most, but not all, of the strategies in the VA National Strategy for Preventing Veteran Suicide. By supporting and facilitating local veteran leaders and their community partners in increasing suicide prevention knowledge, public awareness, and resources, the researchers proposed that TWV offers an acceptable and feasible approach that builds on the strengths of rural communities.
True et al., 2021	Evaluation: community-engaged research (CEnR)	Veteran investigators, veteran collaborators, caregivers	Community-engaged research (CEnR) is defined as approaches that include community stakeholders—veterans—as collaborators on research that affects them. Veterans can act as employees or volunteers who act as informal gatekeepers by vetting researchers before passing on recruitment materials to other veterans. Personal experiences indicate that the VA's investment in engaged research provides a platform for building relationships that can lead to improved individual veteran and community participation and trust in research and in the VA.

Appendix 2. Recruitment of Veterans as Participants (*N* = 34)

Author/date	Study design	Participants	Methods of community engagement/results
Albright et al., 2020	Cross-sectional study	*N* = 112,158 students *N* = 2658 student veterans	Servicemembers and veteran students were more likely to engage in volunteerism than their nonveteran counterparts. Additionally, student veterans and nonveteran students reported that engagement in volunteer efforts both reduced their feelings of depression and increased their use of mental health services.
Baird et al., 2018	Randomized controlled trial (study protocol)	*N* = 60 veterans (> 5 years discharged)	The study aimed to address an important public health issue by evaluating the initial efficacy of an integrated prescription. The results will inform whether or not veterans would be willing to engage in a community-based program as well as whether or not such a program would be beneficial in reducing community reintegration difficulties. The expected findings should provide initial effect size data for Physical Activity and Community Engagement (PACE) and thus provide the necessary data for a large-scale follow-up trial.

Appendix 2. Recruitment of Veterans as Participants (*N* = 34), continued

Author/date	Study design	Participants	Methods of community engagement/results
Bennett et al., 2019	Qualitative findings following quantitative assessments	*N* = 72 veterans with schizophrenia enrolled *n* = 56 of these completed the study	Significant improvements were found on the Defeatist Performance Attitudes Scale with medium to large effect sizes. Negative symptoms (Clinical Assessment Interview for Negative Symptoms [CAINS]; Motivation and Pleasure) also showed significant reduction with large effect sizes at all assessment points, and positive symptoms also showed significant reduction by week 24. This study suggested that mobile apps can strengthen psychotherapy, and targeting defeatist attitudes in participants with schizophrenia who have persistent negative symptoms can lead to improvement in motivation and pleasure negative symptoms.
Blonigen et al., 2020	Web-based surveys and semistructured interviews	*N* = 12 patients	Purpose was to revise the Step Away app to dissuade hazardous drinking based on qualitative assessments by veterans using the Method for Program Adaptation through Community Engagement M-PACE model. Usability ratings of the individual modules of Step Away were uniformly positive across patients and peers, as was the perceived utility of the app overall. Stand Down may serve as an innovative, low-cost means of expanding access to care for veterans who engage in hazardous drinking.
Bryan et al., 2019	Forum	*N* = 4 veteran engagement group members	This project demonstrated that stakeholder engagement is a valuable process when developing culturally appropriate marketing materials for mental health treatments.
Chinchilla et al., 2020	Semistructured interviews and focus groups	*N* = 14 Housing and Urban Development–VA Supportive Housing (HUD-VASH) staff *N* = 9 veterans residing in project-based housing *N* = 9 veterans residing in tenant-based housing	This research identified factors that influenced the community integration of formerly homeless veterans housed through HUD-VASH. The results show that several HUD-VASH participants viewed their initial housing placements as temporary and reported notable neighborhood safety concerns, which made them less likely to engage with their surrounding community. HUD-VASH participants working on recovery also reported focusing on their personal needs and limiting contact with others dealing with similar issues. Staff respondents also noted the importance of community integration but did not feel that it was a high program priority. Study findings suggested that PSH programs would benefit from greater flexibility in the timeline for voucher use and increased access to a variety of neighborhoods, e.g., engagement with landlords to increase participation in HUD-VASH.
Clair et al., 2021	Focus groups	*N* = 9 homeless-experienced veterans in a residential rehabilitation program for substance abuse	The findings suggested the need for health systems to support clients in taking an active role in communications, provide additional technical and social support in transitioning to virtual health services, and offer alternative means for clients to maintain social connection during a pandemic. Understanding clients' perspectives can inform strategies to promote continuity of care and enhanced care experiences.

Appendix 2. Recruitment of Veterans as Participants (*N* = 34), continued

Author/date	Study design	Participants	Methods of community engagement/results
Cmerek, 2019 (Thesis)	Online survey	*N* = 255 combat veterans	The results indicated that prediction for successful community reintegration may depend upon the identification of key associations, including postdeployment support, education, rank, and the reason an individual transitioned out of military service. Findings may also provide policymakers with information about the community reintegration process, which may be used to improve reintegration efforts of combat veterans transitioning back to civilian life for positive social change.
Dindo et al., 2020	Qualitative interviews at 1 and 3 months	*N* = 58 veterans	On quantitative self-report measures, veterans who attended a workshop reported reductions in distress and PTSD symptoms as well as improvements in functioning, reintegration, and psychological flexibility 1 month following the workshop and also 3 months following the workshop. Within-group mean changes from baseline to 3-months follow-up were in the small range for distress and functioning on the OQ-45 (Cohen's *d* = −0.37), PTSD symptoms (Cohen's *d* = −0.28), and psychological flexibility (Cohen's *d* = −0.22) and in the medium range for meaning and purpose (Cohen's *d* = .40) and reintegration (Cohen's *d* = −0.45).
Francis & Kraus, 2012	Qualitative and quantitative survey	Student and employee veterans	Veterans differed from other students because they were more likely to be older and married with children, had college expenses covered by the GI bill, and felt more isolated; they wanted change faster and needed thorough communication and validation.
Fuchs et al., 2014	Qualitative: building a research framework for service and experiential learning	*N* = ~10 St. Joseph's College Faculty/ Staff; St. Joseph College Representatives; VA Medical Center Representatives; Long Island State Veterans; Home Representatives	The emphasis on patient-centered care and curricular and cocurricular programs that enhance both quality of life and the well-being of everyone involved continue to be the driving force behind the initiative's success. As echoed in their responses, veterans, students, staff, and faculty all reported positive interactions and reciprocal benefits. Students who expected to help veterans often were surprised by how much more they received in the process.
Gant-Clark et al., 2015	Focus groups	*N* = 20 veterans	Study revealed the need for education outreach to patients and providers about the HIV screening process. Communication barriers exist on both sides. However, both groups agreed that education was paramount to increasing the screening rates and, thereby, increasing early detection and treatment.
Godfrey et al., 2018	Prospective cohort study involving 8-week course/ intervention	Women veterans	Preliminary data showed decreases in somatization, levels of fear, and sadness. Increased levels of joy and authenticity also emerged. Students reported that the course replaced and/or supplemented the therapy they were receiving or that the course placed them on a path that makes them feel more amenable to receiving mental health services.
Goldshore et al., 2020	3-arm pragmatic randomized controlled trial	*N* = 782 veteran participants	Mailed fecal immunochemical test screening promotes colorectal cancer screening participation among veterans without a recent primary care encounter. Despite the addition of reminder calls, an invitation letter was no more effective in screening participation than was screening during outpatient appointments.

Appendix 2. Recruitment of Veterans as Participants (*N* = 34), continued

Author/date	Study design	Participants	Methods of community engagement/results
Griffith, 2020	Cross-sectional study: large scale sample	*N* = 95,650 veteran and nonveteran students	Veterans were more likely than nonveterans to have ever voted and registered to vote. However, when veteran background was considered in comparisons, differences were not observed.
Hodges, 2017	Qualitative: explanatory interviews	*N* = 10 Marine Corps veterans *N* = 7 Marine Corps drill instructors	Five major themes regarding Marine basic training that emerged during interviews with Marine Corps drill instructors and veterans were the following: teamwork, loyalty, leadership, communication, and creative problem solving. This article suggested that enlisted Marine veterans are well equipped to engage in such civic activities, which could play a pivotal role in healing the wounds of war and aiding in their reintegration.
Hyde, 2015 (Dissertation)	Quantitative data and qualitative interview	*N* = 7 veterans	Results showed that participants, the majority of whom also had at least one incidence of traumatic brain injury, reported many useful tasks their service dogs performed on their behalf. Participants' responses analyzed using phenomenological inquiry also pointed to four main themes within their lives that service dogs had changed: (a) providing hope, (b) increased exposure, (c) commitment and structure, and (d) socially responsible community engagement. Evidence from this study suggested that service dogs increased social and occupational functioning affected by PTSD but only anecdotally affected clinical symptomatology of PTSD. Results of this pilot study suggested that placement with a highly trained service dog for PTSD may be of benefit, especially when combined with a modified evidence-based treatment protocol.
Kopacz et al., 2019	Online survey	*N* = 61 nonfaith-based veterans *N* = 27 faith-based veterans	No significant differences were noted between respondents for self- reported confidence in responding to health care issues/concerns or engagement with veteran populations. Faith-based respondents were found to provide significantly less mental health, suicide prevention, education/outreach, and other services, while providing significantly more spiritual care.
Leedahl et al., 2011	Qualitative	*N* = 12 male veterans *N* = 8 family members	The perceived benefits of VFW membership identified in this study were consistent with the psychosocial mechanisms (e.g., social support, social influence, social engagement, person-to-person contact, and access to resources and materials goods) that influence health and well-being identified in the Berkman et al. (2000) framework for social network theory.
Littman et al., 2018	Focus groups	*N* = 89 veterans	Participants identified three criteria that motivated a decision to participate in health-related research: (a) adequate compensation, (b) desire to help other veterans, and (c) significance and relevance of the research topic. For many, both sufficient compensation and a sense that the study would help other veterans were critical. The importance of transparency arose as a key theme; veterans communicated that vague language about study aims or procedures engendered distrust. Lastly, participants expressed a desire for studies to communicate results of their specific health tests as well as overall study findings, back to research participants.

Appendix 2. Recruitment of Veterans as Participants (*N* = 34), continued

Author/date	Study design	Participants	Methods of community engagement/results
Medunjanin et al., 2019	Retrospective serial cross-sectional study	Veterans who have received care through VA services	Diabetes prevalence 2007–2012 was lowest in urban (20.5–21.0%), followed by highly rural (21.1–22.1%) and rural (22.3–23.0%) areas, with the prevalence being significantly higher on the insular islands (31.0–32.4%). In 2012, 41% of urban, 43% of rural and highly rural, and 30% of insular island veterans were obese. Relative to urban areas, the odds ratio for prevalent diabetes was 1.10 (95% CI: 1.08, 1.12) for rural veterans, 1.19 (95% CI: 1.16, 1.23) for insular island veterans, and 1.00 (95% CI: 0.98, 1.02) for highly rural veterans.
Melillo et al., 2019	Longitudinal qualitative and quantitative study; community-engaged research (CEnR) and ethnographic (study protocol)	*N* = 30 veterans and servicemembers with a TBI *N* = 13 family caregivers *N* = 11 CR specialists *N* = 16 key stakeholders *N* = 82 community events	This 5-year longitudinal mixed methods study used both a community-engaged research (CEnR) approach and an ethnographic approach. Interviews and observations were coded and analyzed using hierarchical coding schemes and thematic analysis. Analyses included data from surveys, interviews, and participant observations. Content analysis was used to highlight the complex social context of reintegration and to triangulate quantitative data. Egocentric (personal) social network analysis was used to examine the support system a veteran or servicemember had in place to facilitate reintegration. Study enrollment and data collection are completed. Data analyses are underway.
Mitchell et al., 2016	Qualitative	*N* = 28 veterans	Using a case exemplar, authors described their experiences with the planning, refinement, and initiation of a research study that used photo-elicitation interviews to assess the health care experiences of homeless and marginally housed U.S. veterans. They discussed practical issues and recommendations related to study design, logistical "pitfalls" during study execution, and ensuring human subjects protections in the context of a study with a highly vulnerable patient population taking place in a highly risk-averse research environment.
Morales et al., 2019	Qualitative in-depth interviews	*N* = 30 student veterans	Perceiving vulnerability through the lens of risk and weakness can have a detrimental impact on student-veterans' participation in qualitative research. Ethics review boards should expand their understanding of vulnerability to fully capture its nuance and complexity in the research process. These broader ideas of vulnerability also need to be disseminated to institutional agents who provide researchers access to vulnerable groups.
Noble et al., 2021	Survey	*N* = 103 student servicemembers and veterans (SSM/V)	Study results suggested that self-stigma is a barrier to psychological help seeking for SSM/V. SSM/V bring diversity of experience to higher education in addition to valuable leadership training, problem-solving skills, focus, and an orientation toward service learning. SSM/V may also deal with stigma regarding psychological help seeking as they simultaneously balance the identities of military and college students.
Proctor & Krusen, 2017	Interviews	*N* = 7 LGBTQ+, over age 50, U.S. veterans	Four common issues emerged from the data suggesting areas for further action research in relation to community services: communal meals, transportation, housing, and the coming-out process.

Appendix 2. Recruitment of Veterans as Participants (*N* = 34), continued

Author/date	Study design	Participants	Methods of community engagement/results
Reilly et al., 2019	Quantitative	*N* = 11 veterans	Results indicated significant changes due to cognitive behavioral therapy in subjective sleep measures, including reduced reports of insomnia from pre to post intervention, improved sleep quality from pre to post intervention, and sleep-related functioning from pre to post intervention. Among the objective measures, unexpectedly, objective sleep time significantly decreased from pre to post intervention. There were no significant changes in percent REM sleep or sleep efficiency.
Shipley et al., 2021	Phenomenological study with survey	*N* = 37 participants	Results indicated that art expression provided a way to reflect on the effects on the country, families, and individuals affected by 9/11.
Sickler, 2019	Quantitative (pre-post)	*N* = 32 third-year interior design students	This collaborative experience empowered students not only in service of the veterans but also in the way they honored them through exhibit design. Results suggested that students were eager to impact the community they served through meaningful exchange rather than passive service. Art and design activities enhanced veterans' health and wellness outcomes.
Sweeter, 2015	Qualitative	*N* = 10 interviewees	This investigation culminated in the introduction of the Communication, Alliance, Leadership, and Leverage (C.A.L.L.) to Action Model of Community Engagement, which demonstrates the confluence of factors that were integral to the alliance's success in eliminating chronic homelessness among veterans in Maricopa County, Arizona. This qualitative case study used the method of elite or in-depth interviews and grounded theory to investigate the factors present in community engagement that achieved its purpose. It served as a foundation for future inquiry and contributions to the base of knowledge, including (a) additional qualitative case studies of homeless alliances in other communities or of other social issues addressed by a similar public-private alliance; (b) quantitative methods, such as a survey of the participants in this alliance, to provide triangulation of the results and establish a platform for generalization of the results to a larger population.
Teeters et al., 2020	Online survey	*N* = 164 servicemembers/ veterans (SSM/V) *N* = 456 civilian college students	Negative binomial regressions indicated no significant differences in number of days of past month cannabis use or past-year cannabis-related problems between civilian students and SSM/V, although SSM/V reported more past-year cannabis use disorder (CUD) symptoms. Moderation analyses revealed that at elevated levels of anxiety, SSM/V students used cannabis more frequently than civilian students.

Appendix 2. Recruitment of Veterans as Participants (*N* = 34), continued

Author/date	Study design	Participants	Methods of community engagement/results
Vaudreuil et al., 2020	Qualitative	Professors and students from Berklee College of Music; Lira Child Soldiers; male veteran; female veterans from residential facility; Creative Forces music therapist; servicemembers	Participants positively responded to music therapy and community music engagement through telehealth. They reported decreased pain, anxiety, and depression. They endorsed that telehealth was not a deterrent to continued music engagement, requested continued music therapy telehealth sessions, and recommended it to peers.
Wasmuth & Pritchard, 2016	Quantitative and qualitative (longitudinal)	*N* = 7 veterans	Participation in a theater intervention resulted in considerable improvements in social and occupational participation for up to 6 weeks, suggesting that this community-engaging form of occupational therapy may be beneficial for people recovering from substance use disorders who are in need of new social and occupational opportunities. No notable change was found in general self-efficacy scale. Drug test data demonstrate that overall drug use among active participants declined.
Yonkman & Bridgeland, 2009	Cross-section; survey	Operation Enduring Freedom and Operation Iraqi Freedom veterans	Relatively few veterans felt their transition to home was going well; volunteerism was very important. Community leaders should initiate public campaigns to reach out to and identify veterans who need to be better engaged in civic activities, build partnerships to better enlist veterans in meaningful service, and set concrete goals for their enlistment in volunteer service and integration back into community life.