

MEASURING OUR COMMUNITIES:

The State of Military and Veteran
Families in the United States

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Center for Regional Development
Advancing Collaboration : Energizing Regions



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Introduction

Around the country, communities are invested in supporting military and veteran families. While eager to show their support and provide resources, community members, nonprofit organizations and policymakers may ask “Where do I begin?” Time and money are limited, and whenever organizations are considering programs and services, data are needed to help understand military and veteran families, identify gaps in services and make educated decisions for strategic planning and grant preparation.

Approach: *Measuring Communities* is an online social indicators project aimed at shaping community efforts to support military and veteran families. *Measuring Communities* focuses on both places and people. The goal of *Measuring Communities* is to assist community-based organizations working in the military and veteran space by providing data to inform their efforts. Data can help users to better understand the characteristics of places where military and veteran families live. It can also help users to gain a better understanding of the people who are part of the fabric of these places.

The *Measuring Communities* online tool is organized according to the *Community Blueprint*, which considers key domains of activity in communities that provide support for military-connected families. Data from more than 30 diverse, reliable, and nationally-representative sources provide military-specific information about communities according to these specific domains: medical,

behavioral health, financial, employment, K-12 and post-secondary education, housing, legal, community, and demographics. More than 50 indicators provide insights about all geographic regions of the United States, often down to county level. Users can generate customized maps, tables and graphs about communities, examine how indicators relate to each other, and compare their communities.

This is the first national *Measuring Communities* report. It represents a starting place from which communities can track change, monitor evolving needs and opportunities, and focus their time, effort, and resources. The report features a combination of data located on the *Measuring Communities* tool and data from external sources. This gives additional context and understanding of military and veteran family well-being. Our goal for *Measuring Communities* is to help organizations to “move the needle” for military and veteran families.

In this report, we consider the “big picture” regarding military and veteran families across the nation. Readers interested in smaller geographical areas can become members of the *Measuring Communities* site to view more detailed information.

Structure: The *Measuring Communities* initiative brings together two organizations at Purdue University with complementary skills and expertise: The Military Family Research Institute, with expertise about military and veteran families; and the Purdue Center



for Regional Development, which provides expertise in data visualization and mapping. Subject matter experts and users have been involved at every step, helping to inform selection of domains, relevant indicators, and design of user experiences. We are very grateful for their guidance, but we want readers to know that we, not our expert colleagues, are responsible for any errors or inaccuracies. Many site components are a direct result of feedback and advice from these subject matter experts and users.

Access to the *Measuring Communities* online tool is available to organizations and individuals who complete the online application which includes outlining their goals for using the site. Users may wish to build awareness of the presence of military and veteran families within geographic regions, grow their understanding of military-connected family characteristics, identify gaps in programs and services, track community progress over time or pursue other goals. Nonprofit, state, and community organizations, academic institutions, veteran-serving organizations and military agencies are using *Measuring Communities* to support their efforts.

Using this report: The report contains dedicated sections for each domain. Within each domain, the **What We Know** section directs readers' attention to key points. The body of each section provides more detailed information. The **Call to Action** section makes specific suggestions about ways to address challenges.

Readers can use the data to:

- better understand their individual catchment or service areas;
- identify areas where they are able to make an impact;
- understand how different characteristics of their community may combine to affect military and veteran families; and
- create custom data sets to provide a comprehensive view of military members.

We hope you will let us know how you are using the information presented here, and what information you would like to see added in the future. We admire the work of

community-based organizations throughout the country and are eager to see those efforts succeed.

Definitions

ACS: The American Community Survey (ACS) was developed by the Census Bureau to replace the long form of the decennial census. The ACS uses a rolling sample of U.S. housing units (250,000 monthly) to provide basic population characteristics annually for areas with populations of at least 65,000 people. ACS accumulates samples over one- and five-year intervals to produce estimates for areas with smaller populations; only the five-year average ACS provides coverage for all counties in the United States.

Military-connected: This is an inclusive term referring to veterans, service members and their family members.

Nonveterans: All civilians 18 years old and over who are not classified as veterans.

Rural: For the purposes of this report, "rural" is being used to represent nonmetropolitan counties. For more information on the definition of nonmetropolitan counties, including its classification into two groups, micropolitan or noncore, go to Rural Indiana Stats site at: <https://pcrd.purdue.edu/ruralindianastats/geographic-classifications.php#first>

Service member: Service member is an inclusive term to include active duty and Reserve, National Guard members in all branches of the Armed Forces.

Veteran: Unless otherwise noted, the term veteran reflects the American Community Survey definition of veteran, which is a person 18 years old or over who has served (even for a short time), but is not currently serving on active duty in the U.S. Army, Air Force, Marine Corps, Coast Guard or who served in the Merchant Marine during World War II. People who served in the National Guard or Reserves are classified as veterans only if they were ever called or ordered to active duty, not counting the four to six months for initial training or yearly summer camps, and are no longer serving.





DEMOGRAPHICS

What We Know

- **Military members, veterans and their families live in almost every community in the country.**
- **The veteran population is diverse.**
- **The population of female veterans is growing.**
- **Spouses and children outnumber military members and veterans.**

Where they live: Military-connected individuals live in all but three of the 3,142 counties in the U.S. Active duty service members tend to cluster near military installations but for some members duties take them far from installations, such as Reserve Officer Training Corps staff, recruiters, service members attending college as part of their duties, or others. Reserve Component and National Guard members live in local communities, many traveling large distances to their duty stations—sometimes across state lines. The five states with the largest number of Guard and Reserve members are California, Texas, Florida, Pennsylvania and Virginia. The five states with the largest numbers of veterans are California, Texas, Florida, Pennsylvania and New York. From 2010 to 2016 one in four U.S. counties experienced increases in both the number and proportion of veterans. Elmore County Idaho leads the nation, with 34 percent veterans in 2016, up from 26 percent in 2010.

Veterans are diverse: On average, male and female veterans are older than nonveterans, and female veterans are more likely to have bachelors or

advanced degrees than male veterans or nonveterans. Older veterans are more likely than civilians to live in rural areas. Approximately 18 percent of the veteran population lives in rural areas, compared to 15 percent of the civilian population.¹

Veterans are employed in local, state and federal government positions at twice the rate of their civilian counterparts. Female veterans work in managerial or professional and sales and service occupations at higher rates than male veterans. Male veterans work in production and transportation occupations at more than three times the rate of female veterans.²

Female veterans: Females make up approximately eight percent of veterans but almost 20 percent of new military recruits.² “Almost 280,000 women have served Post-9/11 in Afghanistan and Iraq. While the number of male veterans is expected to decline by 2020, the number of women veterans is expected to grow dramatically, to 11 percent of the veteran population” (DAV, n.d., p. 2).

Given recent growth in military service among women, the female veteran population will continue to grow. Female veterans are considerably younger (median age of 50 years) than their male counterparts (median age of 65 years). In 16 states, the female veteran population is 10 percent or more of the total veteran population.

¹ National Center for Veterans Analysis and Statistics. (2017, March). *Profile of veterans: 2015: Data from the American Community Survey*. Retrieved from https://www.va.gov/vetdata/docs/SpecialReports/Profile_of_Veterans_2015.pdf

² DAV. (n.d.). *Women veterans: The long journey home* [PDF file]. Retrieved from <https://www.dav.org/wp-content/uploads/women-veterans-study.pdf>

CHANGE OF VETERAN POPULATION 2010 TO 2016



POPULATION CHANGE BY COUNTY

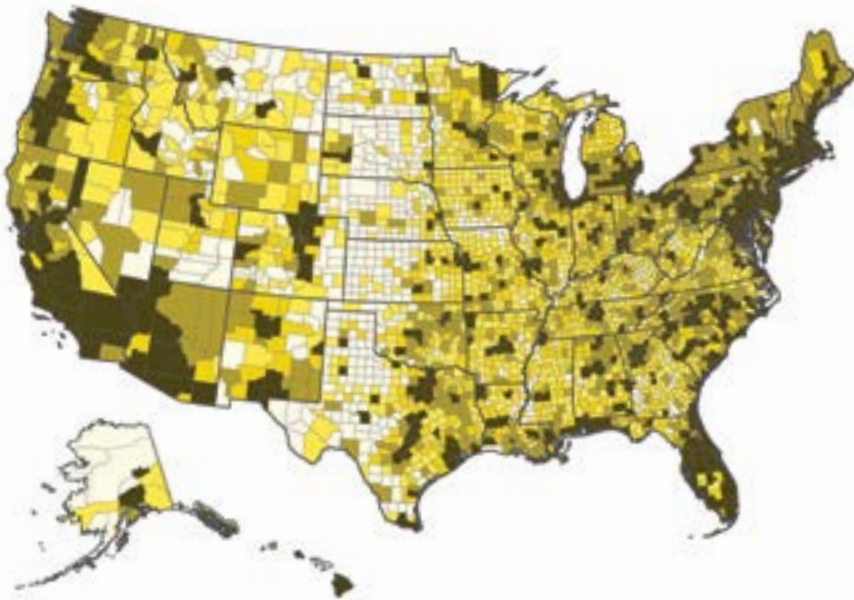
Decrease
Increase

States with highest percentage of female veterans (ACS 2016)

Alaska	13%
Virginia	13%
District of Columbia	12%
Maryland	12%
Georgia	10%
Colorado	10%
Texas	10%
Hawaii	10%

[View the entire list of female veteran population](#)

MILITARY-CONNECTED INDIVIDUALS



NUMBER OF INDIVIDUALS

1 - 999
1,000 - 2,499
2,500 - 4,999
5,000 - 14,999
15,000+

Call to Action

- In communities with increasing veteran numbers, look further into the data. Identify additional veteran characteristics (age, gender or disability) to align services to meet potential needs.
- Typical veteran services need to evolve to support the unique needs of female veterans.
- Expand the definition of military-connected individuals to include extended family members, especially when developing programs or taking measure of military member needs within communities.

Military spouses and children: Military dependents, defined as spouses, unmarried children under 21 and a few other narrowly defined categories,³ outnumber current service members.⁴ There are 2.5 million military dependents and approximately 1.8 million service members. Like their military parents, military youth with active duty parents tend to cluster around military installations, while children whose parents serve in the Selected Reserve are widely dispersed. The Department of Veterans Affairs (VA) typically does not track the number of veteran households with children, but a 2015 report estimates there are more than 6.3 million of them.

The 2017 Current Population Survey indicates the average number of children under 18 per family is 1.94. Using this number, there are approximately 12.3 million children living in veteran households.

While the number of military spouses and children is large, there is even a larger military-connected population not counted in official definitions. Service members' mothers, fathers, siblings and adult children all are impacted by the military service of their loved one.⁴

³ Department of Defense. (2016). Definitions. In *DoD financial management regulation (7A)*. Retrieved from <http://comptroller.defense.gov/Portals/45/documents/fmr/archive/07aarch/07adefin.pdf>

⁴ MacDermid Wadsworth, S. (n.d.). *Military and veteran families count, so we should count them!* Retrieved from http://www.springer.com/gp/blog/post-wadsworth/15163242?wt_mc=E-Mail.Newsletter.8.CON1172.Military%20Family%20Email%20Blog%20Highlight&utm_medium=e-mail&utm_source=newsletter&utm_content=11022017&utm_campaign=8_ago1936_military%20family%20email%20blog%20highlight&sap-outbound-id=F7C02B0500403E8B7F483F3A0F72226CA206E667



COMMUNITY

What We Know

- **Community characteristics influence experiences of military-connected and civilian populations.**
- **Problems like poverty and low educational attainment can be risk factors for community members.**
- **Military members' perceptions of availability and access to services in communities can influence their experiences and satisfaction with military service.**
- **Military-connected individuals can be assets to the communities in which they live.**

Community characteristics play a vital role in the lives of service members, veterans and their families—since service members, veterans and their families live in every county in the country. It is important to see how the military connected population is doing in relation to their civilian counterparts.

Community characteristics: Communities across the country face socioeconomic challenges such as poverty or low educational attainment. These characteristics can place stressors on communities. One in five U.S. counties have civilians with lower than average levels of high school education and elevated levels of 18 to 64 year olds with incomes below the poverty line. More than 50 percent of the civilian

and veteran population lives in these counties. Living in areas with high poverty and limited educational attainment may make it more difficult for veterans to find steady employment and access to medical/behavioral health care, and they may experience a lower quality of social support services and limited access to quality educational opportunities.

Perceptions of community: Regardless of what is actually occurring in communities, what military and veteran families perceive matters—it is hard for supportive efforts to be helpful to people who are unaware of them. As part of a collaboration with *Measuring Communities*, the Blue Star Families Military Family Lifestyle survey asks military-affiliated individuals (active duty, selected reserve, veterans and their family members) to rate the availability and access of services in 10 categories as insufficient, sufficient or outstanding. The number of responses allows data to be summarized across large geographical regions. Overall, the Midwest North Central region of the country rates highest in satisfaction in employment, community, financial supports and legal access. The Northeast Mid-Atlantic region shows the most challenges in employment, community, housing and legal access. One domain that is consistently reported at “insufficient” in most areas is affordable housing.

Over the past 10 years, community mobilization efforts across the country have flourished. Community members are working to ensure that military and veteran families are welcomed, encouraged, and

COMMUNITY SUPPORT GROUPS AND MILITARY-CONNECTED POPULATION



POVERTY RATES AND ACTIVE DUTY MILITARY INSTALLATIONS



assisted. The VA is building a national network of Community Veteran Engagement Boards (CVEB) ready to assist.

Civic assets: While the focus is often on challenges facing military and veteran families, it is also important to focus on the assets they bring to their communities. According to the latest Civic Health Index report, veterans and service members engage in activities such as voting, volunteering, engaging public officials and

giving to charity at higher rates than their civilian counterparts.¹ Serving as an elected official is another way military-connected individuals serve their communities—20 percent of members of the 114th Congress and current governors were currently serving or had served in the military, compared to only seven percent of the U.S. population. The demonstrated commitment to service by veterans and service members provides a wealth of opportunity for communities and the nation.

¹ Tivald, J., Coates, J., Holt, K., Mabe, M., Rausch, B., & Szymanski, M. (n.d.). 2016 Veterans civic health index: America's greatest assets: How military veterans can lead a resurgence of community across the country. Got Your 6. Retrieved from <https://www.ncoc.org/wp-content/uploads/2016/10/2016-Veterans-CHI-2017.pdf>

Call to Action

- In communities with high poverty rates or a large number of veterans living below the poverty line, identify community or state level resources that can be mobilized to mitigate these risks for veterans and their families.
- Engage veterans to assume positions of leadership within local government or community organizations.
- When assessing the perceptions of residents about their communities, pay close attention to the perceptions of military and veteran families.

[To view more data on veterans and poverty rates](#)



EMPLOYMENT

What We Know

- **Overall, younger veterans are now employed at higher rates than civilians of similar age and sex; this is a change from several years ago.**
- **Veterans bring assets to the labor force including their education, training and experiences in leadership roles.**
- **Active duty spouses face employment challenges that may be due to their spouses' military service.**

Veteran employment: Since 2008, veteran unemployment—particularly young veterans—has been a national concern.¹ Post-9/11 veterans have faced challenges, including employer reluctance to hire them, military-civilian job and skill mismatches, and military service stereotyping.¹

In 2010, veteran unemployment rates, especially for those ages 18 to 34, were much higher than among their civilian counterparts.² Concerted national efforts like Joining Forces, the 100K Jobs Mission and state initiatives all highlighted this issue. The Department of Labor reports that veteran unemployment is at its lowest rate since 2011.² In 2010, 20 states had higher unemployment rates for veterans ages 18 to 34 when compared to their civilian counterparts; by 2016 that number was cut to 10 states. Overall, veterans are employed at higher levels than their civilian counterparts. Regions around the country where unemployment

among veterans is still higher than civilians of similar age include six states in the West, five states in the Northeast and three states in the Southeast.

Other employment trends still merit concern:

- From 2010 to 2016, labor force participation rates rose for civilians ages 18 to 34, but fell among veterans of the similar age;
- Labor force participation for veterans ages 55 to 64 also fell from 2010 to 2016;
- While low, the unemployment rate for veterans ages 55 to 64 is higher than that of their civilian counterparts in all but nine states.

Why are veterans not in the workforce?

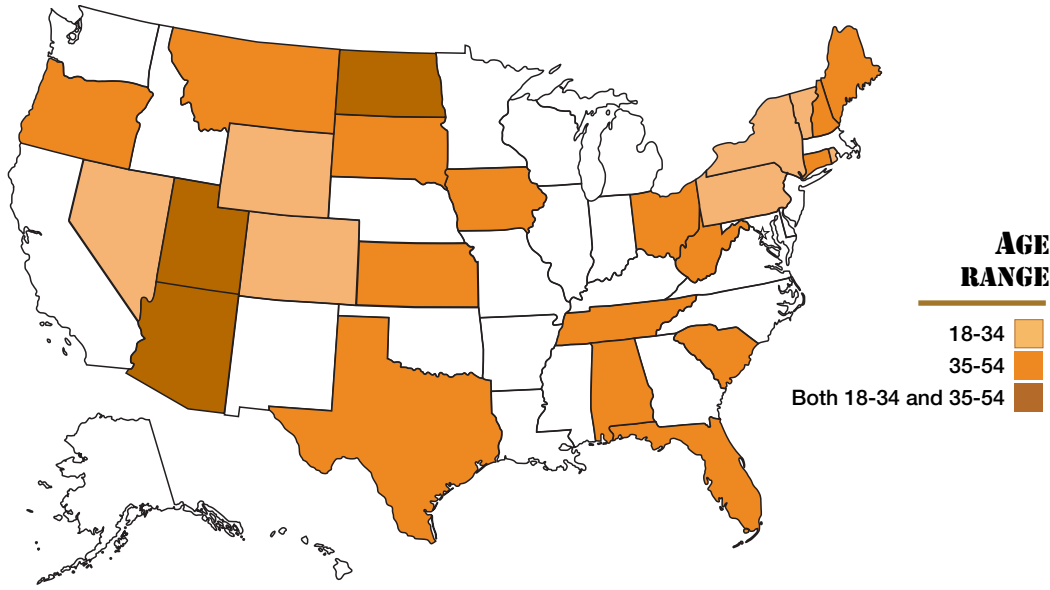
- Veterans 18 to 34 who are not in the labor force are more likely to have an illness or disability (35.2 percent) as compared to being in school (28.7 percent).
- Female veterans are more likely than male veterans to work part time and be in caregiving roles.
- Veterans ages 55 to 64 are retiring, not choosing to enter a second career. Of veterans not in the labor force, 44.2 percent are retired, compared to 37.6 percent of their civilian counterparts.

Veterans as assets in the labor force: Employment is a complex issue for military and veteran families. Among veterans, patterns of

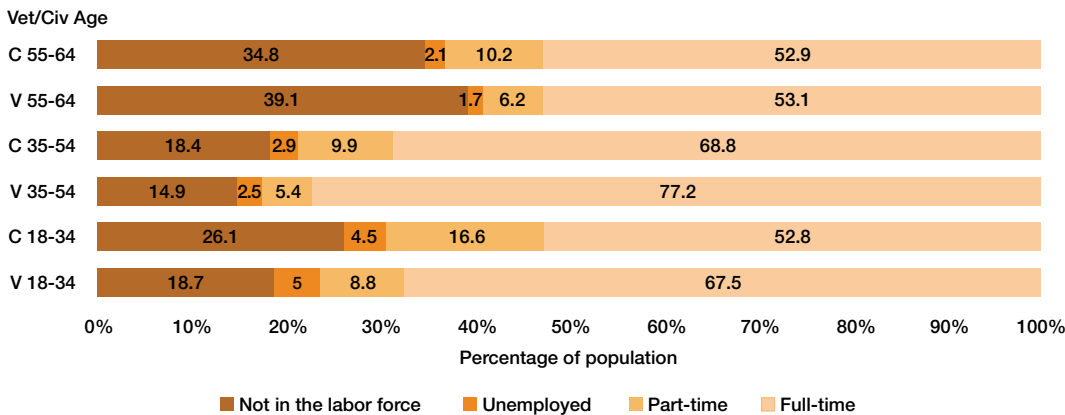
¹ Kintzle, S., Keeling, M., Xintarianos, E., Taylor-Diggs, K., Munch, C., Hassan, A. M., & Castro, C. A. (2015). *Exploring the economic and employment challenges facing US veterans: A qualitative study of volunteers of America service providers and veteran clients*. Centre for Innovation and Research on Veterans and Military Families, University of Southern California, School of Social Work.

² Murren, L. (2017, March 22). *By the numbers: Veterans unemployment continues downward trend*. Retrieved from <https://blog.dol.gov/2017/03/22/numbers-veterans-unemployment-continues-downward-trend>

VETERAN UNEMPLOYMENT RATES HIGHER THAN CIVILIANS BY AGE



VETERAN AND CIVILIAN JOB STATUS



labor force participation and employment differ across age groups. Historically, veterans ages 18 to 55 have participated in the labor force and been employed at higher rates than civilians of similar age.³ Both male and female veterans are more likely than their civilian counterparts to be employed full time rather than part time. Skills developed in the military tend to be assets for employers; these include leadership, flexibility, ability to work in a fast-paced environment, problem solving and team work.⁴

Military spouse employment challenges:

Most spouses of both active and reserve component service members are also employed, but there is robust evidence that active component spouses are underemployed relative to their civilian counterparts.^{5, 6, 7, 8 and 9} Data from over 6,000 spouses who applied for scholarships from the National Military Family Association

(NMFA) in 2017 indicate that their top employment priorities are: meaningful work, career advancement, flexible schedules and portability.

Active component spouses are less likely than reserve component spouses to work full time. Both active and reserve component spouses may have less access to some benefits than the civilian workforce as a whole. For example, spouses who applied for NMFA scholarships were less likely than members of the civilian labor force to have access to employer pensions or retirement plans or paid sick days, holidays, or vacation days. Over two-thirds (67.4 percent) of active duty spouses working part time had none of these benefits.

We are grateful to the National Military Family Association and Meredith Kleykamp for sharing their expertise during the preparation of this report.

Call to Action

- Investigate ways to reduce unemployment among young veterans even further.
- Explore ways to increase opportunities for veterans with illnesses and disabilities to participate in the labor force.
- Recognize employers who show leadership in offering high-quality jobs to military spouses.

[Learn more about the reasons veterans and civilians are not in the workforce](#)

³ U.S. Cong. (2013). *Employment for veterans: Trends and programs* (B. Collins, Author). (Cong. Rept. R42790). Washington, DC: Congressional Research Service, Library of Congress.

⁴ Hall, C., Harrell, M. C., Bicksler, B., Stewart, R., & Fisher, M. (2014). *Veteran employment: Lessons from the 100,000 jobs mission*. RAND Corporation. Retrieved from https://www.rand.org/pubs/research_reports/RR836.html

⁵ Lim, N., Schulker, D. (2010). *Measuring underemployment among military spouses*. RAND Corporation. Retrieved from <https://www.rand.org/pubs/monographs/MG918.html>

⁶ Department of Research and Policy. Blue Star Families. (2016). *Blue Star Families 2015 Annual Military Family Lifestyle Survey Comprehensive Report*. Retrieved from https://bluestarfam.org/wp-content/uploads/2016/04/bsf_2015_comprehensive_report.pdf

⁷ RAND Corporation. (2012). *Unemployment among post-9/11 veterans and military spouses after the economic downturn*. Retrieved from <http://www.dtic.mil/dtic/tr/fulltext/u2/a569643.pdf>

⁸ Meadows, S. O., Griffin, B. A., Karney, B. R., & Pollak, J. (2016). Employment gaps between military spouses and matched civilians. *Armed Forces & Society, 42*(3), 542-561. doi: 0.1177/0095327X15607810

⁹ Hosek, J., & MacDermid Wadsworth, S. M. (2013). Economic conditions of military families. *The Future of Children, 23*(2), 41-59. doi: 10.1353/foc.2013.0009



EDUCATION

What We Know

- **Most military-connected children go to school in civilian communities.**
- **Federal law now requires schools to implement a Military Student Identifier, but states vary in their implementation.**
- **In 2015, more than 790,000 veterans used Post-9/11 GI bill benefits, 13.5 percent of whom transferred their benefits to either a child or spouse.**
- **Individual states offer widely varying levels of support to augment federal benefits for post-secondary education of veterans and military-connected individuals, with many different eligibility rules.**

K-12 Education

Military youth in communities: More than 9.5 million school aged military-connected youth—children whose parents are currently serving or have served in the military—are geographically dispersed across the U.S., territories and overseas. These children and youth receive their education, medical care and other services in civilian communities; only eight percent attend schools administered by Department of Defense Education Activity (DoDEA).

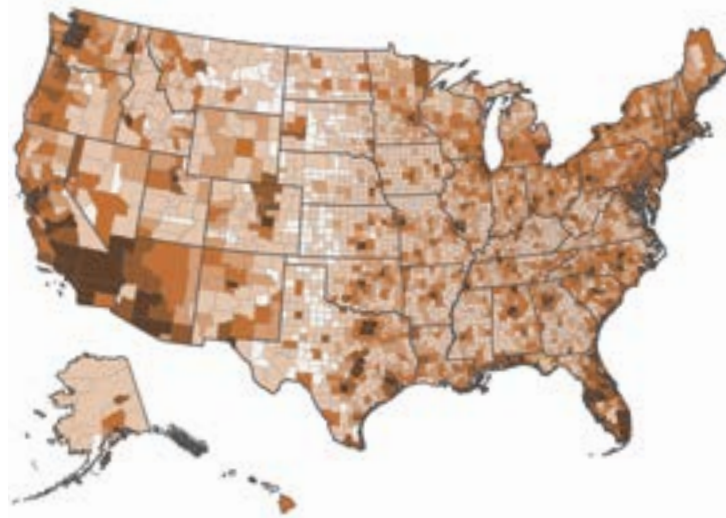
Identifying military-connected youth: Students with parents who serve full time typically attend an estimated six to nine schools during their educational career (MCEC).

Until recently, there was no consistent way for educators to know whether there were military-connected children in their schools. In 2015 the Every Student Success Act (ESSA) mandated the recognition of military-connected students. Twenty states were early adopters of the Military Student Identifier (MSI), prior to ESSA. Importantly, ESSA requires every state and the District of Columbia to recognize military-connected students as a new subgroup. The MSI does not identify children of the selected reserve or veterans. Some states, however, have implemented more inclusive policies beyond the federal ESSA statute.

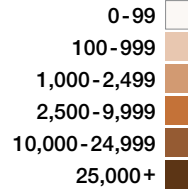
Post-Secondary Education

Historically, veterans and service members are more likely to have completed high school than their civilian counterparts: In the American Community Survey five year estimate for 2016, 93 percent of the veteran population had earned at least a high school degree, compared to 85 percent of the civilian population. Currently, all military recruits are required to have a high school diploma, but as late as 1992, non-high school graduates were able to enlist if they met other criteria. College completion rates among veterans vary across the country. Similar to civilians, veterans with college degrees are more likely to live along the coasts and less likely to live in Midwestern states including Kentucky, Ohio and Indiana, as well as West Virginia.

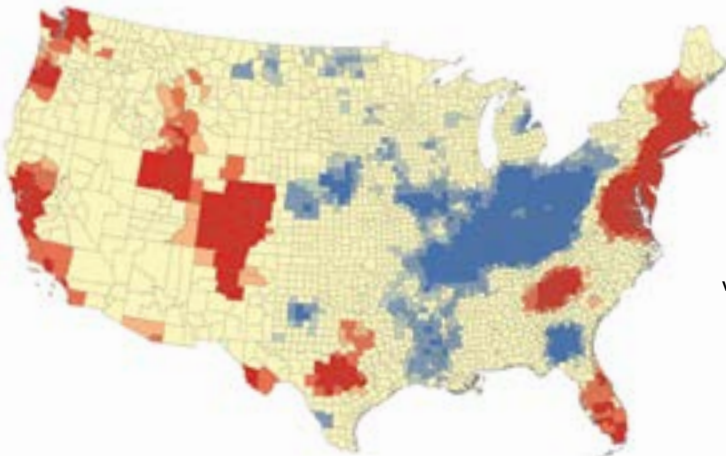
MILITARY-CONNECTED YOUTH BY COUNTY



TOTAL NUMBER OF CHILDREN



VETERANS WITH BACHELOR'S DEGREE OR HIGHER



LEGEND

Hot spots (red) are county regions with high concentrations of veterans with bachelor's degrees or higher. Cold spots (blue) have lower concentrations.

Early adopters of MSI



- 1 Alaska
- 2 Arkansas
- 3 Delaware
- 4 Florida
- 5 Indiana
- 6 Minnesota
- 7 Missouri
- 8 Montana
- 9 Nevada
- 10 North Carolina
- 11 Oklahoma
- 12 South Carolina
- 13 Tennessee
- 14 Texas
- 15 Virginia
- 16 Washington
- 17 Alabama
- 18 Illinois
- 19 Maine
- 20 Michigan

Call to Action

- Fully implement the military student identifier in all states, districts and campuses. Include the children of the National Guard and Reserves.
- Continue progress and monitor efforts to systematically report student veteran success.
- Encourage post-secondary institutions to increase enrollment of veterans. Nationally, increasing veteran enrollment by one percentage point would generate \$56 million in annual tuition revenue.
- Investigate usage and best practices related to state education benefits. States can use such benefits to attract veterans to relocate.

Post-9/11 GI Bill usage: The recent Post-9/11 GI Bill has allowed a new generation of service members and veterans to access higher education. Since implementation in 2009, the VA has provided educational benefits to more than one million veterans and their family members, totaling more than \$20 billion in benefits, and a 42 percent increase in the number of beneficiaries since 2011. In 2016, 130,995 beneficiaries received benefits for the first time to pursue non-degree (28.0 percent), undergraduate (45 percent), graduate (10.1 percent) and vocational (15.7 percent) education. Additionally, in fiscal year 2016, GI Bill benefits were transferred to more than 132,666 children and spouses. Nationally, seven percent of college enrollees use Post-9/11 GI bill benefits with an average tuition benefit of more than \$7,700 per veteran.

With significant funds allocated to the Post-9/11 GI Bill, veteran success in post-secondary education is an important metric. The National

Veteran Education Success Tracker examined education records of nearly one million veterans. According to this report, veterans are more likely to complete their degrees than civilians of similar age.¹ Data from the VA GI Bill Comparison Tool show the retention rate for first-time GI bill students working towards a bachelor's degree is higher (79 percent) than their civilian counterparts (70 percent).

State support: In addition to federal education benefits, many states also offer educational benefits to service members, veterans and their family members. The most common benefits are in-state tuition waivers, varying levels of tuition support for National Guard members and tuition waivers for Purple Heart recipients. States vary widely in benefits and eligibility criteria.

We are grateful to Mary Keller of the Military Child Education Coalition and Student Veterans of America for sharing their expertise during the preparation of this report.

Additional education data:

- [VA education benefits by type](#)
- [Post-9/11 transfer benefits](#)

¹ Cate, C., Lyon, J., Schmeling, J., & Bogue, B. (2017). *National veteran education success tracker: A report on the academic success of student veterans using the post-9/11 GI bill* [PDF file]. Retrieved from http://invest.studentveterans.org/wp-content/uploads/2017/03/NVEST-Report_FINAL.pdf



HOUSING

What We Know

- **Nationwide, efforts to reduce veteran homelessness appear to be working.**
- **Some states have made exceptional progress reducing the percentage of unsheltered veterans.**
- **Homeless veteran numbers are increasing in some states.**

Nationwide progress: In 2009, the VA, in partnership with the White House, committed to functionally ending veteran homelessness. In 2016, after the national Point-in-Time (PIT) Count—an annual census of the homeless conducted each January—the VA reported a 50 percent decline in homelessness compared to 2010, and a one-year decline of 17 percent, four times the rate of 2015.¹

Recent strategies for reducing veteran homelessness include prioritizing “Housing First,” and wrap-around services to lead to sustainable change.

State progress: Data from the PIT count on the Measuring Communities site shows that four states reduced the proportion of unsheltered homeless veterans by more than a third between

2011 and 2017. Florida decreased its unsheltered veterans by 40.7 percent, while Alabama’s rate dropped by 39.7 percent, Louisiana’s rate plummeted to 14.1 percent—a six-year drop of more than 73.6 percent—and Wyoming’s rate decreased by 61.1 percent.

These efforts are usually the result of concentrated efforts by multiple agencies working together.

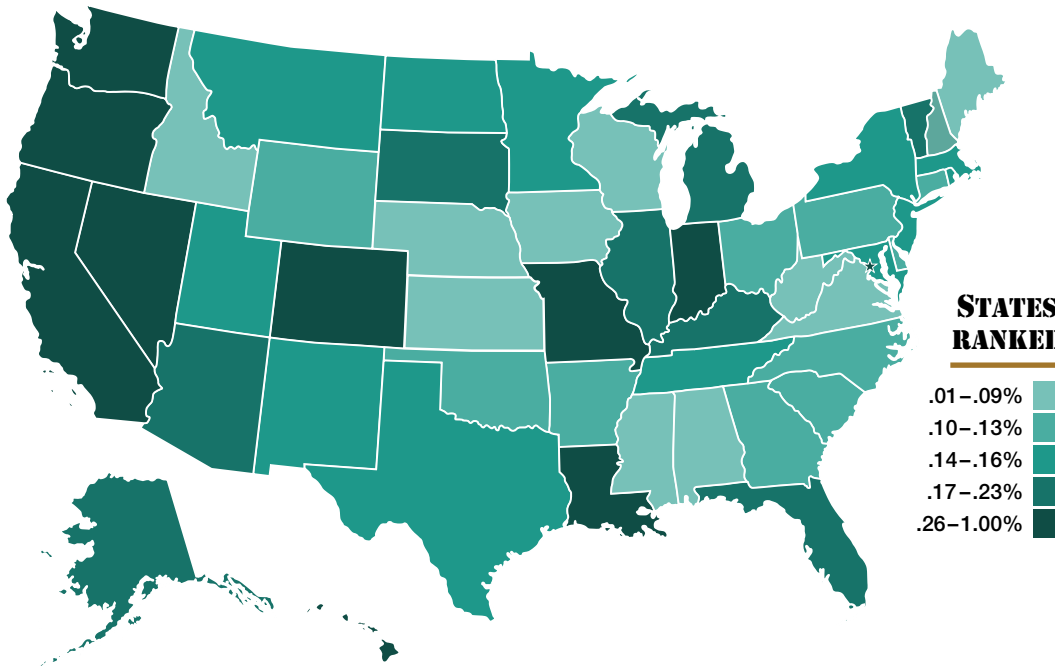
Shreveport, Louisiana was recognized in 2017 by the U.S. Department of Housing and Urban Development and others for its efforts to functionally end homelessness among veterans.² Shreveport created strong partnerships with volunteer agencies, the local VA medical center and other homeless veteran advocacy organizations.

Obtaining accurate counts of the homeless population is challenging. A national network of volunteers organized into Continuum of Care (CoC) units conduct the annual PIT count each January. The count can be impacted by a location’s weather, volunteer coordination, time of day the count is conducted and the location of homeless individuals.³ The count also can miss “couch surfing” individuals, those staying in temporary housing, or those who enter or leave homelessness during other parts of the year.

¹ VA is working to end homelessness among veterans. (2017, May 3). U.S. Department of Veterans Affairs. Retrieved from https://www.va.gov/homeless/about_the_initiative.asp

² Price, A. (2017, Jan. 6). *Shreveport Recognized for Homelessness Efforts*. Retrieved from https://www.shreveport.va.gov/SHREVEPORT/features/Shreveport_Recognized_for_Efforts_to_End_Veteran_H.asp

PERCENT OF TOTAL VETERAN POPULATION THAT IS HOMELESS



Housing insecurity takes many other forms than homelessness.

Increasing numbers: While many states have made great progress in reducing the proportion of veterans without shelter, permanent housing and homelessness remain challenging. Where homelessness is rising, it is increasingly important to make continued efforts to combat the issue.

States vary widely in the representation of veterans among the homeless population. The five states with the largest veteran populations (California, Texas, Florida, Pennsylvania and New York) also have large numbers of homeless veterans. However, a handful of states have especially high rates of homeless veterans relative to the state veteran population: California, Nevada, Oregon, Hawaii, Missouri and the District of Columbia. Additional analyses to identify causes for this over-representation needs to be conducted. One factor might be that some of these states have higher than average cost of living, with Hawaii the highest in the nation.⁴

Call to Action

- **Study states and communities that have functionally ended veteran homelessness to see which of their strategies could be replicated elsewhere.**
- **Pay particular attention to geographical areas where homeless veterans are becoming more numerous, and develop strategies to reverse this trend.**
- **Continue to improve methods for collecting data for the PIT counts. Develop or identify best practices for ensuring PIT count accuracy. Assist local survey teams, or volunteer to help the CoC in your area conduct the annual count. Identify ways you can assist to make the PIT count more accurate.**

We are grateful to subject matter expert Dr. Roger Casey of the VA National Center on Homelessness Among Veterans at the Department of Veterans Affairs for his assistance during the preparation of this report.

10 states with increases in homeless veterans (2017)

1	California
2	Washington
3	Texas
4	Kansas
5	North Carolina
6	Montana
7	New Mexico
8	New Jersey
9	Arkansas
10	South Dakota

10 states with lowest percentage of unsheltered veterans (2017)

1	Nebraska	1.1%
2	Rhode Island	3.2%
3	New York	4.7%
4	Massachusetts	5.3%
5	Vermont	5.3%
6	South Dakota	5.4%
7	Wisconsin	6.1%
8	Delaware	6.6%
9	Connecticut	7.3%
10	Indiana	7.5%

View the complete lists of states with:

- [Change in percentage of sheltered veterans](#)
- [Increase in total homeless that are veterans](#)
- [Change in the number of homeless veterans](#)

³ Falvo, N. (2016, Nov. 30). Ten things to know about Canadian attempts to count homelessness through point-in-time counts. Message posted to <http://calgaryhomeless.com/info/research-blog/ten-things-know-canadian-attempts-count-homelessness-point-time-counts-nick-falvo/>
⁴ Missouri Economic Research and Information Center. (2017). *Cost of Living Data Series Second Quarter 2017* [Data file]. Retrieved from https://www.missourieconomy.org/indicators/cost_of_living/



BEHAVIORAL HEALTH

What We Know

- **Military members and veterans experience some behavioral health conditions at higher rates than civilians.**
- **Rural communities account for more than 64 percent of the nearly 1,000 US counties that include Mental Health Care Health Professional Shortage Areas.**
- **Veteran suicide rates continue to be a cause of concern, with rates in all states above the national average for age-matched civilians.**
- **Little is known about suicide rates among family members of service members or veterans.**

Behavioral health conditions: Civilians, service members and veterans all experience behavioral health conditions such as substance use disorders, depression or anxiety and post-traumatic stress disorder. Service members and veterans sometimes experience these conditions at higher rates than civilians.^{1,2} Data from the Nation-

al Center for PTSD indicate that seven to eight percent of the U.S. population will have PTSD at some point in their lives, compared to 15 percent of Vietnam veterans and 11-20 percent of OEF/OIF/OND veterans.^{3,4} Additionally, between 2000 and 2012 rates of diagnosable depression ranged from five to 16 percent among active-duty and National Guard service members, and “rates of diagnosable anxiety disorders among active-duty service members increased 425%” (Pickett, T., Rothman, D., Crawford, E., Brancu, M., Fairbank, J., Kudler, H., 2015, p. 301).

Behavioral health shortage areas: Access to behavioral health care is important for all community members. Mental Health Care Health Professional Shortage Areas (HPSA) designated by the Department of Health and Human Services identify areas with population to provider ratios of more than 30,000 to 1 (20,000 to 1 if there are unusually high needs in the community).⁵

Nearly 1,000 U.S. counties have at least one Mental Health Care HPSA. More than 64 percent of these counties are rural, where veterans are overrepresented.⁶ Rural populations experience challenges accessing

¹ Health Resources and Services Administration/National Center for Health Workforce Analysis. (2016). *National projections of supply and demand for selected behavioral health practitioners: 2013-2025*. [PDF file]. Retrieved from <https://bhwh.hrsa.gov/sites/default/files/bhwh/health-workforce-analysis/research/projections/behavioral-health2013-2025.pdf>

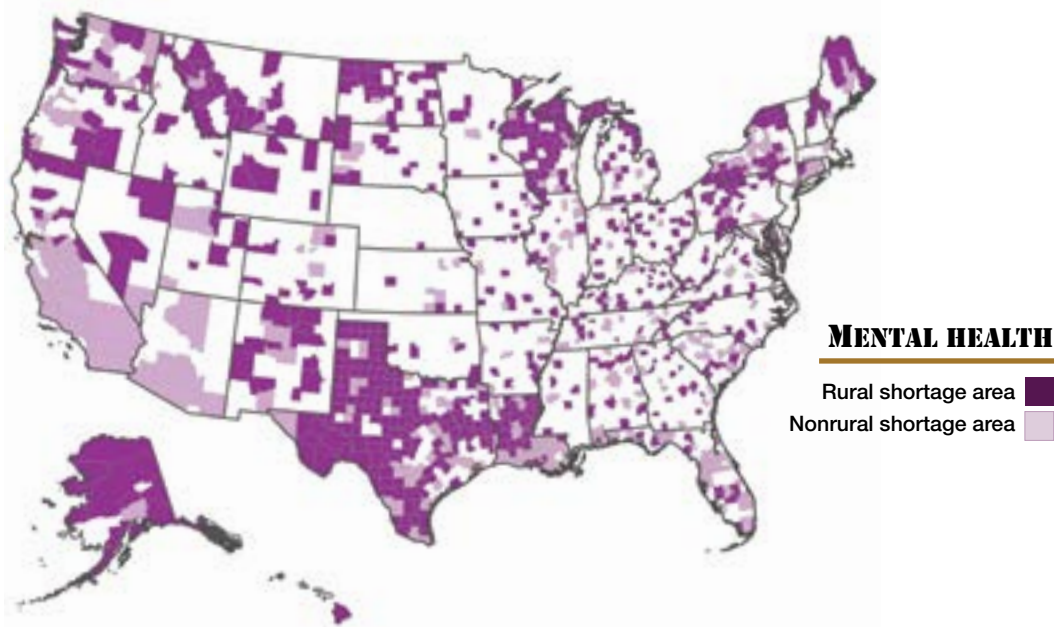
² The Henry J. Kaiser Family Foundation. (2016, Dec. 31). *Mental Health Care Health Professional Shortage Areas (HPSAs)*. Retrieved from <https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>

³ Pickett, T., Rothman, D., Crawford, E. F., Brancu, M., Fairbank, J. A., & Kudler, H. S. (2015). Mental health among military personnel and veterans. *North Carolina Medical Journal*, 76(5), 299-306. doi: 10.18043/ncm.76.5.299

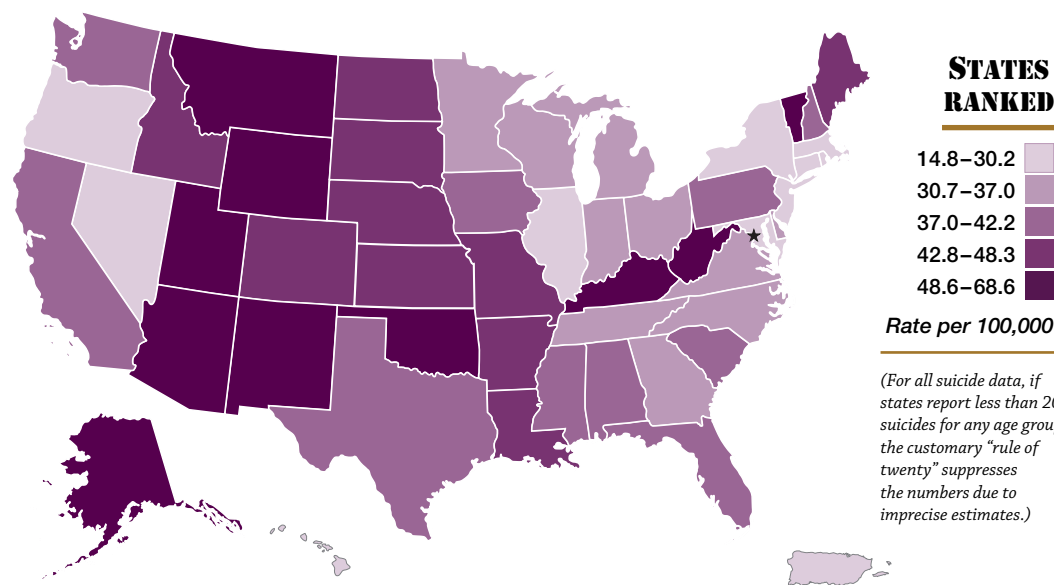
⁴ U.S. Department of Veterans Affairs. (2016). *How common is PTSD?* Retrieved from <https://www.ptsd.va.gov/public/ptsd-overview/basics/how-common-is-ptsd.asp>

⁵ The Henry J. Kaiser Family Foundation. (2016, Dec. 31). *Mental health care health professional shortage areas (HPSAs)*. Retrieved from <https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>

MENTAL HEALTH CARE HPSAS



VETERAN SUICIDE RATE



health care, including travel distance or lack of transportation to obtain care. For veterans with injuries or illnesses, these challenges can be magnified. To combat these challenges, the VA has increased telehealth options for rural veterans both in primary care and mental health care. While the use of telehealth is increasing, the VA also reports more than 36 percent of rural veterans do not have access to the internet.⁷

Suicide rates: Suicide rates among service members and veterans have received national attention, and the Departments of Veterans Affairs and Defense both have offices dedicated to

addressing this issue. Between 2001 and 2014, suicide rates among veterans increased two times faster than those among civilians, from 38.4 compared to 17.0 (per 100,000). Nationally, suicide rates by age are highest for civilians 35 to 54 years old at 18.4 (per 100,000), but rates among veterans are highest in the 18-34 age group at 70.4 (per 100,000). In every state, the suicide rate among veterans is higher than among civilians.

We are grateful to Terri Tanielian of the RAND Corporation for her guidance during the preparation of this report.

Call to Action

- Encourage training in military cultural competence and evidence-based treatments for community behavioral health providers so they are well-prepared to provide care.
- Maintain efforts surrounding behavioral health services for veterans, service members and their families who live in rural areas.
- Increase internet access for rural veterans telehealth reaches.
- Identify best practices for addressing suicide, and work with both VA and DoD towards the goal of reducing suicides in military and veteran families.

To view additional behavioral health data:

[Veteran suicide rates by state](#)

[Mental health shortage areas and veteran population](#)

⁶ USDA. (2017). *Atlas of rural and small-town America*. Retrieved from <https://www.ers.usda.gov/data-products/atlas-of-rural-and-small-town-america/>

⁷ VHA Office of Rural Health. (2016). *Rural veterans*. [PDF file]. Retrieved from https://www.ruralhealth.va.gov/docs/ORH_RuralVeterans_infosheet_FINAL508.pdf



MEDICAL

What We Know

- **More than 50 percent of U.S. counties are designated as Health Professional Shortage Area (HPSA), putting civilians and military families at risk for limited access to care.**
- **States vary widely in levels of disabilities among veterans.**
- **Communities with exceptionally high numbers of veterans with disabilities may be facing unique needs as the veteran population continues to age.**

Medical shortage areas: Access to medical care is important for quality of life for everyone in a community. Health Professional Shortage Areas (HPSA), designated by the Department of Health and Human Services, indicate shortages of primary care, dental care or mental health providers.

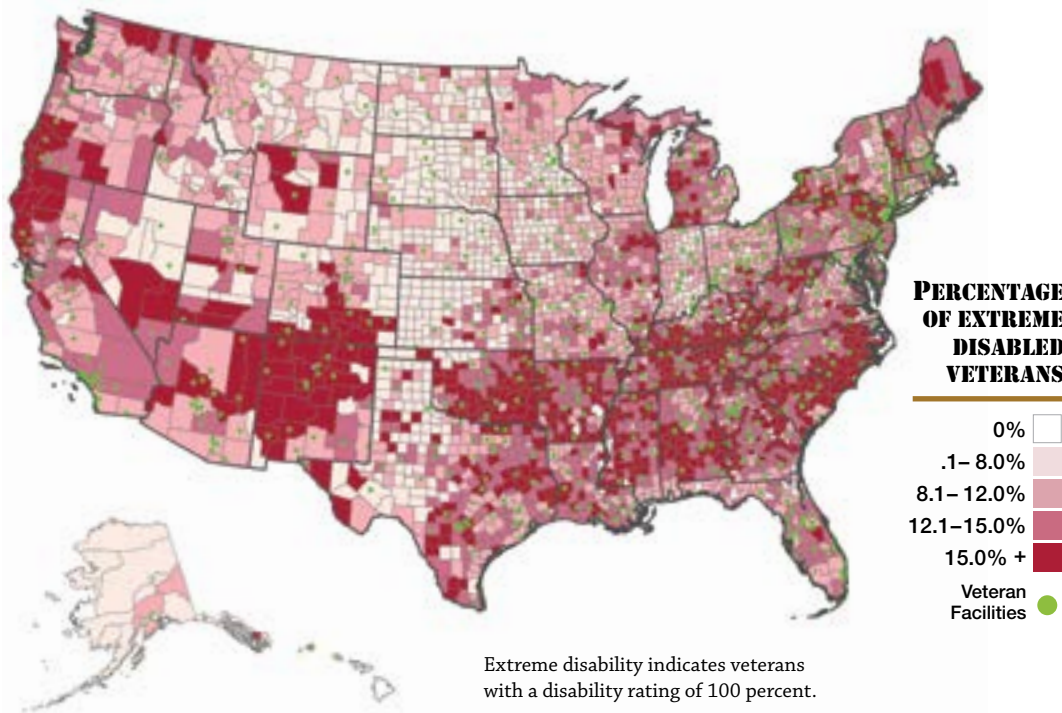
Currently, 53 percent of U.S. counties are home to at least one type of HPSA, and 204 counties have more than one. More than 33 percent of the civilian population and better than

28 percent of the veteran population live within areas with multiple shortages. Cook County, Illinois leads the nation with 26 identified shortages. Civilians and veterans living in these higher shortage counties are at greater risk of not being able to access adequate medical care. The Department of Defense (DoD) and the VA are relying more often on non-DoD and non-VA providers such as VA Choice Providers. This reliance on civilian providers may put additional strain on these health shortage areas.

Veterans with disabilities: Service members who are injured or contract diseases while on active service are eligible to receive VA disability benefits. While Texas and California have the largest numbers of veterans with disabilities, there are 100 counties where more than 40 percent of the veteran population is identified as having disabilities.

Enrollment for VA services is currently growing, but is expected to shrink as veterans from past conflicts pass away. The VA recorded 6.8 million enrollees in 2002 and 9.0 million in 2015, representing 95.2 million outpatient visits and almost 700,000 inpatient admissions. The top five service-connected

EXTREME DISABILITY RATE AND VA FACILITIES BY COUNTY



disabilities for new VA enrollees during Fiscal Year 2016 differed from those already enrolled. For example, post-traumatic stress disorder was not among top five disabilities for new enrollees but was the third most prevalent service-connected disability among those already enrolled.¹

State disability rates: Across the states, rates for veterans with disabilities range from 13 to 32 percent of the veteran population. Additionally, some states and communities have high percentages of veterans who are classified as 100 percent disabled. Communities with high percentages of veterans with high levels of disabilities might face unique challenges, including the need for support services, transportation, medical care and respite services for military caregivers.

We are grateful to Terri Tanielian of the RAND Corporation for her guidance during the preparation of this report.

Call to Action

- **State and community leaders need to consider the composition of local populations of veterans with disabilities, including their ages, to strategically plan and coordinate current and future service needs.**
- **Where there are gaps between locations with concentrations of veterans with disabilities and VA health facilities, more community-based care resources might be needed.**
- **In communities with high concentrations of veterans with disabilities, support services and active outreach may be needed to support caregivers.**

States with highest percentage of 100% disabled veterans

1 Connecticut	4.6%
2 Pennsylvania	3.9%
3 Illinois	3.7%
4 New Jersey	3.5%
5 New York	3.5%
6 Ohio	3.5%
7 Michigan	3.5%
8 Delaware	3.4%
9 Vermont	3.4%
10 New Hampshire	3.2%
11 Iowa	3.2%

Service-connected disabilities

New enrollee top five service-connected disabilities (FY2016)

Tinnitus	149,429
Hearing loss	77,622
Limitation of flexion, knee	72,270
Lumbosacral or cervical strain	71,653
Scars, general	58,134

Current enrollee top five service-connected disabilities

Tinnitus	1,610,911
Hearing loss	1,084,069
Post-traumatic stress disorder	887,899
Lumbosacral or cervical strain	844,353
Scars, general	827,459

View additional medical data:

[Health professional shortage areas and veteran population](#)

[Disability rates and number of recipients](#)

¹ U.S. Department of Veteran Affairs. (n.d.). *Veterans Benefits Administration Annual Benefits Report Fiscal Year 2016*. Retrieved from https://www.benefits.va.gov/REPORTS/abr/ABR-All_Sections_FY16_06292017.pdf



FINANCIAL

What We Know

- **In general, veterans across the country are doing well relative to civilians in terms of income.**
- **Rural veterans and veterans with disabilities are facing greater risks of poverty than other veterans.**
- **Complaints about financial practices can be influenced by military/civilian status.**
- **State tax benefits vary widely and could be incentives to recruit veterans to the state.**

Veterans are doing well: Historically, veterans are financially better off than their civilian counterparts, due in part to military pensions, education benefits and other financial supports. In 2016, median income was \$38,175 among veterans ages 18 and over compared to \$27,034 among similar civilians. Since 2002, Service member pay has increased at a higher rate than civilian wages and includes financial incentives beyond basic pay such as housing allowances and combat pay.

At risk: While many veterans do well financially, some do not. Veterans are more likely than nonveterans to live in rural areas,

and poverty rates are higher among working age veterans who live in rural areas relative to their urban counterparts.¹ Veterans with disabilities of all ages are more likely to have incomes below the poverty line than similar civilians. In one in every eight U.S. counties, veterans are more likely than civilians to have incomes below the poverty line. States also differ widely in the level of income inequality among veterans. When veteran incomes at the 80 percent and 20 percent percentiles are compared—a common measure of income inequality—states range from a low of 2.94 in Minnesota to a high of 9.86 in Washington D.C.

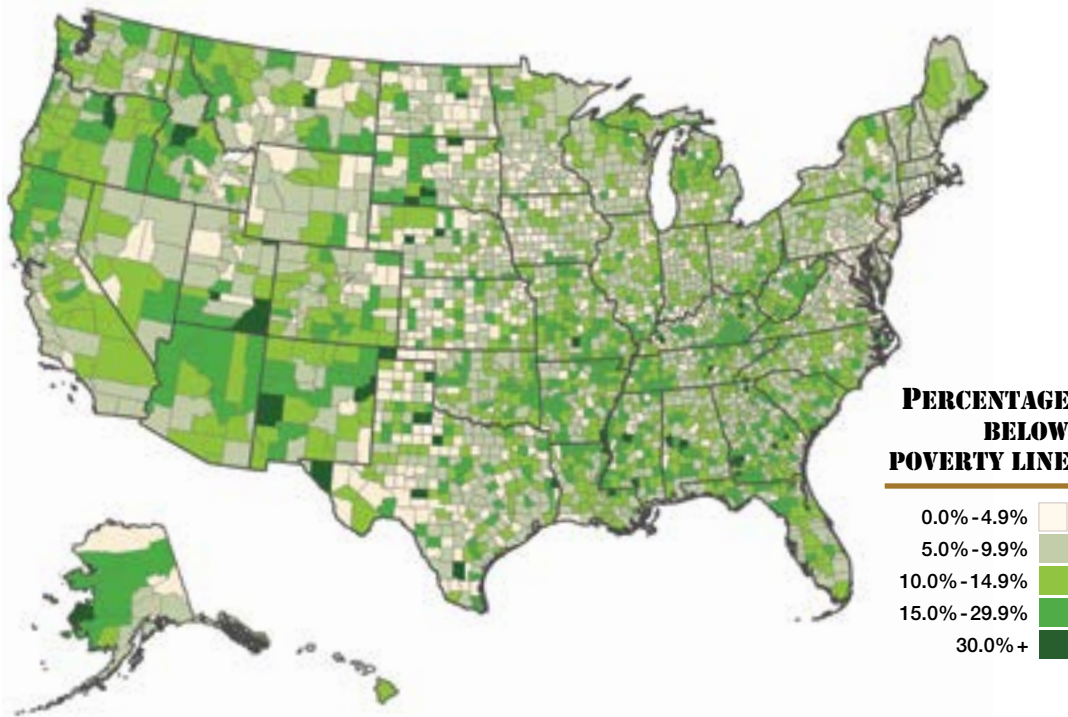
More than 51 percent of U.S. counties, including Puerto Rico, have a rural continuum rating of five or more. States with the largest numbers of rural veterans include Texas, North Carolina, Pennsylvania, Georgia and Michigan. Between 2014 and 2015, 18 states experienced increases in their population of rural veterans.² In almost 30% of rural counties, poverty rates among veterans are higher than the median rate among all veterans nationwide, higher than civilians in their county, or both. (see *Community* section)

Financial complaints: Since 2011, the Consumer Financial Protection Bureau has received complaints from military members, veterans and civilians regarding a variety of financial problems.

¹ Farrigan, T. (2017). *Veterans are positioned to contribute economically to rural communities*. Retrieved from <https://www.ers.usda.gov/amber-waves/2017/september/veterans-are-positioned-to-contribute-economically-to-rural-communities/>

² Cowper Ripley, D.C., Ahern, J.K., Litt, E.R., and Wilson, L.K. (2017). *Rural Veterans Health Care Atlas (2nd edition)* [PDF file]. Washington, D.C.: VHA Office of Rural Health, Department of Veterans Affairs. Retrieved from https://www.ruralhealth.va.gov/docs/atlas/CHAPTER_03_Vets_Enrollees_Pts.pdf

VETERANS 18-64 BELOW POVERTY LINE



This includes foreclosures, identity theft, and debt collection. Complaints have risen each year, both in raw numbers and as a percent of the population, but the rates have been similar among military, veteran and civilian sources. Overall, the likelihood of filing a complaint is not very different, but the types of complaints differ based on military status. Service members are more likely than the civilian counterparts to submit complaints about aggressive attempts to collect debts not owed, but less likely to complain about foreclosures.

State financial supports: A variety of financial supports are provided by states to veterans. With one exception, all states make some provision for property tax relief for disabled veterans. Another benefit that helps veterans regardless of income is relief from income tax. Currently, all but 19 states offer at least some income tax benefit for veterans and/or service members. Such benefits might be important considerations for service members who are transitioning out of the military and deciding where to live.

We are grateful to subject matter experts Meredith Kleykamp of the University of Maryland and Tony Camilli from the Office of Servicemember Affairs at the Consumer Financial Protection Bureau for their advice during the preparation of this report.

Call to Action

- **Focus resources and supports in areas where veterans are at risk. Areas of the country have pockets of veterans living in poverty and/or living in poor, rural areas.**
- **Identify veteran subpopulations in rural communities such as female veterans and elderly veterans. Subpopulations might have distinct needs.**
- **States who are interested in recruiting veterans to live in their communities can examine the role of tax benefits in the recruitment.**

19 states with no state tax relief for veterans



- 1 Alaska
- 2 California
- 3 Florida
- 4 Louisiana
- 5 Michigan
- 6 Mississippi
- 7 Montana
- 8 Nevada
- 9 New Hampshire
- 10 New Mexico
- 11 South Dakota
- 12 Oregon
- 13 Rhode Island
- 14 Tennessee
- 15 Utah
- 16 Texas
- 17 Vermont
- 18 Virginia
- 19 Washington

18 states with increase in rural veteran population



- 1 Arizona
- 2 Delaware
- 3 Florida
- 4 Illinois
- 5 Kansas
- 6 Kentucky
- 7 Maine
- 8 Maryland
- 9 Massachusetts
- 10 Montana
- 11 New Mexico
- 12 New York
- 13 Oregon
- 14 Pennsylvania
- 15 Tennessee
- 16 South Carolina
- 17 Vermont
- 18 Wyoming

View information on income inequality rates



LEGAL

What We Know

- **Veterans and service members face challenges in the civil and criminal legal systems.**
- **States vary widely in legal supports for military members.**
- **Veteran Treatment Courts (VTCs) are becoming much more common across the country, but are not equally distributed.**

Civil and criminal legal systems: Military and veteran families experience many of the same legal issues as civilian families, but they also face unique challenges. The Servicemembers Civil Relief Act (SCRA), the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA), and the Uniformed and Overseas Citizens Absentee Voting Act (UOCAVA) are major federal laws protecting the financial, employment and voting rights of service members.¹ Employer Support of the Guard and Reserve (ESGR) is an organization that works to improve employer support by educating service members and employers about their respective rights and responsibilities, and by operating an ombudsman to assist in resolving USERRA disputes. By 2015, successful ESGR

efforts played a large role in a 31 percent decrease in federal review of cases, compared to the nearly 1,900 cases reviewed in 2011. However, from 2015 to 2016, there was a 20 percent increase in the number of cases,² a concerning trend.

State support: Individual states offer a variety of legal protections for military and veteran families. In some states, veterans can receive access to pro-bono military legal assistance and benefit from state enhancements to the SCRA. Seven states help coordinate pro-bono legal programs and connect qualified attorneys with service members. Five states have introduced legislation to enhance SCRA, while six others are working toward this goal.³

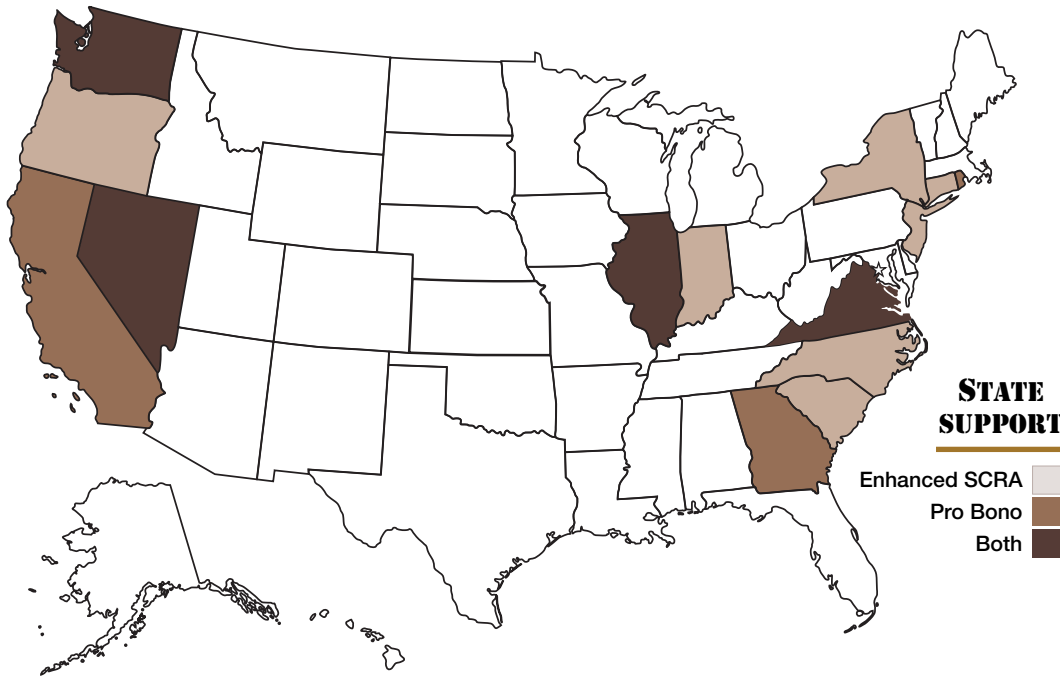
Veteran treatment courts: According to the Department of Justice, incarcerated veterans experience higher rates of mental health issues than their non-military counterparts. The National Inmate Survey, published in 2015, found that 47.6 percent of incarcerated veterans have been diagnosed with a mental health disorder, compared to 36.3 percent of nonveteran inmates.⁴ Statistics like this may be one force behind the recent growth of Veteran Treatment Courts (VTCs). In 2008, the first VTC was established in Buffalo, New York. Based on models of Drug Treatment and

¹ USERRA. (n.d.) Retrieved from <http://www.esgr.mil/USERRA/What-is-USERRA>

² Office of the Assistant Secretary for Veterans' Employment and Training. *FY 2015 Annual Report to Congress*. (2016, July). Retrieved from https://www.dol.gov/vets/programs/userra/USERRA_Annual_FY2015.pdf

³ State Enhancements to the Servicemembers Civil Relief Act (SCRA). (2017). Retrieved from http://www.usa4militaryfamilies.dod.mil/MOS/f?p=USA4:ISSUE:0:::P2_ISSUE:3

STATE LEGAL SUPPORT



Lowest per capita states for VTCs



1	Alabama	20,485
2	Wyoming	24,980
3	Delaware	25,529
4	Michigan	29,697
5	Indiana	30,815

Highest per capita states for VTCs



1	North Carolina	386,212
2	Iowa	224,353
3	Kansas	215,724
4	Maryland	211,735
5	South Carolina	208,628

Mental Health Courts, these collaborative courts direct veterans to treatment rather than incarceration. The National Association of Drug Court Professionals reports that for every dollar invested in drug treatment courts, communities can experience more than \$3 in criminal justice savings alone. For every client, savings in prison costs and other expenses range from \$3,000-\$13,000.

As of 2016, six states lack dedicated VTCs, but the number of VTCs per capita varies widely across the states. It is difficult to know what the “correct” number of veterans per court should be. Ten states have one court for every 45,000 or fewer veterans. Five states have one court for every 200,000 or more veterans. Nevertheless, the number of VTCs has grown exponentially. In 2010-2011, 85 VTCs operated across the country; by 2016, that number had grown to 300.

We are grateful to subject matter experts Jason Vail of the American Bar Association Standing Committee on Legal Assistance for Military Personnel, and Elizabeth Singer of the Department of Justice Servicemembers and Veterans Initiative for their guidance during the preparation of this report.

Call to Action

- **Because no national standards for VTCs exist, it is difficult to conduct comparisons across states or courts. Some states have specific guidelines and certification for VTCs, while other states combine these courts with other specialty courts. Identify the states that have VTC certification or other criteria and assess if these can be duplicated.**
- **Courts vary in whether or not they will process felony charges. At this point, there is no central repository for statistics on the number of veterans seen in these courts, the nature of offenses adjudicated or the outcomes. Court administrators should work to document and track statistics, including recidivism rates for each court, and make the information available to the public.**

[View the full list of states with Veteran Treatment Courts and veterans per capita.](#)

⁴ United States Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. (2015). *National inmate survey, 2011-2012*. Ann Arbor, MI: Inter-university Consortium for Political and Social Research. Retrieved from <https://doi.org/10.3886/ICPSR35009.v1>



The Purdue Center for Regional Development (PCRD) seeks to pioneer new ideas and strategies that contribute to regional collaboration, innovation and prosperity. Founded in 2005, the Center partners with public, private, nonprofit and philanthropic organizations to pursue applied research and engagement activities. Its key goals include: (1) developing and strengthening access to high quality data and visualization tools to guide the development of local and regional plans; (2) advancing the capacity of regions to pursue programs and projects that embrace the principles of collaboration, broad-based engagement and sound planning; (3) developing and promoting the delivery of programs and projects that build on the existing economic assets and emerging business development opportunities of regions; and (4) exploring the mix of factors shaping the overall well-being of people and the local/regional places in which they live.



The Military Family Research Institute (MFRI) at Purdue University conducts research on issues that affect military and veteran families and works to shape policies, programs and practices that improve their well-being. Founded in 2000, MFRI envisions a diverse support community that understands the most pressing needs of military and veteran families. To achieve this, MFRI collaborates to create meaningful solutions for them. This nationally-recognized organization is located at Purdue University's College of Health and Human Sciences, in the Department of Human Development and Family Studies.

We would like to thank the individuals and organizations who provided guidance and assistance in the preparation of this report and the *Measuring Communities* site.

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Military Family Research Institute

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American Red Cross

Blue Star Families

National Guard Bureau



MEASURING COMMUNITIES
Mapping Progress for Military & Veteran Families

