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Student Veterans with Invisible Disabilities: Accommodation-Seeking in Higher Education

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Abstract

Large numbers of recent generations of U.S. military veterans are returning to postsecondary education and utilizing the Post 9/11 GI Bill. Some of these student veterans may have invisible/non-apparent disabilities such as Post-Traumatic Stress Disorder, mild Traumatic Brain Injuries, or other physical or sensory conditions that do not require visible prosthetics. These invisible/non-apparent disabilities may affect student veterans' capacity to adjust to the learning environments in educational settings. Minimal research assesses factors impacting student veterans' disclosure of their invisible/non-apparent disability to receive accommodations. The authors offer a conceptual article that includes a literature search of military veterans and help-seeking behaviors in higher educational settings based on the following criteria: 1) stigma experiences among student veterans with non-apparent disability; 2) barriers to engaging in help-seeking behaviors; and 3) conditions for acquiring counseling and other student support services in a non-military postsecondary educational setting. Sixteen articles met the search criteria and offer contextual factors that, if accounted for, may influence some student veterans to disclose to seek classroom accommodations for an invisible/non-apparent disability should the need arise. The article concludes by the authors applying theories and recent findings related to enhancing veterans' willingness to address invisible/non-apparent disabilities and engage in help-seeking behaviors within higher education settings.

Keywords: Student Veterans, Stigma, Help-Seeking Behaviors, Accommodations

Introduction

The number of U.S. student veterans enrolled in a postsecondary/higher education institutions between the years 2000-2012 has more than doubled, from approximately 400,000 to almost 850,000 (Queen & Lewis, 2014). From herein, the term "student veterans" refers to not only veterans from the four branches, but also those in Active Duty and Reserve and National Guard Components. When compared to the overall student population, although student veterans enroll in college at higher percentages than the nonveteran student population, some studies indicate that retention percentages among student veterans is 65%, compared to 76% for nonveteran students (Texas State, 2012; 2013). However, Cate (2014) notes that student veterans may graduate at comparable rates as their non-veteran peers; and further points out that research on student veteran retention lacks longitudinal studies as well as appropriate tracking systems. Definitions of success and proper measures are also inconsistent. Regardless of the ambiguous nature of evidence, student veteran retention is a concern because completing a degree can be essential to securing employment and succeeding in society post-military service and in general (Coll & Weiss, 2015). Matriculation is also critical because more than \$10 billion has been dedicated to the Post-9/11 GI Bill for veterans (Selber, 2015).

One potential issue in the student veteran population that has not been empirically addressed in the literature is whether student veterans are less likely to seek academic assistance, counseling or

disability services for invisible/non-apparent disabilities. For purposes of this article, “invisible/non-apparent disabilities” will refer to invisible injuries such as Post-Traumatic Stress Disorder [PTSD] or mild Traumatic Brain Injury [mTBI], or other physical or sensory conditions that do not require the use of visible prosthetics. Twelve to 30% of returning veterans have non-apparent service related disabilities, such as PTSD and/or mTBI (Higgins et al., 2014). Disclosure among non-veteran students is somewhat low in the college setting; a nationally representative sample of 35% of postsecondary students disclosed their mental health disability to a campus official (Newman & Madaus, 2015). That statistic may demonstrate that traditional methods aiding student veterans and non-veteran students may be ineffective. Applying existing exploratory research findings from non-veteran students (Kranke et al., 2013) suggests that non-veteran students with a mental health disability are reluctant to disclose for the following concerns related to stigma: 1) fear of a negative perception from their professor(s); 2) concerns about being treated differently than peers; and 3) the desire to feel autonomous. Furthermore, various prior studies have indicated that the reasons for the hesitancy in disclosing include lack of self-advocacy skills, concerns about fair treatment from the institution, concerns about faculty perceptions, and lack of knowledge with regards to disability laws and campus services (Carney et al., 2007; Thoma, Baker & Saddler, 2002).

Shackelford (2009) suggests that student veterans may be more often hesitant to self-disclose disabilities acquired during military service, and if they have recently acquired a disability, they may also not be aware of the accommodations available to them (Kim & Cole, 2013). Thus, if students with invisible/non-apparent disabilities in the general population are hesitant to disclose and seek accommodations, then we hypothesize that student veterans with non-apparent disabilities (particularly those involving mental health that are commonly stigmatized) could be even more reluctant to disclose due to the influence of military cultural factors.

During military training, service members are instilled with values such as to pull oneself up by one’s bootstraps, and asking for help for emotional challenges may be a sign of weakness. “There are issues of understanding the unique concerns of disclosure among student veterans due to the previous perceived stigma associated with identification of special needs while serving in the military” (Selber, 2015, p. 144). Therefore, we hypothesize that some student veterans may delay their disclosure of a non-apparent disability, or be less apt to disclose at all, in order to receive classroom accommodations due to the internalization of some military cultural norms and the stigma associated with help-seeking behaviors. Vacchi and Berger (2014) note that this military socialization establishes them as non-traditional students even if they are of similar age to their non-veteran college-attending counterparts. Previous research established that non-traditional students (such as those who work full-time or are older) use fewer university services, including disability services, than their younger, non-employed counterparts (Gilardi & Guglielmetti, 2016).

Student veterans are a unique population in postsecondary educational settings because of contextual factors related to their life experience prior to being in the classroom. For instance, they have likely travelled outside of the U.S. and have more exposure to different lifestyles than their non-veteran peers. In addition, student veterans may have experienced multiple traumas associated with combat, such as being wounded, or losing close friends, among others.

Besides life experience, cultural factors also impact the veterans’ learning experience. Fifty-seven percent of postsecondary institutions reported that they give some level of programming to assist student veterans (Cook & Kim, 2009); however, the evidence on how effective these programs are in meeting the needs of student veterans in the long run towards degree completion is yet to be fully investigated with rigorous research methods. Some student veterans have difficulty interacting with other non-veteran students and/or faculty and staff because these individuals, from the student veteran perspective, cannot identify with or appreciate veterans’ experience of serving for their

country (Greden et al., 2010). The lack of university cultural competence with regards to military culture is multi-faceted as student veterans may tend to isolate, which can make meaningful contributions to class and group projects more difficult (Kranke, Saia, Gin, Heslin & Dobalian, 2016). In addition, student veterans may be reluctant to utilize campus services because of perceptions that the staff and professionals cannot empathize with the veterans' situation (Selber, 2015).

Providing an optimal learning experience in institutions of higher learning for veterans is significant because they bring traits and skills that speak to unique strengths, including grit, perseverance, team work, camaraderie, loyalty to fellow military veterans, refusal to give up in the face of adversity, and a sense of responsibility that includes serving others (Kranke et al., 2017; Cook, 2004). These traits could be considered strengths in achieving goals associated with completing missions, as well as delegating responsibility within high-stake projects, which can be more than favorable traits in college completion.

Framework

The findings of Kranke et al. prior exploratory research (Kranke, Taylor, Jackson, Floersch & Anderson-Fye, 2013) demonstrates the lead author's experience in this realm, increasing credibility or validity. Kranke et al. (2013) identified factors that impact the trajectory of non-veteran college students with a mental health disability to navigate the accommodations process. Results revealed that students made the decision whether or not to disclose under one of the following four conditions:

- 1) Fear that their mental health disability will greatly impact functioning critical to academic achievement: Some students disclosed in the beginning of the term out of fear that their disability and symptoms would exacerbate. Some students also disclosed when their disability impacted their ability to function in the classroom.
- 2) The stability of their mental health disability: Some students did not believe their disability would interfere with their ability to focus on their academics, therefore, did not feel it necessary to disclose their disability. They wanted to have a safety net available only if necessary.
- 3) Some students did not disclose for fear of a negative perception from their professor(s) and/or concerns about being treated differently than peers; and
- 4) Some students did not disclose because of a desire to feel autonomous.

It is worth stating that not all non-veteran students in the aforementioned study disclosed their mental health disability, and that some of those who did not disclose reported being academically successful without utilizing accommodations. The current paper will focus on the third and fourth aspects—as they relate to stigma—and how student veterans can overcome stigma barriers to navigate the accommodations process. We further add to the current literature by expanding the operational definition of invisible/non-apparent disability to include mild TBI and other physical or sensory conditions that do not require visible prosthetics because they have become much more prevalent among this generation of student veterans.

This more inclusive conceptualization of invisible disabilities sheds light on an understudied topic critical to promoting student veteran persistence. This paper builds upon the factors that impact the decisions of students with disabilities in the college setting to disclose to receive classroom accommodations. More research is needed on how to aid student veterans with invisible/non-apparent disabilities commonly linked to challenges in learning (Glover-Graf, Miller, & Freeman, 2010). Proposed modifications can then inform approaches to mitigate stigma in this student population and provide the appropriate institutional supports.

Previous research (Kranke et al., 2017; Dickstein, Vogt, Handa, & Litz, 2010; Sayer, Carlson, & Frazier, 2014) indicates that veterans have the potential to engage in adaptive and flexible thinking

to overcome stigma barriers related to help seeking. This flexible thinking is dependent on peer support and occurs over time because of wanting to improve one’s condition. We are not proposing that every student veteran with an invisible/non-apparent disability must disclose their condition and seek accommodations; it is their right to make that determination. Rather, we explore how student veterans may have a smoother transition into the college setting, and ultimately feel comfortable about disclosing their invisible/non-apparent disability should the need arise.

Methods

The first and second author conducted a literature search of military veterans and help-seeking behaviors in higher educational settings. We searched the PsychINFO and ERIC databases using the terms “veteran” and “classroom accommodations,” which resulted in a combined total of nine hits. We then expanded the search in the aforementioned databases to include the terms “veteran,” “seeking help,” and “university,” which generated an additional combination of 149 hits. The first and second author conducted an initial review phase by dividing up and reading titles and abstracts of these 149 hits, based on the following criteria: 1) stigma experiences among student veterans with a non-apparent disability; 2) barriers to engaging in help-seeking behaviors; and 3) conditions for acquiring counseling and other student support services in a non-military postsecondary educational setting. Articles needed to meet all three criteria to be included in the review. The list of potential articles was reduced to 24, and then we eliminated those articles that were older than 10 years. The first and second authors independently read the full text of the 16 remaining articles and that content provided us with a list of factors that may make student veterans less willing to disclose their disability in educational settings (See Table 1). The first and second authors came to an agreement on most of the factors, and when there were discrepancies, the particular author had to provide a rationale for including it. The list was then expanded to account for the additional factor. Ultimately, reporting of salient themes were based on the notion of substantial significance (Patton, 2002), which is not based upon frequency, but rather how it informs the existing literature, either confirming or adding a nuanced understanding.

Table 1
Results of literature review

Authors	Type of Article	Relevance
Stigma among student veterans with a non-apparent disability		
Whealin, Kuhn, & Pietrzak (2014)	Review	Provides framework for understanding help-seeking behaviors and tools to promote attitude and behavior change among veterans
Kulesza, Pedersen, Corrigan, & Marshall (2015)	Quantitative	Investigation of young adult veterans found higher perceived public stigma of treatment seeking was significantly related to lower treatment utilization

Kukla, Rattray, & Salyers (2015)	Mixed methods	Veterans serving in combat reported significantly more health-related barriers than veterans who did not serve in combat
Dickstein, et al. (2010)	Review	Identifies cultural aspects of serving in the military that enhance feelings of self-stigma; Proposes intervention strategies to help veterans overcome self-stigma.
Cornish, Thys, Vogel, & Wade (2014)	Qualitative	Identifies barriers to reintegrating: troubles relating to others, psychological difficulties, and behavioral problems; barriers to help-seeking include: stigma and concerns about the therapy process. Proposes outreach with veterans as a solution.
Schreiber & McEnany (2015)	Review	Identifies social and institutionalized factors that promote veteran stigma and interventions that can mitigate stigma
Michalopoulou, Welsh, Perkins, & Ormsby, (2017)	Review	Describes how rates of stigma among veterans have multiple subgroups and characteristics, making it difficult to generalize.
Barriers to veterans engaging in help-seeking behaviors		
Castro, Kintzle, & Hassan (2015)	Conceptual	Contains paradoxes associated with being a warrior and not wanting to show vulnerabilities that make combat veterans hesitant or less willing to seek help
Glover-Graf, Miller, & Freeman (2010)	Qualitative	Iraqi veterans reported four themes that impact the use of educational accommodations: professional concerns, social interactions, behavioral and emotional challenges, and changing life views.
Kranke et al. (2017)	Qualitative	Demonstrates how combat veterans can engage in thought restructuring to overcome stigma and engage in help-seeking behaviors
Ashley & Brown (2015)	Quantitative	Combat veterans prefer to seek help from other combat veterans. A feeling of combat elitism was found among veterans
Sayer, Carlson, & Frazier (2014)	Review	Addresses readjustment factors among veterans with mental and physical health disorders and provides risk and protective factors to help these veterans sustain well-being

Weiss, Coll, & Metal (2011)	Conceptual	Combat veterans' worldviews and values from a "warrior ethos" perspective may impact help-seeking behaviors
Conditions for acquiring services in post-secondary educational settings		
Cook & Kim (2009)	Report/ qualitative findings	Compiled from a list of over 700 U.S. universities; identifies individual programs and policies by university for student veterans to access campus services
Selber (2015)	Conceptual	Suggests approaches for campus services that can make academic support, behavior health services and career services more veteran friendly
Shackelford (2009)	Conceptual	Proposes issues that impact self-disclosure among veterans in college with disabilities and provides suggestions for addressing veterans' disclosure

In the second step, we conducted the constant comparative method (Boeije, 2002) by comparing the salient themes from our literature review with those factors consistent with the extant model (Kranke et al., 2013). This comparison helped us identify those factors that may be unique to the student veteran population. Similar to the research conducted in developing the extant model, we focused on identifying factors related to culture, perceptions of others, perceptions of help-seeking, and feelings associated with "differentness."

Application to the Student Veteran Population

This section builds on the findings related to factors associated with stigma among non-veteran students and disclosure of their non-apparent disability to receive classroom accommodations (Kranke et al., 2013):

- 1) Fear of a negative perception from their professor(s);
- 2) Concerns about being treated differently than peers with non-apparent disabilities; and
- 3) The desire to feel autonomous.

See Table 2 for a comparison of non-veteran students with student veterans as we identify nuanced aspects that may add complexities to the extant model:

Table 2

Proposed nuances to extant model (Kranke et al., 2013) compared with student veterans

Extant model/applicability to non-veteran students with a mental health disability	Proposed modification/applicability to student veterans with an invisible/non-apparent disability
Normality: Students want to be treated the same as peers who do not have a mental health disability or request accommodations (p. 43).	Jeopardy of a Double Stigma: A student veteran may already feel stigmatized for his/her military service. Additionally, having a disability could enhance feelings of "differentness" from non-military or non-veteran students (Glover-Graf, Miller & Freeman, 2010; Selber, 2015; Shackelford, 2009).

<p>Professor/Faculty Perspective: For students, opinions of professors are paramount, and concerns that future opportunities that may evolve from professor recommendations may be compromised (p. 43).</p>	<p>Lack of Cultural Competence: Some student veterans may not form [intimate] relationships with others, causing feelings of isolation and poor self-esteem, among others (Castro, Kintzle & Hassan, 2015). Student veterans may feel that college- or university-led student services do not empathize with their situation because they do not understand the military culture (Coll & Weiss, 2015). Therefore, we propose military-connected students may refuse to ask for help to avoid interaction with others who “don’t get it” (Greden et al., 2010).</p>
<p>Autonomy: College students believe they should be independent and not in need of assistance, largely due to attaining the developmental milestone of separating from parents (p. 43).</p>	<p>Fear of Asking for Help: “[Combat] veterans are strong and courageous, yet afraid of being viewed as weak or damaged” (Castro et al., 2015, p. 303). Therefore, military-connected students may choose not to ask for help because it may make them look weak or damaged. The fear of showing vulnerabilities is usually engrained at the beginning of military training and embraced throughout a veterans’ tour of duty (Cornish et al., 2014; Michalopoulou et al., 2017; Schreiber & McEnany, 2015). Although non-veteran students may not necessarily perceive them as weak or damaged for asking for accommodations, student veterans do worry about perceptions of their veteran peers and/or others in an authoritative position, such as a faculty member (Kukla, Rattray & Salyers, 2015, Shackelford, 2009).</p>
<p>N/A</p>	<p>Potential for a Cultural Mismatch: Being a non-traditional student in an academic setting, some student veterans are older than non-veteran students, they may be from families that have less experience in university settings, and they may be financially independent from their families of origin (Selber, 2015). Academic culture is not driven by team and mission needs, rather, is more individualized (Ashley & Brown, 2015; Castro et al., 2015) This mismatch could enhance feelings of “us vs. them” (Student veteran and non-veteran student) and cause student veterans to disengage from the classroom, class content, or other students.</p>

Implications, Strategies and Future Directions

The factors that underlie students’ unwillingness to disclose their invisible/non-apparent disability to seek accommodations are largely associated with cognition (i.e., thoughts) and reinforced beliefs. Therefore, we suggest that student veterans should be encouraged to engage in thought restructuring or reframing to help them adopt a more adaptive and/or balanced outlook while gaining control over their life situation and engaging in meaningful activities (Hansson & Bjorkman, 2005). Specifically, thought restructuring includes a process of identifying irrational thoughts, challenging/disputing them through feelings associated with having concerns validated and normalized, and replacing those cognitive and reinforced beliefs with more balanced and rational thoughts (Kranke et al., 2017). Borrowing from findings in our literature review on veterans’ experiences of stigma in addressing invisible/non-apparent disabilities (Kranke et al., 2017; Castro et al., 2015; Dickstein et al., 2010; Glover-Graf et al., 2010; Selber, 2015; Shackelford, 2009), we propose the actions outlined in Table 3 to enhance student veterans’ likeliness of disclosure of their non-apparent disability to receive

classroom accommodations when they are experiencing challenges in their learning process related to their non-apparent disability. To promote effectiveness, the proposed actions require participation from key stakeholders including student veterans, educators in the classroom, and program (university) administrators. In implementing the proposed actions, care must be taken to ensure that student veterans are not expected to don a cloak of responsibility for continually educating non-veteran students, faculty, staff, and administration. Speaking for all veterans in a classroom setting, being encouraged to disclose an invisible/non-apparent disability to set a precedent, or otherwise being perceived as the person to answer questions about the military or student veteran experience will only serve to highlight differences and potentially enhance feelings of stigma.

The proposed contextual factors can inform postsecondary educational institutions and educators on culturally sensitive approaches to support student veterans with invisible/non-apparent disabilities. Becoming culturally inclusive educators who understand and validate the student veteran experience is critical to student achievement and retention (Samuels, 2014). Weiss (2015) offers information on culturally appropriate classroom strategies to build a sense of community in the classroom with student veterans where faculty members take the lead in educating themselves and others about military culture. Faculty are also reminded to be mindful of their own worldviews, stereotypes, and political ideologies and how these elements play out in the classroom experience particularly towards student veterans.

The potential underlying factors addressed in the current article offer implications for the emotional well-being and academic success of student veterans by mitigating stigma-associated factors for those with invisible/non-apparent disabilities. Future empirical research is needed to assess the robustness of the proposed contextual factors and their relevance to student veterans in higher education and whether or not these are unique to the U.S. military veteran experience (or if these factors are also present in other military systems outside of the U.S.). Additionally, assessing effectiveness of the suggested strategies may yield further insight into the stigma reduction process.

Table 3
Roles in reducing stigma among student veterans with invisible/non-apparent disabilities

Element of stigma addressed	Role(s) of educator in classroom	Role of student veteran	Role of administration
Reframing or thought restructuring associated with stigma and help-seeking/autonomy	<p>Modify term “disclosure to receive classroom accommodations for a disability” to a term that is more flexible</p> <p>Normalize the need for disclosure by illustrating positive stories of students who disclosed when needed</p>	Have recurring discussions and monitor progress with other student veterans and/or liaisons.	Expand efforts to educate and train educators in classroom on military culture. This awareness will help to recognize those terms or topics that trigger student veterans and to frame topics in a flexible manner. It will also put the burden of cultural awareness on educators instead of the student veterans themselves.

Perceptions of non-veteran peers and student veteran peers	Engage student veterans to interact with other student veterans and non-veteran students in the classroom setting. Attempt to get student veterans actively engaged in lectures and group discussions to promote feelings of value, while recognizing that student veterans should not be expected to carry the mantle for educating others.	Engage in learning activities with both veteran and non-veteran peers to reduce feelings of differentness and disconfirm stereotypes non-veteran students may have had of student veterans.	Set up events that promote interaction and inclusivity between all student groups as well as faculty and staff.
Professor/Faculty Member perspective	Engage in trainings to become more familiar with military culture	Invite faculty and staff to attend activities that focus on veterans and provide exposure to military culture	Create professional development sessions on campus partnering with local veteran organizations.

Conclusion

This conceptual article seeks to enhance awareness of and the need for future research on student veterans and factors that may impact their willingness to disclose to seek academic accommodations for a non-apparent disability in higher education settings. A literature review was conducted that highlighted the contextual factors and values of military culture that may contribute to barriers to help-seeking, while also promoting strengths. These findings were then applied and compared with an existing model among non-veteran students with a mental health disability. We posit that some student veterans may be less likely to disclose of their invisible/non-apparent disability to seek academic accommodations because of any combination of the following four contextual factors:

1) the jeopardy of a double stigma; 2) lack of cultural competence among educators and persons providing academic support services; 3) student apprehension in asking for help; and 4) a potential cultural mismatch between student veterans and their non-veteran peers.

The findings from the literature review and the application to the existing model suggest that some stigma barriers held by student veterans that minimize disclosure and help-seeking may be overcome by assisting students to engaging in reframing or thought restructuring of their negative perceptions. Additionally, participation and buy-in from key stakeholders in the academic setting is essential for any model to work as it was intended. Lastly, future research should empirically test the proposed nuances among student veterans that we have proposed here, as well as the suggested interventions for reducing the potential stigma experience for student veterans with invisible/non-apparent disabilities in institutions of higher learning.

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