

Wounded Warrior Careers

A Four-Year Report

NATIONAL ORGANIZATION ON
DISABILITY





About NOD

THE NATIONAL ORGANIZATION ON DISABILITY was founded in 1982 with the mission of expanding the participation and contribution of America's 54 million men, women, and children with disabilities in all aspects of life. In recent years, NOD has concentrated on the mission of increasing employment opportunities for the 79 percent of working-age Americans with disabilities who are not employed.

With programs on the ground, NOD is demonstrating new employment practices and models of service delivery, evaluating results, and sharing successful approaches for widespread replication. We are conducting research on disability employment issues, including the field's most widely used polls on employment trends and the quality of life for people with disabilities. And our subject matter experts in disability and employment provide consulting services to public agencies and employers seeking to harness the unique talents that people with disabilities can bring to the workforce.

About This Report

The following pages describe the results and findings of more than three years of effort by the National Organization on Disability to transform the career transition process for veterans with the most serious disabilities. Here, we outline the challenges faced by veterans with disabilities and their families, employers, and service providers in making a successful transition to a civilian career. We offer suggestions and solutions to the challenges of such a transition. And we hope you will find valuable insights into how you might integrate our work into yours.

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This report presents the combined results of more than four years of research and hands-on experience working with some 600 Wounded Warriors and their families during the transition from military service to civilian careers. The information is drawn from four main sources:

Initial focus groups and interviews conducted by NOD and the Army Wounded Warrior Program, beginning in 2007. These direct consultations with more than 200 veterans and their family members documented the challenges they were facing and the supports they needed. This research led to the initial design of the Wounded Warrior Careers demonstration, including the Theory of Change on which it was based.

The demonstration program itself, in which the Army, NOD, and a core group of professionals on the WWC staff developed firsthand experience in working with veterans, their families, and their career goals. Besides the practical learning that comes from implementing a new program, this experience provided a continuous stream of feedback and guidance from participants and service partners on what was working, what needed to be expanded or contracted, and what new approaches ought to be tested. The program was deliberately designed for this kind of learning. Career Specialists were given broad guidance in how to implement the model in the field, guided by the underlying theory of change and some fundamental principles developed during the preliminary interview phase.

An extensive body of data that has been captured and maintained by NOD and Economic Mobility Corporation. The data are drawn from two sources. The first is a complete longitudinal record of 233 participating veterans' health, family status, income, employment and educational status, work history, and other factors, beginning at the start of the initial intake process and maintained throughout the study. The second is the result of two independent surveys of participating veterans, conducted at the 12- and 24-month points of the program. The Economic Mobility Corporation collected the data and conducted these surveys for NOD by interviewing veterans, Career Specialists, Advocates and other key participants in the system; provided data analysis and updates during semi-annual cross site meetings; and provided monthly reports.

Separate qualitative research on the career interests and needs of veterans with Post-Traumatic Stress and Traumatic Brain Injury, conducted by NOD and funded by the Institute for Economic Empowerment. The resulting study,

called Return to Careers, synthesizes the results of two years of literature review and in-depth interviews with more than 125 veterans, their family members, service providers, and employers.

EXECUTIVE SUMMARY

Since late 2008, the National Organization on Disability has been working with severely injured veterans returning from Iraq and Afghanistan as they plan, prepare for, and complete the transition from military to civilian careers. Beginning with nearly two years of research and consultation with injured veterans and their families, NOD designed and built a new program for this purpose, called **Wounded Warrior Careers**. The program was created at the invitation of the U.S. Army and continues to work in close partnership with the Army Wounded Warriors program, known as AW₂. In its first four years, Wounded Warrior Careers has served 275 seriously injured veterans, of whom 70 percent are now in jobs, education, or training. In contrast, for Wounded Warriors with similar disabilities, not enrolled in WWC, it has been reported to NOD that the comparable figure is between 30 and 40%.

The program began as a demonstration, intended to test various ways of meeting the needs of injured veterans who are ready, willing, and able to rebuild their careers after retiring from the military with a disability. It has continued to expand and document the methods that work best. Beginning with three locations chosen for their high concentration of Wounded Warriors — North Carolina, Colorado, and metropolitan Dallas, Texas — the program is now prepared to expand to two more locations, with a third under active consideration.

WWC begins with a referral from an AW₂ Advocate, the Army's principal liaison with Wounded Warriors. The Advocate typically enjoys a strong confidential relationship with injured service members and a good working knowledge of their readiness and determination to begin thinking about a civilian career. This "warm referral" brings the veteran to WWC with an expectation of trust and partnership that are essential to a relationship that may need to last for several years, through multiple stages of planning, preparation, and course-correction.

A trusting relationship is particularly important considering the kinds of injury that are most common among veterans in WWC. These prominently include Post-Traumatic Stress Injury (PTSI) and Traumatic Brain Injuries (TBI)¹, often accompanied by major clinical depression. Until they are properly treated and managed, the effects of these conditions can seriously complicate the process of building clarity, confidence, and determination about a career path. Consequently, the relationship between the Wounded Warrior and the Career Specialist, WWC's frontline professional, incorporates six essential qualities: It is personal, proactive, prolonged, holistic, results-focused, and collaborative.

This means that Career Specialists deal with each veteran's opportunities and challenges as an individual, unique case. They take the initiative to keep the discussion going, often meeting with veterans in their homes and communities and making certain that momentum is maintained throughout the process. The relationship extends not just to employment, but well beyond the first job, to ensure that momentary setbacks or frustrations don't derail progress. Career Specialists work not with veterans alone, but with their families and, later, with their employers to ensure that career goals are integrated with other aspects of family life, health, and well-being. Everything the veteran and Career Specialist do together is organized around a succession of milestones, designed to produce concrete accomplishments at every step of the transition. Along the way, WWC tracks data on these accomplishments and aggregates the data to learn what methods are most successful and what needs or problems deserve more attention. Finally, the program is not intended to provide all services; Career Specialists seek out partnerships with expert organizations including education, training, workforce, and health providers to make certain that various activities are part of a coherent whole, consistently leading to the goal of satisfying, long-term careers.

The first stage of the Wounded Warrior Careers experience is **Career Planning**, when veterans and Career Specialists chart a realistic but effective path from military to civilian life. They explore the veteran's interests and ambitions, formulate goals, identify obstacles, and sort through the steps and available resources that could help overcome the obstacles and reach the goals. This stage ends with the development of a Career Action Plan, a long-range roadmap, covering five or more years, developed jointly by the veteran and the Career Specialist.

The relationship extends not just to employment, but well beyond the first job, to ensure that momentary setbacks don't derail progress

Next comes **Career Preparation**, when the Career Action Plan begins to be turned into action. Depending on what the plan calls for, the veteran might enroll in education or training, pursue referrals to other services and supports, and, when appropriate, take a step into transitional or supported employment. Career Specialists work hand-in-hand with them at every step in this process, sometimes accompanying them to explore options or working with them on applications for benefits. In the third stage, **Job-Seeking Support**, Career Specialists guide veterans through the actual work of translating interests, abilities, and skills into a job and a career, including helping them develop a résumé, introducing them to prospective employers or job-search programs, helping them plan and negotiate accommodations they may need on the job, and seeking out job opportunities that might match their goals.

In **Post-Placement Support**, the final stage, Career Specialists offer an extended period of guidance and support with problem-solving after the veteran takes a job. They may tackle issues such as housing, ongoing job coaching, interacting with employers, on-the-job performance, and general advocacy on the veteran's behalf. Here, the Career Specialist gains another client: the employer. Employers may need help in recruiting and assimilating veterans with disabilities into the workforce, making necessary accommodations, or simply understanding the veteran's transition and dispelling misplaced worries or preconceptions.

As the field of workforce development becomes more familiar with the needs of injured service members, more and more organizations are beginning to offer programs tailored to their needs. NOD has therefore committed itself to encouraging and enriching this development, with efforts to expand avenues of communication, consultation, and networking among the various programs and organizations that seek to serve veterans. That includes a vigorous effort to track our own progress, measure outcomes, document what we learn, and share that information as broadly as possible.

The transition from the all-encompassing regimen of military life to the free-form competition of the civilian labor market is difficult for veterans under the best of circumstances. But for Wounded Warriors, suddenly and violently separated from a career to which, in many cases, they had planned to dedicate their lives, and thrust into a civilian job market where their skills may be poorly understood and undervalued, the transition can be far more forbidding. Add in the effects of PTSI and TBI — conditions that complicate planning, learning, and confidence, the most basic requisites of starting a new career — and the need for support grows much deeper. The standard model of self-directed workforce programs is much less likely to work for injured veterans. Something fundamentally different is required. That is the reason for Wounded Warrior Careers.

The successful transition of injured veterans into satisfying civilian employment provides an invaluable opportunity for the United States to continue benefiting from the dedication, talent, and leadership of its bravest young people. But more fundamentally, making sure that this transition is successful is the ultimate debt we owe to those most severely injured in their country's service. The question that WWC seeks to answer is therefore not whether such an effort is called for, but how creative, smart, and effective that effort can be.

POINT OF DEPARTURE | A VETERAN'S STORY

[Note: No story is typical. Every Wounded Warrior's experience is unique. This report begins with a single case, not because it could represent all circumstances, but because it illustrates in specific terms why — with so many available programs for veterans, people with disabilities, and people seeking work — it is essential that America's most seriously wounded veterans have a dedicated source of personal, prolonged, and proactive support as they make the transition from military sacrifice to civilian careers. The remaining sections of this report describe an approach to providing that service: the Wounded Warrior Careers Demonstration Program. But to understand the program, it helps to begin with an understanding of the people it serves, the challenges it is designed to overcome, and the abilities of Wounded Warriors, whose service to their country has been merely interrupted.]

Four separate times in a single year's deployment in Iraq, Staff Sgt. Ray Duran, U.S. Army (ret.)², was riding in a vehicle that was hit by a roadside bomb. Over the course of that same year, based with the 3rd Brigade, 4th Infantry Division, in Ba'qubah, northeast of Baghdad, he took part in more than 900 missions, including more than a dozen fire-fights and repeated exposure to enemy fire, blasts, and shockwaves. In spite of all this, he somehow made it back to Fort Carson, Colorado, at the age of 32, without permanent physical injury. Or so it appeared.

Sergeant Duran's wife, Lisa, was first to notice the extreme changes of mood, the constant nightmares, outsized reactions to unexpected events or chaotic situations, episodes of confusion or panic seemingly without cause. Soldiers in his unit began to feel the effects of his unexplained bursts of anger, failures of short-term memory, uncharacteristic breaches of military discipline. As the episodes of sudden bewilderment or rage began to mount, his commander referred him for a medical evaluation. He was diagnosed with Post-Traumatic Stress and Traumatic Brain Injury — common consequences of sustained exposure to violence and severe blows or jolts to the head.

In time he was medically retired from the Army and referred, as a consequence of his injuries, to the Army Wounded Warrior (AW₂) program. There, a designated Advocate would help him navigate the often perplexing array of services and benefits to help him re-enter civilian life and continue his medical care and counseling.

But this is not how Ray Duran had intended to leave the military. An intense competitor and athlete, with a drive that even friends admirably describe as extreme, he had been working toward promotions, distinctions, positions of authority and leadership. He had no interest in retirement, counseling, and (what he considered worst of all) adjusting to the effects of cognitive and psychological disabilities.

Though he did not fully appreciate it at the time, his AW2 Advocate fully shared his vision: a rewarding career, challenges, opportunities to excel, advance, and lead. The Advocate also recognized that a transition from military to civilian life, an unexpected change in career and lifestyle, and the development of a healthy, long-term management of his injuries would all take time, planning, counseling, and perseverance. The Advocate referred him to Wounded Warrior Careers (WWC), a program specifically designed to help him plan and advance on a course of education, training, ongoing care, and satisfying work.

But seeking help, making plans, and patiently acknowledging constraints were simply not things Ray Duran did. He was determined to be what he called “healed,” once and for all, and to organize his life swiftly back onto a track of escalating challenges and breakthrough achievements. On his own, he applied for an out-of-state residential treatment program for TBI and PTSI — a useful program, but one that he persuaded himself would provide a “cure” for his injuries. He spent the next six months there, without notifying WWC or counselors and physicians back home. They were left with little more than unmet appointments and unreturned phone calls.

Six months later, convinced that he was now “healed” and once more ready to take charge, he enrolled in a university close to home, with a full and demanding course load and a plan to major in chemistry. It was a typically bold and ambitious move, taken entirely on his own initiative with virtually no help from anyone. But it had some serious drawbacks. When not effectively managed, the effects of PTSI and TBI can involve memory problems, trouble focusing and concentrating, a tendency to be disorganized and lose track of time, and reactions of anger, panic, or severe clinical depression when things start to go wrong. For someone with no prior experience of university life, unprepared for its pressures and demands, with no ongoing counseling or medical attention, and with no signal to the university that its new student might need support, the plan was nearly certain to fail.

It was only a matter of months before a Career Specialist at WWC got an anxious call from Lisa Duran asking for help. It was the program’s first indication of where Ray had gone and what he had chosen to do. Although her husband had insisted that she not call anyone, she knew matters had

reached a crisis. He had fallen far behind in his coursework, stopped attending classes, and was spending most of his days in bed or isolated in a dark room. Pleas that he seek help or contact his VA counselor were met with rage or silence.

Dwayne Beason, a senior WWC Career Specialist and retired Sergeant Major, made the 120-mile trip to the Durans' home the next day. As Lisa had warned him, his knock at the front door went unanswered. Ray would not leave his room and refused to let Lisa open the door. "So I just stood there," Sergeant Major Beason said, "and kept banging until he came out."

It took several meetings for Dwayne Beason and Ray Duran to form a tentative relationship of trust and a means of discussion — to agree, among other things, that WWC was not a rescue operation, that Ray Duran had not failed, and that making use of some experienced help and guidance was not a white flag of surrender. Meetings always took place at the Durans' home. "We never expect people to come to us," says Sergeant Major Beason; "we go to them. It's their life we're talking about, and I feel better if we're talking in a place where they feel comfortable and in control."

The two men talked about what Sergeant Duran wanted to accomplish, what his strengths and interests were, what he liked to do and didn't like. With Lisa, they talked about their family and their financial future. They talked about Lisa's interests, ambitions, and concerns, both for herself and for her husband. It was, in WWC parlance, the beginning of the Assessment process. But in all appearance it was just a series of conversations: no visible paperwork, no rules, no noticeable regimen. And it kept going for many weeks.

First, though, there was the problem of the university course work, in which Ray Duran had fallen so far behind that he was now in danger of failing everything and forfeiting his enrollment. Because the Department of Veterans Affairs had paid his tuition, there was a risk that it would seek to recover the money if he were ejected for abandoning his courses. Moving quickly, Dwayne Beason contacted the university's special-populations advisor (who had been completely unaware of Sergeant Duran or his injuries), explained the situation and negotiated a significant reduction in course load. Then, with extensions and tutoring, the university helped Ray Duran work through the unfinished assignments and exams in his remaining courses, complete the requirements, and earn academic credits. Meanwhile, he resumed his regular biweekly appointments with a therapist and joined weekly group sessions at the local veterans' center.

Little by little, Lisa and Ray Duran and Dwayne Beason came together around a common understanding: Intellectual and professional challenges are fine, even with TBI and PTSI. The goal wasn't to define life downward.

But there was a path to be traveled, hurdles to be overcome, useful support to be had, and responsibilities for all of them to rise to, on the way to finding a life and a career that would bring satisfaction rather than crisis. Sergeant Duran took a leave from his studies, performed volunteer work in his community, and meanwhile started to learn to deal constructively with his injuries and to begin organizing a more realistic approach to his goals. Clarifying that approach and mapping out a path for it now formed the second step in the WWC process: the Goals Plan.

Among other things, WWC helped Ray Duran find a tutor who could, in his words, “teach me to learn again.” Mastering coursework, taking exams, making mistakes, meeting deadlines, organizing assignments and projects — all the elements of study and learning — tend to be different with PTSD and TBI. So at this stage, tutoring was valuable not so much for conveying any particular information or discipline, but for helping him recognize what coping skills he would need, how he could adjust to the side-effects of his injuries, and how he could take on the pressures and demands of school, training, or work without losing his grip. He learned to buttress his memory with note-taking, and to use voice-recognition software to make the note-taking more automatic. He learned to minimize distractions and monitor his time, among other skills for aiding memory and concentration. This was a slow process, but it was something Ray Duran understood and valued: a rigorous challenge. It was simply a kind of challenge he had never imagined tackling before.

At the time this is written, his relationship with WWC continues, as does his progress on his planned goals. We will return to his story toward the end of this report.

PART I | WOUNDED WARRIORS & THE TRANSITION FROM MILITARY LIFE

Under a memorandum of understanding with the U.S. Army, the National Organization on Disability launched the Wounded Warrior Careers program in 2008 to help severely injured veterans move forward on career paths, to test various ways of meeting their needs, and to expand and document the ones that work best. In its first four years the program has served 275 veterans; of these, 70 percent are now in jobs, education, or training. In contrast, for Wounded Warriors with similar disabilities not enrolled in WWC, it has been reported to NOD that the comparable figure is between 30 and 40%.

The program was first designed to concentrate mainly on service members with a variety of physical and neurological injuries, often while still patients at a military medical center like Walter Reed, Bethesda, or Brooke. But experience soon suggested that this stage of recovery was usually too soon, and the pressures of physical rehabilitation too overwhelming, for an effective discussion about career goals and plans to take root. The program quickly shifted to a community-based approach, organized around three geographic areas with a high concentration of Wounded Warriors: North Carolina, Colorado, and metropolitan Dallas, Texas. Career Specialists, the program's frontline professionals, were stationed in each area to build relationships with veterans in the communities where they live, study, and intend to work.

How Veterans Reach WWC, and Why

To be eligible for Wounded Warrior Careers, veterans must have a disability rating of more than 30 percent³. They must be enrolled in the Army Wounded Warrior program and referred by their AW2 Advocate, the Army representative whose mission is to act on the veteran's behalf in identifying available services and benefits and helping the veteran through the complex process of applying for and receiving them. An Advocate chooses candidates for WWC based, in the first instance, on their being ready, willing, and able to formulate and start working toward a set of career goals. But the Advocate's referral is more than just a means of access. It is the first critical step in the WWC model.

The Memorandum of Understanding between NOD and the Army provides for close cooperation and coordination at the critical moment when a

veteran is stepping from the military to the civilian world. More than any other single factor, the program's success depends on the development of a sustained relationship of trust and common purpose between the veteran and the NOD Career Specialist. A similar level of trust is also part of the earlier relationship between the veteran and the AW2 Advocate, who is the first person designated by the Army to be the veteran's ally after a serious injury. Advocates, however, deal with a broad range of needs and relatively large caseloads, and are not specialists in workforce programs or career planning. So to prepare the veteran for a more intense, prolonged working relationship with a second ally, the Career Specialist, the connection needs to be broached as an extension of that original foundation of trust. It is important, in other words, that the career path begin with what NOD refers to as a "warm referral" — an introduction from someone who not only has earned the veteran's confidence, but who understands what the impending transition will entail and can observe and assess the veteran's readiness for the choices and challenges ahead.

Transitioning from the military to a civilian career can be difficult under the best of circumstances. For veterans with combat specialties (Infantry, Artillery, Armor) and for those who directly support combat operations, the task of translating military skills to civilian occupations is particularly challenging. It is considerably harder when the change of career is unintended and unexpected. Just as employers may not see how a veteran with these skills might fit in their organization, veterans themselves sometimes view their backgrounds as far removed from anything that would be useful in the civilian workforce.

There are a number of programs that could help, but many veterans are unaware of them, or don't understand how they work

There are a number of programs that could help them, though many veterans are unaware that they exist. Others know about these programs but avoid them, either because they don't understand how the programs work and can't imagine how they might be helpful, or because they become confused and frustrated over the complicated process of applying and qualifying for program after program. Even if they do consider taking advantage of some program or benefit, it can be even harder to figure out how to combine different

services effectively (education, training, job counseling, medically related counseling, family supports, and so on). AW2 Advocates can help with some of this confusion, but their time with any individual service member is limited, and most Advocates are not steeped in the intricate particulars of civilian workforce programs. Hence the referral to WWC.

Veterans' families can help, too. But the time after military service is already full of pressures on families, especially when dealing with injuries that may not all be visible or diagnosed yet. Spouses may find that they

need to find a job to contribute to the family's support during the transition — meaning that they may themselves need employment or career counseling, even as they learn to care for an injured husband or wife.

Leaving the military because of service-related injury or illness poses several challenges that are different from those facing most job-seekers. Wounded veterans have to come to grips with their disability, benefits, treatments, medications, and financial issues, along with what may be a changed role in their family and community. For them, the next career step, whatever it is, will be not merely a change of jobs; it will almost certainly involve a redefinition of their life, as they enter a civilian marketplace profoundly different from the all-encompassing, intricately structured environment of an armed forces career. Even if they are able to draw on many of the same skills and interests that had served them well in military life, those assets will still have to be applied differently in a civilian workplace. And many veterans will need to find new skills and interests altogether, whether because of their injuries, the demands of the civilian job market, or both.

To complicate matters further, those leaving the military for medical reasons will have just received a “disability rating” that gives the impression of quantifying just how restricted a person's work prospects will be. That is, in reality, a misinterpretation of the rating, which is a technical calculation meant to determine eligibility for military service or post-military pay and benefits. But it is easy for a recovering veteran to view it as a kind of official certificate of diminished potential. In that frame of mind, the idea of getting a job and earning income — much less developing new abilities and talents to build a satisfying career — may strike some veterans as farfetched at best.

Or, conversely, jumping quickly into a job may strike them as the only idea — the sole, immediate route out of dependency, to be pursued as urgently as possible. Some Wounded Warriors prefer not to see themselves as having a disability at all, and are reluctant to disclose any injury that is not immediately visible. They may not fully understand the changes that their injury will make in their lives. Some may refuse to accept the idea that their life has changed at all, and may insist on pursuing a career that is as similar as possible to military life — a choice that can easily lead to re-injury and may play havoc with the effects of Traumatic Brain Injury and Post-Traumatic Stress Injury. Any of these reactions could cause veterans to underestimate the challenges ahead of them and to undervalue the preliminary steps and services that could help them, over time, to reach a more satisfying life plan. Rushing into the job market, settling for any job or casting about desperately for any prospect of a

Referral to a Career Specialist is often the veteran's first opportunity to begin thinking about abilities, ambitions, and interests outside the military

credential or a paycheck, can further harm a veteran's self-esteem and chances for long-term success if the choices don't work out. The wrong job — one with too much stress, unrealistic demands, or triggers that aggravate symptoms of TBI and PTSI — can add a feeling of failure to the already long list of emotional hurdles a Wounded Warrior must overcome.

Service members frequently experience a sense of grief, guilt, and loss when they begin the transition process, the first official step toward medical retirement. They have separated from their unit, fellow soldiers, and friends who have constituted their world and defined their purpose, sometimes for many years. Many veterans report a feeling of being swept aside or “kicked to the curb” when they enter the transition process — no longer useful to their colleagues, to their units, to a whole way of life in which they had once been vigorous participants.

The greatest value of the “warm referral,” therefore, is that the AW₂ Advocate is likely to be among the first professionals to recognize and understand the effects of all these reactions, or at least the person most attuned to their likely effects on the transition to civilian life. Choosing the right time to set the career-planning process in motion and recognizing when a veteran is ready, willing, and able to move on are essential factors in setting the WWC relationship on a productive course. For the injured veteran, the referral to a WWC Career Specialist often represents the first opportunity — or in some cases, the first, difficult nudge — to begin thinking about their abilities, ambitions, interests, and possibilities outside the military and beyond the world of injury and recovery.

The Particular Challenges of PTSI/TBI

By 2009 it was becoming increasingly clear that the most prevalent forms of serious injury among service members returning from Iraq and Afghanistan were, in fact, PTSI/TBI. Since then the program has increasingly specialized in these injuries. At this stage, roughly 70 percent of the WWC caseload reports one of these as their primary injury.

These cognitive and psychological impairments impose some of the same difficulties on a returning veteran as outward physical injuries. But because these impairments may take time to recognize and diagnose, because their symptoms can be less predictable, and because they directly affect a person's will and sense of possibility, their effects may continue to unfold, and even to deepen, over a long period of time.

In recent research for the Institute for Economic Empowerment at AbilityOne, NOD gathered observations from veterans on the effect of PTSI/TBI on their attitude toward themselves, their abilities, and the prospects for employment. According to the NOD report,

Many expressed that they had days when they could not function due to migraines, depression, or nightmares that kept them from sleeping the night before. Many talked about how PTSD causes them to feel overwhelmed and experience anxiety attacks. These attacks are often triggered by something that reminds them of their combat experiences, including loud noises, crowds, smells such as burning fuel, settings such as construction areas, or the presence of soldiers or people who are injured. Many are not comfortable being around other people at all and always feel that they have to be on guard. They report needing to be able to see everything and everyone around them and disliking when people are behind them.

The veterans said they have mood swings and feel they are more short-tempered than they were prior to injury. For this reason, they worry about their ability to interact with coworkers or customers on the job. Some said they get frustrated easily, particularly when they feel they are not performing as well as they should. Some expressed concerns about being able to handle the stress that comes with working in a fast-paced environment or in a position where they are responsible for managing others or working on multiple projects, even though this is the type of position they would like to obtain. NOD believes this suggests a need for substantial structure to the job and/or organization, at least until the long-term full career potential becomes more evident or the individual's physical and mental condition improves.

Most veterans who have TBI said they have difficulty with short-term memory. They also felt that it takes them longer than others to process information and to perform tasks at work or school. Some mentioned difficulty with multi-tasking and said they either need to focus on one thing or a couple things at a time whereas in the past they could do more. They need to slow down and pace themselves so that they do not become ill or panic. Some said they have difficulty comprehending things, learning new concepts, reasoning, doing mathematical computations, or getting organized. Veterans interviewed also said they have difficulty concentrating, partly due to an inability to filter out background noise. This affects their ability to take a test, complete a task, or hear and comprehend what other people are saying.⁴

In trying to envision a civilian career and preparing for job interviews, some veterans with PTSI/TBI are concerned that employers who learn of their injuries, or even of their military service, will be reluctant to hire them. Some employers do, in fact, fear disruptive or unreliable behavior and feel unprepared to accommodate what they believe may be an “unstable” employee. Managers may be influenced by often-exaggerated media accounts of cognitive or psychological injuries and may (consciously or not) exaggerate the issues involved in hiring a Wounded Warrior.

The job of the Career Specialist, and the mission of WWC, is to help injured veterans deal, over the course of a long, personal, and supportive relationship, with all of these obstacles, real and perceived. It also includes helping employers understand the advantages of hiring Wounded Warriors and of making the small adjustments that can ensure a productive, successful relationship with a prospective new employee. Wounded Warrior Careers is designed specifically with these needs in mind.

What Injured Veterans Need and Want as They Start to Envision a Career

Many veterans who retire with a disability are leaving a career to which they had planned to devote their whole working life — one that would have provided uncommon job stability, family benefits, and intangible rewards like the knowledge of doing something critically important. To a service member coping with involuntary retirement and disability, it may seem hard to imagine a career that could match these advantages. But as hope for the future returns, so does the original desire to do something rewarding and meaningful, with opportunities to contribute to a worthwhile undertaking and to lead. Most service members, even in relatively junior ranks, shoulder significant responsibilities for operations, supervision, and individual judgment, besides the ultimate responsibility for safeguarding the lives of others. As a result, many find the prospect of being stuck in an entry-level job dispiriting, and struggle to adjust their ambitions to a labor market that may not fully value their experience.

Most fundamentally, injured veterans hope for fair compensation at a level that can support their families at least as well as would have been possible in the military. They expect to learn new skills and enter a long-term career (most are decades away from standard retirement age) with possibilities for advancement. But most of all, they now see themselves as the sole backstop to their families' well-being — without the security and logistical support available in military service. That means that income, stability, and opportunity for promotions are paramount.

Not so long ago, a wounded service member's second traumatic experience upon leaving the military, after confronting the consequences of injury, was the prospect of an immediate economic crisis. Between the end of military service (and thus military pay) and the beginning of VA benefit payments, many months used to pass without income. This problem has been relieved considerably in recent years by the institution of the Integrated Disability Evaluation System, which significantly streamlined the process of setting disability ratings and benefit levels and reduced the amount of time between discharge and VA benefit payments. Still, there continue to be gaps in income between separation from the military and the start of disability or retirement benefits, especially for service members who waited until after discharge to begin the claims process. And the re-

sulting financial strain is one more pressure on an injured veteran — one that can add to the rush-to-work mentality described earlier, or to a feeling of desperation if a rush to work is not possible.

Most Wounded Warriors who are physically able to work will eventually discover career interests and ambitions, uncultivated talents, and abilities that aren't limited by their injuries. But for many, that process of discovery takes time, patience, experienced guidance, and encouragement. Those are the most common, and typically the earliest, needs in injured veterans' transition to learning, work, and careers.

But beyond that common starting point, needs, interests, abilities and challenges vary widely. For many, education seems like an obvious next step, and veterans' educational benefits are, in fact, exceptionally good. Particularly in a weak economy (like the recession and slow-growth years in which WWC was piloted), the Post-9/11 G.I. Bill's offer of a subsistence stipend, together with tuition, has struck many injured veterans as a quick way of meeting basic expenses while acquiring skills. However, leaping to this seemingly easy choice before making a well-considered education and career plan can end up wasting time and resources (and, as in the case described at the beginning of this report, can even set the veteran up for failure). While education benefits are generous, they are not endless; after a few years of schooling, there may not be enough benefits left to change course and earn a credential in a different field if the first choice was a mistake.

Wounded Warriors often start with expectations formed in the crisis atmosphere following an injury. Many need time and guidance in sorting through options and making realistic plans

Even when education is the right next step, there are many variables that Wounded Warriors need to consider before taking a leap. Sometimes a university education isn't the best path to achieving their goals and may not correspond to a veteran's actual interests or skills. Support provided through the VA's Vocational Rehabilitation and Employment Program might be a better choice (though it used to offer much lower subsistence benefits, a disincentive that has recently been corrected). Further, whichever kind of education they pursue, students with disabilities typically are well advised to take advantage of support from disability services offices available on most campuses — something many veterans are either unaware of or, in some cases, reluctant to use, for fear of seeming needy or not self-reliant. Finally, veterans who are in a rush to begin their education may be especially vulnerable to recruiting pitches from disreputable or inappropriate institutions — a danger now being addressed through government initiatives to prevent this predatory behavior. In short, education is an attractive and often a necessary choice, and many in-

jured veterans are eager to pursue it. But it is a more complicated choice, with more variables to consider, than is apparent on the surface.

For those who prefer to move more directly to jobs and income, the danger of haste can be at least as great as with a move to education. Wounded Warriors often feel pressure from peers, family, and friends who — usually with the best of intentions — urge them toward jobs that are a poor fit for their career aspirations. But if the new job is not well chosen, not particularly rewarding, or doesn't match the veteran's strengths and interests, the resulting frustration could grind the career momentum into reverse.

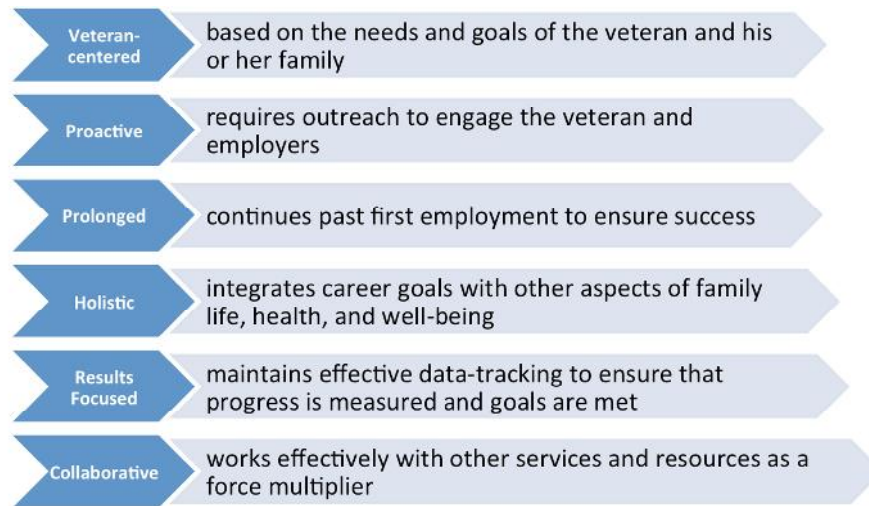
All of this is to say that Wounded Warriors who start working with WWC arrive with a number of expectations, ideas, priorities, and desires, many of which have been formed amid the crisis atmosphere that surrounds injury, early rehabilitation, and separation from the military. Some of these ideas and expectations may stand up well after careful consideration and as the veteran moves through the phases of physical and emotional recovery. But many will not. What veterans most need as they arrive at a relationship with WWC is a way of sorting through their own perceptions, reactions, and predictions about their future. Many need some form of ongoing professional counseling, but all need a partner — someone experienced in both the military and the world of workforce and education programs — with whom they can think critically about their choices and develop ways of reviewing and revising their options over time. That is the foundation on which all of the components of WWC have been assembled.

PART II | THE WWC MODEL

In a 2012 survey of research on veterans with PTSI and TBI, a team of experts wrote for NOD that “there is evidence to support the finding that a ‘comprehensive’ approach to serving the veteran — rather than supporting employment in the absence of other social, medical, and life concerns — is of particular value.”⁵ To understand the Wounded Warrior Careers program, it is important to note, first of all, that the word “Careers” is less of a limiting factor than it might seem. It describes a goal and an outcome, toward which many other kinds of service are directed. Acquiring skills and finding a job are not the totality of the model. As the previous section of this report demonstrated, the life of a recently injured veteran is too full of interconnected pressures, concerns, and challenges for a single-minded focus on getting a job to be effective.

“While it is important to maintain a focus on employment and self-sufficiency,” the authors of the survey continued, “veterans with PTSD and TBI show better employment outcomes when they are also receiving support for their related medical and mental health concerns (including anger management, building memory and executive function, and general support around physical, mental, and brain health). Studies also show the importance of engaging the entire family unit as professionals support the veterans in their employment search. Spouses and children can act as powerful motivators and supports to the veteran, but will often also require support themselves.”⁶

Following the lessons of this research, NOD has designed a program based on six core principles:



The first principle, **veteran-centered** service, is based on the tenets of Person-Centered Counseling⁷, a tested method of guided problem-solving that is tailored to individual circumstances and is neither directive nor judgmental. Because every Wounded Warrior is different, and every combination of background, interests, and injuries produces a different set of options and challenges, it is essential that Career Specialists approach each case as unique. They assess each veteran’s circumstances and interests at the beginning of the relationship and then work with veterans and their families to gradually assemble an agenda for discussion, a list of services and opportunities to explore, and methods for dealing with difficulties and setbacks.

Second, a **proactive** approach places the onus on the Career Specialist to engage the veteran, keep the conversation going, counteract discouragement and inertia, and respond supportively to new ideas, concerns, and events. The specialists frequently travel to meet veterans in their homes or communities. They take initiative in suggesting options and in charting routes around obstacles. As career plans progress, WWC professionals work alongside veterans and family members in meeting with educators, trainers, employers, and other service providers to anticipate problems and make the most of opportunities that veterans on their own might not have been aware of. While the goal is always self-sufficiency, reaching that goal often entails a period of active support and guidance in helping veterans find their particular path.

Third, the WWC relationship is **prolonged** — first during what may be a slow process of coming to terms with injury and civilian life, and later through the various stages of planning, study, training, employment, and all the trial-and-error in between. The relationship doesn’t end with the first job, and may not end even after a successful transi-

The proactive and prolonged aspects of the WWC model are the main features that distinguish it from other programs for returning and injured veterans

tion into a satisfying career. The amount of contact usually rises and falls over time. After enrolling in school or a training program, a veteran's need for regular consultations may diminish, but it may pick up again later — during a job search, for example, and in the early years of employment. Thereafter, if veterans want and need a continued source of support, even if on a reduced basis, the Career Specialist remains at their disposal. For some veterans the whole process may take less than a year; others have required support for the full four-year period of the demonstration and beyond. Because the program is still relatively young, and most participants remain in contact at some level, it is not yet possible to say what an average length of engagement will be. At this point, it is clear that the typical relationship is measured in years, not months. The number of contacts then varies widely from year to year, including some years with no contact at all, followed by a period of renewed interaction.

The proactive and prolonged aspects of the WWC model are the main features that distinguish it from other government or nonprofit programs for returning veterans. Even the most effective counselor can bring about only a limited, discrete change in anyone's life with brief or intermittent contacts. In a short-term or infrequent relationship, it is possible to impart some skills or offer useful ideas or techniques. But if the goal is to help veterans re-imagine their lives, form new rhythms of daily activity, and develop a new idea of their value, abilities, and potential contribution, occasional episodes of counseling will almost never be sufficient. The close, persistent, affirming relationship that Career Specialists establish with participating veterans — relationships that often take months to develop, overcoming skepticism, distrust, and despondency along the way — are a fundamentally different kind of career counseling from what is normal in most of the workforce and veteran-service field.

Fourth, a **holistic** approach to career services means that the career itself is merely the center of a much wider circle of support that encompasses physical and psychological rehabilitation, family support, and the many facets of self-discovery and adjustment that necessarily follow a traumatic disruption in someone's life. Inclusion of the veteran's family in the WWC relationship is particularly important. Spouses often find their own lives nearly as changed by an injury as the veteran's is. Stresses on marriage and family can be as great an obstacle to recovery as are the injuries themselves. Family members' ability to adjust and cope, and their ability to support the veteran while also looking after their own well-being, will therefore be a crucial factor in the Wounded Warrior's chances of success and growth over time.

The most important service Career Specialists can provide is to help integrate all the different resources into a single, coherent path toward a career, independence, and success

Fifth, all WWC activities are **results-focused**, meaning (a) that they are designed to aim consistently toward concrete milestones and tangible successes in a veteran's career, family life, and personal well-being; and (b) that these milestones and outcomes are carefully measured, tracked, and aggregated, and the resulting data used to constantly fine-tune and enrich the program model. From the beginning, WWC has been built around extensive research on the results of other workforce and counseling efforts, the most productive of which have been integrated into the program design. Effective data-tracking, though typically invisible to the participating veterans, is as integral to the program as are the various services, techniques, and tools by which Career Specialists work to deliver results for the veterans they serve.

The last element is that WWC is **collaborative**. Career Specialists don't try to deliver all services themselves and could never hope to do so. Their role, instead, is to help in knitting together effective relationships between Wounded Warriors and the various benefits, programs, services, resources, and opportunities available to them. Evidence shows that it is not sufficient merely to refer and recommend possible sources of support; results are measurably better when the Career Specialist builds working relationships with other programs and providers, helps veterans understand and take full part in them, and offers WWC's services to other providers as a partner and complement to their work. Given that most available services and programs tend to be discrete and specialized — some for education, some for skills training, some for medical or psychological care, others for family or income support, and so on — the most important function a Career Specialist can provide for most veterans (and often for the various programs as well) is to help integrate the different resources into an efficient whole, where they all reinforce one another and together form a coherent path toward a career, independence, and success.

The Structure of WWC Activity

Wounded Warrior Careers unfolds in four stages:

Career Planning, in which veterans envision their path from military to civilian careers, explore their interests and ambitions, formulate goals, identify obstacles, and sort through the steps and available resources that could help them overcome the obstacles and reach the goals. This stage ends with the development of a Career Action Plan,

a long-range roadmap, covering five or more years, developed jointly by the veteran and the Career Specialist.

Career Preparation, when the veteran translates the career plan into actual activity: enrolling in education or training, making use of resources and benefits, pursuing referrals to services and supports, and, when appropriate, taking a step into transitional or supported employment.

Job-Seeking Support, where Career Specialists guide veterans through the actual work of translating interests, abilities, and skills into employment, including helping them develop a résumé, introducing them to prospective employers or job-search programs, helping them plan and negotiate accommodations they may need on the job, and seeking out job opportunities that might match their goals.

Post-Placement Support, an extended period of guidance and problem-solving after the veteran takes a job, tackling issues such as housing, ongoing job coaching, interacting with employers, on-the-job per-



formance, and general advocacy on the veteran’s behalf.

Stage 1: Career Planning

The planning phase of the WWC process begins with a basic assessment of readiness and of the kinds of support a veteran and family may need over time. During the initial assessment, the Career Specialist and the veteran and family members typically meet often, developing rapport, exploring ideas and possibilities, forming a clear understanding of WWC and what it entails, and gauging how prepared the veteran and family are to tackle the various steps ahead. This is also the stage in which WWC begins its record of the case, encompassing demographic, health/injury, financial, family, and employment information. The record forms the basis for ongoing data collection, but more importantly, it is the Career Specialist's first analytic tool in identifying potential barriers or resources as well as tracking later progress.

This is much more than a get-acquainted exercise. Experience has shown that conducting a careful assessment at intake — establishing realistic expectations, clarifying the work required, setting clear definitions of what a Career Specialist can and cannot do for the veteran and family, and most of all, forming a basis of trust for ongoing communication — is a critical factor in the success of all that follows.

The Career/Skills Assessment therefore serves as an initial inventory of the veteran's interests, abilities, and aspirations. It attempts to size up the veteran's personal, family, and financial circumstances, the limits imposed (and not imposed) by injury or illness, a work history both inside and outside the military, unexplored skills and aptitudes, and the kinds of career ideas that seem most appealing at this early stage. The quality of this series of discussions can have significant consequences for later success or failure. For example, one veteran with prior experience in health care at first expressed a firm determination to return to that field, brushing aside advance concerns about the stresses that a medical environment might create for someone with PTSD. After more than a year of advanced education, the veteran was required to intern in an emergency room. The result was a severe crisis and a need to re-think a career choice in which much time, energy, and emotional commitment had already been invested.

Next comes a definition of goals, culminating in a Goals Plan. This preliminary plan is the first concrete formulation of a veteran's expectations and career possibilities. It focuses not on specific steps to be taken (that comes later), but on the desired results to be achieved. These include not only work-related calculations like job satisfaction, stability, and income, but also personal and family concerns — ability to share household work and child-rearing, time for health care and counseling, religious or community involvement, and other aspects of home and community life. It helps in clarifying the purposes for which future planning and activity will

be undertaken and in motivating the veteran through the inevitable difficulties and setbacks that will follow.

When completed, the Goals Plan will set out a chronological hierarchy of intentions: immediate goals for the coming year, short-term goals over the next year or two, mid-term goals up to five years ahead, and long-term goals that may stretch five to ten years into the future. These provide the earliest and most basic yardstick by which progress will later be measured, and by which individual choices can be evaluated and adjusted along the way. The plan therefore deliberately describes goals in SMART terms: Specific, Measurable, Achievable, Realistic, and Time-bound.

With goals defined, the process then moves on to identifying barriers and resources. This involves first enumerating the key roadblocks that could interfere with education, training, employment and advancement, and then pairing them with resources that can help in reducing or eliminating the obstacles.

Barriers	Resource
Knowledge, Skills, Abilities	Education / Training
Economic	Financial Support / Work
Emotional / Motivational	Coaching / Behavioral Health
Physical	Work Support
Technical	Technology Support
Work / School	Disability Resources

Some barriers may relate to the veteran’s injuries or disability, including physical or emotional side-effects. There may be certain kinds of work that would be physically or psychologically impractical; the length of the work day or hours of availability might be a concern for some; others may need accommodations or other kinds of support to perform certain tasks in school or at work. Transportation arrangements or physical accessibility of some work sites could pose im-

pediments. But there could well be other issues not directly related to injury, such as financial, housing, or economic concerns. Most of these can be addressed with resources that can overcome some or all of the difficulty, and those resources need to be matched, one-by-one, with the corresponding obstacles. When resources are not available or aren’t sufficient to overcome the problem, then future plans can be based on that recognition and adjust to the reality.

The next step, the Career Road Map, is the core of the career-planning process. It provides a visual reference for the veteran and family to envision, plan, and manage the various steps along the way to a career and long-term success. It shows the stages of the career process unfolding over months and years, typically mapping out the intended path quarter-by-quarter over a five-year period. It is a way for veterans and their families to monitor their progress and stay on track, as well as a means of reinforcing their patience and commitment over the relatively long stretch ahead of

them. It encompasses both the veteran’s plans and those of the spouse, to help them envision how their schedules and commitments will interact over time. By showing the progression and interconnection of different activities, it helps to keep any particular activity (education, for example) from seeming like an end in itself.

For both the veteran and the spouse, the plan is specific not only about types of activity, but about time and place: Not just “education,” but what course of study, and even which schools are under consideration? Not just “volunteering,” but which community activity is most appealing? In which month will activities begin and end? What will the spouse be doing in those months? When would volunteer activity, family obligations, or other necessary activities take place, and how would all of them fit with school and work? This sample Road Map chart gives an illustration of the typical level of detail. (In this example, the veteran’s activities are in blue, the spouse’s in beige):

Career Road Map

Phase	Description	Year 1												Year 2				Year 3				Year 4				Year 5			
		Q1			Q2			Q3			Q4			Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4				
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec																
1 Not involved	Veteran																												
	Spouse																												
2 Career Planning	Veteran																												
	Spouse																												
3 Education / Training	Veteran	Automotive Repair Training																											
	Spouse															Complete Nursing Degree				New Career									
4 Work	Full-time work														New Career in Auto Dealership														
	Veteran																												
	Spouse	Continue working at Smith Medical																											
	Part-time work																												
	Veteran	Internship																											
Volunteer work	Veteran							Soccer Coach																					
	Spouse																												
5 Advancement	Veteran																												
	Spouse																												

The final step, completing the first phase of work, is the Career Action Plan, which weaves together all the earlier steps into a single summary of abilities, interests, goals, barriers, resources, and the sequence of activities

that together will lead to a satisfying career. It is particularly explicit about immediate and short-term goals, laying out concrete steps to be taken in the coming months. It identifies specific resources to be tapped, and the steps that must be taken to gain access to and make use of these resources. It lists other programs and partner organizations whose help must be solicited, and whose requirements must be met, for each milestone to be achieved. As in the earlier statement of goals, the language of the Action Plan is Specific, Measurable, Achievable, Realistic, and Time-bound.

By putting clear, actionable steps in writing, pairing them with the veteran's and family's own aspirations, specifying expected completion dates, and dealing with foreseeable impediments and challenges, the document forms a kind of compact (some veterans, accustomed to military preparations, say "battle plan") by which energy is committed and organized for achieving agreed-upon ends. It establishes everyone's responsibilities and commitments — those of the veteran, the spouse, other family members, and the Career Specialist — and therefore provides a means of accountability for each person's effort and results as time moves on. Not coincidentally, it echoes the kind of explicit planning and documentation typical in the military, providing a familiar sense of order for the transitioning veteran.

The Career Action Plan is the scorecard for assessing and managing activity, throughout the next stages of work. Even when the program moves into the Career Preparation and Job-Seeking stages, the plan is used to maintain forward progress, evaluate execution and outcomes, and adjust course as each milestone is reached and plans for the future gradually turn into concrete responsibilities for the present and the near term. In other words, the conclusion of Stage 1 of the WWC model does not mean that planning is over, only that a plan has been formulated and now must be put to use, kept fresh, and referred to regularly to measure progress.

Stage 2: Career Preparation

The American workforce development system, as nearly every research or policy paper points out, is a disjointed assortment of discrete programs with little natural connection or flow among them. Apart from a few exemplary organizations that have managed to weave a coherent system out of the various services and supports available in their communities, most of the time the onus is on individual applicants to patch together a career path from the available fragments. This is often a hindrance in the civilian marketplace, and even more so for people with disabilities.

Even within programs specially designed for veterans, the problem of linking discrete services and benefits into a meaningful whole is essentially the same as in the civilian world. In the 2012 review of literature on veterans' workforce needs cited earlier, the research team summed up the prob-

lem this way (abbreviations refer to the Department of Defense, Department of Veterans Affairs, and Vocational Rehabilitation):

While many services exist inside the DOD, DVA, and VR as well as the community, there remains a dearth of direct employment assistance, including employment advocacy, supported employment, and transitional or internship work experiences. The two primary DVA services related to employment — Compensated Work Therapy (CWT), which includes Supported Employment (SE), and Vocational Rehabilitation and Employment (VR&E) — have very little interaction and coordination. Most veterans see VR&E as essentially payment for school and generally do not see it as a vehicle for job placement. CWT is often branded as the temporary jobs at the DVA itself, and while it has SE pilot projects, these are often focused on those with serious mental illness, not PTSD or TBI.

... There are already a wide variety of services for veterans in DVA, DOD, VR, and some public and private community agencies. However most that do operate are not well coordinated with nor advertised to veterans.⁸

In WWC, beginning with the Career Action Plan but extending all the way through enrolling in school or training, earning credentials, planning and preparing for a job search, and actually applying for work, Career Specialists work alongside veterans to bridge the gaps and crevices between workforce services. They also maintain a clear focus on the ultimate purpose of all these activities — any one of which can start to feel like an end in itself once a veteran is wrapped up in its particular routines and requirements.

So, for example, veterans who enroll in a degree program at a community college or university will not only need help in adjusting to academic requirements, as anyone who has been away from a classroom for many years might. They may also be unaware of the school's support programs for veterans and for people with disabilities, and may need help seeking these out and making effective use of them. Even basic education-related activities like choosing majors and courses, organizing class and study schedules around family obligations, and taking advantage of school resources like libraries, computer labs, and extracurricular activities may pose special challenges for a veteran with TBI or PTSI.

More specifically, veterans often need guidance in keeping their academic or training work focused on their career plan. The same is likely to be true in other forms of work preparation outside of education or training — for example, in Compensated Work Therapy or Supported Employment. Both of these can be either constructive steps toward one's career goals (acquiring job skills, learning to manage disabilities, becoming familiar with workplace protocols and politics) or mere time-serving activities with

the sole benefit of a paycheck. The difference between those two outcomes is often made by the continuing, career-focused conversation among the veteran, his or her family, and the Career Specialist, and the constant weighing of career-preparation options and results against the goals and milestones set forth in the Career Action Plan.

Entering the labor market, veterans may be trying out new skills in an unfamiliar environment — one where civilians their age have already been functioning for years

The Career Preparation stage is also the first time that many injured veterans have the opportunity to test their responses to civilian work and classroom pressures. Ideas that may have seemed manageable or even obvious in the planning stage may still lead to unexpected roadblocks or crises when put into practice. A timely, strategic response to these setbacks is often enough to get the career process back on track. Being ready with such a response, monitoring situations for signs of difficulty, and guiding the veteran through and beyond a crisis are all key responsibilities of the Career Specialist during this stage.

Stage 3: Job-Seeking

The traditional, self-directed job search is often not effective for veterans with serious disabilities. Moving from the comparative shelter of schools, training programs, and transitional employment into the free-form competition of the labor market can be jarring for nearly anyone; for an injured veteran — especially one with cognitive or psychological disabilities — it can be self-defeating without direct and personal assistance. At this stage, veterans typically feel an intense pressure to succeed, although they may be applying new skills in an unfamiliar environment, one in which civilians their age have already been functioning for some years. A setback or disappointment at this critical juncture — being turned down for a job, being treated rudely during an application process, slipping up in an interview — can be even harder to handle than setbacks during school or training. A disappointing job search can be mistaken for a reality test, or final judgment, of one's ability to make it in the workforce. Counteracting such feelings of defeat with counseling, family support, and renewed effort are all part of the Career Specialist's mission.

Many Wounded Warriors could benefit from Supported Employment at this stage — the chance to take a job where employment coaches are available on-site, and where supervisors are trained in working with disabilities and with new entrants to the labor market. But many veterans are unaware of this option or uncertain how to make use of it. They may not identify as someone with a disability and may not even want to disclose injuries or ask for accommodations. Some veterans have been put off by stereotypes of

service providers that make them view the experience as coddling, unproductive, or even stigmatizing. Many see a supported workplace as just one more program, starting with yet another assessment, one more temporary stop that merely delays the start of a real, permanent career. Providers, meanwhile, often lack the expertise to recruit or serve veterans effectively. These are formidable obstacles, which Career Specialists might be able to overcome with sufficient patience, field research, and discussion, if a given opportunity involving Supported Employment offers significant advantages for a particular veteran. But it is often a harder case to make to veterans than to other job-seekers with disabilities starting out on a new career.

In many other respects, the job-seeking process in WWC is similar to that in any workforce program, though possibly with a somewhat higher level of support. The basic elements are fairly standard: preparing a résumé, learning how to apply and interview for jobs, lining up introductions and opportunities for networking. But many of these tasks can be daunting for a veteran with PTSI/ TBI, who may struggle to stay focused in an interview and may experience more than usual anxiety in the networking process. Career Specialists learn the barriers that the veterans are experiencing and intervene to help lower them. They might contact an employer before or after an interview or accompany the veteran to networking opportunities.

As with other job-seekers with disabilities, there is also a need to seek employers who are familiar with, or at least not troubled by, whatever kind of workplace accommodation the veteran might need to function effectively on the job. Career Specialists make it a point to cultivate relationships with employers who are committed to hiring veterans, accustomed to accommodating disabilities, and in need of the kinds of dedication, discipline, courtesy, teamwork, and leadership that are part of the military culture and that most transitioning veterans bring to the civilian workforce.

Career Specialists also help employers learn about and claim government benefits for hiring veterans and creating accessible workplaces. For example, under the VOW to Hire Heroes Act of 2011, eligible businesses can receive a tax credit of up to \$9,600 for each unemployed veteran with a disability that they hire. The Veterans Administration provides assistance with accommodations for disabled veterans as well. These rules tend to change often, and small businesses may not be aware of the financial advantages they offer.⁹

But WWC's relationships with employers go beyond introductions and benefits. In some cases, employers may have distorted preconceptions of what it could mean to hire a Wounded Warrior — exaggerated impressions of PTSI or TBI, a fear that their workplace might be too stressful, or that company procedures would have to be radically altered to accommo-

date the new employee. Career Specialists work to correct these misapprehensions with verifiable information, including research that shows that most cases of PTSI or TBI involve highly manageable symptoms that, if treated responsibly, have little or no effect on other people. The Career Specialists also help employers weigh the considerable benefits of hiring an injured veteran against whatever accommodations might be necessary.

Still, just as for non-veterans, not every job is a good fit. Career Specialists work with veterans as they consider and apply for new positions, to size up the possible risks and rewards and to evaluate how much a given opportunity will fulfill the veteran's needs and contribute to the longer-range goals in the Career Action Plan.

The administrator of a workforce organization for people with disabilities summed up the Wounded Warrior's job-search challenge in these terms:

Many young veterans went directly into the Army upon high school graduation. Now they are back in civilian life, and many are grievously injured. It's important to recognize that they often lack many of the civilian coping skills developed by their peers who did not enter the Army and who now know much more about employers, educational institutions, and civilian service agencies. Many returning veterans also lack adequate family financial management skills, and they're often poor or on the financial edge. This is a population that is both underserved and economically disadvantaged. They need mentoring, guidance, and support to navigate such challenges.¹⁰

Stage 4: Post-Placement Support

The "mentoring, guidance, and support" in Wounded Warrior Careers does not stop with the first job. Even in traditional, civilian workforce programs, research has shown that post-placement counseling, monitoring of progress, and intervention in early stages of difficulty are critical factors in an employee's long-term success. This is especially true of Wounded Warriors, for all the reasons cited by the program administrator quoted above.

Every veteran, every workplace, every job poses a different mix of opportunities and risks. Career Specialists work with employers and veterans to defuse problems and monitor progress

It is important to remember that Wounded Warriors are often coming from a military career in which they thrived and which they were not planning to leave, at least not yet. But the military work environment is different in several important ways from a typical civilian workplace, and someone accustomed to success in the armed forces may find the norms of a civilian job perplexing. In the military, chains of command are clear and indisputable; communication is straightforward, even blunt; explanations for orders

are not expected and are kept to a minimum. Everyone is trained in essentially the same way, and teams pride themselves on an intense bond of trust and commitment.

In civilian organizations, authority flows through both formal and informal chains of command, and a person's influence is not always evident from official titles or organization charts. Communication often depends on subtlety and a knowledgeable reading of undercurrents and nuances. Employees are often flooded with information, some of which is irrelevant to them, and it is up to each employee to know what information can be skimmed or ignored. Not all orders necessarily need be followed, and co-workers often "just seem to know" which rules can be broken. And even friendly colleagues may have very different values and goals, allowing for only a limited degree of mutual trust.¹¹

Consequently, even apart from questions of injury or disability, the leap from military to civilian work culture can be disorienting. For a veteran with a physical disability — and perhaps even more so with TBI or PTSI — the change may lead to crises of self-doubt, confusion, or momentary failure on the job. The Career Specialist has a particularly important role to play at this stage, providing guidance and reassurance, helping to interpret unfamiliar dynamics, explaining special circumstances to employers, and when necessary, intervening to defuse problems before they become critical. Because Career Specialists are themselves veterans, and thus familiar with the difficulties of a military-civilian transition, they can often spot difficulties or discomfort early, and intervene in ways that minimize complications on the job or avoid them entirely.

There is no curriculum or formula for this stage of work. Every veteran, every workplace, every job poses a different mix of opportunities and risks. Success at this stage is, more than anything else, the result of the personal, proactive, and prolonged relationship of confidence built up between the Career Specialist and the veteran over time. That is the primary asset that WWC brings to the post-placement challenge.

But in the post-placement stage, the Career Specialist also gains another client: the employer. Experience has shown that many employers need help in recruiting and assimilating veterans with disabilities into the workforce. Even the most motivated employers may be unprepared for subtle issues that can arise, especially early in a veteran's transition, and many welcome the knowledge that there is someone they can call — in fact, are encouraged to call — in the event that any unexpected concerns or complications should arise.

A Final Aspect: Serving the field

The field of employment services for veterans is becoming more crowded — a welcome development that still has a long way to go. And with that growth in service providers comes an escalating need for more avenues of communication, consultation, and networking among the various programs and organizations. WWC increasingly strives to draw service providers together, especially in the states and localities where it is active, to exchange best practices, discuss research and lessons from experience, and simply become more familiar with one another's work and progress. It is particularly valuable for the military and the VA to remain active participants in these circles. NOD consequently takes care to bring its own personnel together from across the country to join with representatives of other providers, the armed forces, the VA, and researchers and evaluators for periodic opportunities to share experiences and learn.

NOD's partners in Wounded Warrior Careers, described more fully in a later section of this report, also serve as sources of information and advocacy for employing injured veterans. Many of the sources quoted in this report come from publications jointly sponsored by NOD and one or more of these partners, all of which are contributing to a growing network of resources for organizations committed to education, training, medical care, family support, and especially employment of Wounded Warriors and their families. (The publications, and much other information about career services for Wounded Warriors, are available at the NOD website: nod.org.)

RESULTS | WHAT WWC HAS ACCOMPLISHED & LEARNED SO FAR

Between 2008 and 2012, Wounded Warrior Careers has served 275 veterans and their families in Texas, Colorado, and North Carolina, at a cost of approximately \$3,500 per participant per year. Of those, 243 participants were included in the three-year study conducted by the Economic Mobility Corporation. By the end of the study, 70 percent were actively engaged in education, training, work, volunteer activity, or some combination. That is nearly twice the percentage for those who are not in the program. An even higher proportion, 93 percent, had enrolled in an education or training program or had already successfully completed one. Among the 171 participants who took part in a concurrent longitudinal survey, the rate of engagement in any of these activities increased by 85 percent between the time the veteran entered the program and the time of his or her final assessment.

Some 87 percent of participants have expressed a moderate to high level of confidence in their ability to achieve their career goals — a figure all the more remarkable considering the kinds of impairments and obstacles they are working to overcome. And when career plans are thoughtfully developed under the guidance of a Career Specialist, they stick: 85 percent of veterans reported knowing what their career goals were and how they would achieve those goals by the end of the program.

Thus far 39 percent of veterans in WWC have moved into paid employment since joining the program; 71 percent of these are working full-time, and 45 percent have received a pay increase, promotion, or both. The median wage among the employed participants is \$16.35 (the mean is \$18.20), and 55 percent of the jobs they hold offer medical benefits, sick leave, paid vacation, or some combination. Among those who have been employed, 60 percent have remained in a single job for more than a year, and 50 percent of those who left a job in less than a year did so in order to pursue or complete their education.

Of the 145 veterans who have enrolled in college or training since joining the program, 88 percent either have completed the activity or are still engaged in it; 19 percent have earned a degree or completed their training.

Among the most significant lessons of the experience so far has been that careers are not merely a useful addition to the services available to Wounded Warriors as they make the transition to civilian life. In many

ways, and for a great many veterans, the vision of a new career is the heart of the transition. For them, “civilian life” means having an income, skills, a career path, economic independence, a sense of accomplishment, and a means of supporting their families. Services that are based on career goals therefore have a special appeal to the returning veterans; through the doorway of career planning, it often becomes easier to introduce other kinds of services and supports and to build the veteran’s motivation to pursue and make use of them. In the context of a career plan, supportive services, therapy, and counseling seem less like “being taken care of,” and more like tools for building an independent life. In the review of research cited earlier, this dynamic was summarized as follows:

A consistent finding for ... veterans with TBI and PTSD was the extent to which an employment-focused mentality behind the services being provided was a great value to the veteran’s progress. Services that assume the employability of the veterans, are based on real experience in the community, and promote the value of work as an important and attainable outcome all were more likely to produce competitive employment outcomes. ... [By contrast, m]any of the services available to veterans — particularly early in the process of return — are built around a so-called ‘medical model,’ which emphasizes care over self-sufficiency.¹²

Similarly, the way Wounded Warriors rate their health is closely related to how enthusiastically they embrace career planning and how effectively they pursue the plans they make. Based on participants’ self-reports in the three-year study, it was clear that after taking into account their background characteristics, injury type, official disability rating, location, and services received, those who have a more positive rating of their own health are also more likely to be currently employed. Those who rate their health positively were also more confident in their ability to achieve their

career goals. More research is needed to determine which of these factors is the cause, and which the effect. In fact, it is possible that causality runs in both directions: Those who are more positive about their health may be more confident about their career prospects, and those who feel they are making progress on career goals may grow more optimistic about their health. Either way, the dynamic is interesting, probably important, and certainly worth additional study.

The experience of WWC’s first three years of operation shows that early engagement with career planning and career transition support is essential to success. Those Wounded Warriors enrolled in the program prior to or within one year of discharge were

Wounded Warriors who enrolled in WWC within the first year after discharge were 40 percent more likely to engage in education, training, or employment than those who waited longer to sign up

40 percent more likely to engage in education, training, or employment than those who did not enroll until after more than a year had elapsed. The best indicator of success for injured veterans is not the type or level of their disability rating, but their personal view of their health. The best way to achieve a positive outcome is activity focused on their interests, abilities and goals, rather than on their disabilities, injuries, and perceived obstacles. It is essential, of course, to deal realistically with all of these adversities. But an essential key to success is an early and continuing flow of activity aimed squarely at achieving a productive, satisfying career after leaving the military.

What truly distinguishes the WWC model from other approaches to workforce development and disability is its insistence on an extended relationship, typically lasting several years, in which Career Specialists take the initiative, when necessary, to keep the career momentum going. (In the core principles of the model, these are the features labeled “proactive” and “prolonged.”) Research leading to the creation of WWC — in which NOD interviewed more than 200 veterans and their families, and drew from years of experience with other employment efforts for people with disabilities — made it clear that a “high-touch,” long-term relationship would be the key to success. In these interviews, many veterans reported the frustrating experience of receiving a worthwhile but time-limited service, completing it, and then finding — four months or two years later — that more was still needed. At that point, they would have to start the complicated application process all over again, and then form a brand new relationship with a new service provider. The research overwhelmingly suggested that a more sustained, persistent, and personal relationship between veteran and counselor would deliver superior, longer-lasting results. Four years of experience have confirmed that finding by showing that the

percent of Wounded Warriors beginning education, training, or employment increased with the number of days of contact.

What truly distinguishes the WWC model is its insistence on an extended relationship, typically lasting several years

In WWC, a typical Career Specialist has a caseload of 50 veterans and their families. Most meetings take place face-to-face, at the veterans’ homes and in their communities. No topic is off the table; confidentiality is absolute. The relationship extends from the early months after separation from the military all the way to the months, or even years, after successful employment. It is both a richer and longer relationship than would be necessary, or even possible, in the broad universe of employment programs for other kinds of job-seekers. But to overcome the multiple and profound challenges facing seriously wounded veter-

ans, at the beginning of an unexpected and traumatic transition to civilian life, it is indispensable.

Another lesson of the first four years of Wounded Warrior Careers is that there is real value in operating the program as a team between the military and an independent nonprofit organization like NOD. Although the distinct, complementary roles of the Army Advocate and the NOD Career Specialist quickly became obvious to frontline personnel, the idea of two separate, collaborating organizations was not anticipated in the preliminary research or in the initial design of the model. On the contrary, the original plan was that NOD would manage the design and piloting of the program, and it would eventually be adopted by the Army and absorbed into the Army Wounded Warrior program.

Instead, experience has shown that many aspects of the current arrangement — the independence of the Career Specialists, the relative flexibility of a nonprofit manager, and NOD’s ability to draw in other partners without the complex requirements for contracting with the military — have been critical elements of WWC’s success. The close working relationship between NOD and the Army remains an essential strength of the program, not least because of the value of the “warm referral” from the AW2 Advocate, through whom participants make their first connection with WWC. And the public-private character of Wounded Warrior Careers seems to combine the strengths of military and civilian operation in ways that neither could supply on its own.

The next stages of WWC’s expansion — including a new office opening in Pittsburgh and plans for one or two more sites over the next three years — will involve working with all branches of the armed forces, including the National Guard and Reserve, as well as a closer working relationship with the Department of Veterans Affairs. These next phases will also involve more services to the field, with additional conferences, meetings, and publications to share experience and effective practices, and with additional technical assistance to all the communities where the program is operating. All of these field-service functions are also more practical as part of a public-private partnership than they would be in an all-military program.

There is still a great deal to be learned about the potential of WWC, its relationship to new locations and communities, and the effectiveness of various approaches to career planning and different combinations of services. Four years is a relatively short time in the growth of any new program model, particularly one whose defining characteristic is a prolonged advisory relationship lasting up to several years. Performance information at this point is therefore necessarily tentative and partial. Further evaluation over the next two to three years will undoubtedly reveal more, not only about what is working and what needs to be improved, but also about

the needs and expectations of veterans as they move farther along in the civilian chapter of their lives.

RESULT-IN-PROGRESS | A VETERAN'S STORY, CONTINUED

After a period of working with a tutor and developing new skills for studying and learning, Staff Sgt. Ray Duran, U.S. Army (ret.), made another effort at postsecondary education. But this time, the choice was neither impulsive nor solitary. By the time he applied for an engineering program in his home state, he was equipped with a better understanding of his injuries and their effect on his studies, and he had a more detailed idea of what he hoped to accomplish, both as a student and in a career. Just as important, he had resumed his group and individual therapy and was continuing a now-steady working relationship with Career Specialist Dwayne Beason. He recently transferred from the Post 9/11 G.I. Bill to the VA Vocational Rehabilitation and Employment Program, which will provide additional educational benefits to help him complete his training and move on to a career.

In the course of the family's relationship with Sergeant Major Beason, Lisa Duran likewise began to envision a career for herself. She no longer presumed that she would always be needed at home as the primary caretaker for her husband and children. She and Ray could share not only family responsibilities but career ambitions as well. Dwayne Beason worked with both spouses to help plan study and work arrangements that met the family's needs, and supplied both of them with ideas and ways of pursuing their goals that neither had considered before.

Their story is far from finished. But it has already produced something significant: a regular civilian family, managing its challenges, pursuing careers, raising children, and contemplating a future defined more by ability and opportunity than by injury, stress, and anxiety. They see Sergeant Major Beason less often now, but the meetings continue. Their frequency would resume instantly if the need arose.

And that knowledge is, according to Ray Duran, a service in itself.

Wounded Warrior Careers has been conceived and led by the National Organization on Disability, a 30-year-old organization with the mission of expanding the participation and contribution of America's 54 million men, women, and children with disabilities in all aspects of life. In 2007, recognizing what NOD believes to be the most urgent need for Americans with disabilities, its Board of Directors adopted a Strategic Plan focused on improving employment prospects for America's 33 million working-aged Americans with disabilities.

Drawing on its experience in employment for people with disabilities, NOD began research in 2006, at the Army's request, to develop a model for moving the most severely wounded, ill, and injured service members into

civilian careers after the leaving the military. With a seed grant from the Kessler Foundation, NOD started by embedding an experienced consultant at the Army Wounded Warriors headquarters in Alexandria, Virginia, to gain a better understanding of the needs of injured service members and their families. Working with AW2, NOD met with and conducted focus groups with more than 200 Wounded Warriors and their family members to learn about their experience in career transition.

NOD consulted more than 200 Wounded Warriors and their family members to learn about their experiences and needs and to design a program specifically for them

Army Wounded Warriors is the official U.S. Army program that assists and advocates for severely wounded, ill, and injured soldiers, veterans, and their families, wherever they are located, regardless of military status. Soldiers who qualify for AW2 are

assigned to the program as soon as possible after arriving at the Warrior Transition Unit. AW2 supports these soldiers and their families throughout their recovery and transition, even into veteran status. Under the early leadership of Col. Mary Carstensen, U.S. Army (now retired), the AW2 program provided the foresight and encouragement to seek a career transition program designed specifically to assist Army Wounded Warriors and their families. She entered into a Memorandum of Understanding with NOD, which set in motion the focus groups and other research during 2006 and 2007.

With the results of that research, NOD next drafted a Careers Field Manual for use by AW2 Advocates to support veterans in their transition into new careers. AW2 adopted the model described in this initial manual as a reporting system (the "NOD Report") on its employment-related work. Nonetheless, it soon became clear to both Colonel Carstensen and NOD that a separate demonstration program would be necessary, as a way of piloting a comprehensive service approach, testing the concept, learning through hands-on experience with veterans, and further developing a career transition model tailored to veterans with disabilities and their families. With the encouragement of the Army, NOD sought private funding for three demonstration sites. They began operation in 2009.

To help in launching the demonstration program, NOD enlisted the Economic Mobility Corporation, a nonprofit organization that identifies, develops, and evaluates programs and policies that enable disadvantaged individuals to acquire the education, skills, and networks needed to succeed in the labor market so that they can support themselves and their families. Mobility's CEO, Mark Elliot, a nationally known workforce development expert, was instrumental in WWC's design and early implementation. He provided technical assistance in hiring and training the first Career Specialists, establishing sites, and managing and guiding staff, and has provided ongoing support in the development of the model.

Mobility has also been responsible for the project evaluation, which included developing the data collection systems, monitoring data collection, generating monthly reports, identifying trends, and using program data to guide mid-course corrections. The organization has also planned and conducted semi-annual cross-site meetings throughout the project.

A fourth partner in the development of Wounded Warrior Careers has been Give an Hour, a unique organization that recruits professionals to provide voluntary counseling for U.S. troops and families affected by the wars in Afghanistan and Iraq and other post-9/11 conflicts. In partnership with NOD, Give an Hour produced a series of educational brochures titled "America's Best," which provide information for employers and educators on how to help veterans succeed in the workplace. The series, which is cited in several places earlier in this report, was published in 2010. It is available at NOD's web site, at nod.org/research_publications/americas_best/.

In February 2010, the Institute for Economic Empowerment, a research and development program that promotes employment for people with significant disabilities, began a relationship with NOD and AW2. IEE sought to learn more about the process of recovery and re-entry to civilian life faced by veterans with disabilities returning home from wars in Iraq and Afghanistan, and to help ensure that these veterans find success in the career marketplace. The Institute was particularly interested in the needs and

experiences of veterans with PTSI and TBI. Accordingly, NOD assembled information from its earlier research and from the unfolding experience of the new Wounded Warrior Careers program to produce a set of documents — quoted in previous sections of this report — under the title “Return to Careers.” The research done for this project has significantly widened and informed the work of both AW2 and Wounded Warrior Careers.

Included with the report to IEE was a thorough survey of recent research on education and employment for veterans with PTSI and TBI, completed by a team of experts led by Joe Marrone, senior program manager for public policy at the Institute for Community Inclusion at the University of Massachusetts–Boston and Children’s Hospital Boston. The Institute promotes the full inclusion of people with disabilities in every aspect of society through training, research, consultation. strives to create a world where all people with disabilities are welcome and fully included in valued roles wherever they go, whether a school, workplace, volunteer group, home, or any other part of the community. Findings of the ICI literature review are likewise cited elsewhere in this report.

The military conflicts of the 21st century have been the longest period of continuous warfare in U.S. history. Over the past 11 years, more than 2.4 million service members have been deployed to Iraq, Afghanistan, or both, and of those some 1.4 million have left the military to return to or begin careers as civilians. According to the Bureau of Labor Statistics, more than 530,000 of these veterans report one or more service-connected disabilities. More than 110,000 have received disability ratings of 60 percent or higher from the Department of Veterans Affairs.

The positive news is that, because of advances in medical and military technology, many more veterans who have been in combat are returning home alive. But the consequence of these higher rates of survival is a higher rate of injury and long-term disability. Further, today's mix of injuries is different from those of the past: The RAND Corporation estimates that, due to repeated deployments and exposure to battlefield hazards, approximately one-third of Iraq/Afghanistan veterans suffer from Post-Traumatic Stress Injury, Traumatic Brain Injury, or major depression.¹³

With so many veterans retiring from military service with disabilities — often at young ages and without any prior career plan beyond serving in the armed forces — the challenge of helping them prepare for satisfying civilian careers is urgent and demanding. In looking ahead to a new career, seriously injured veterans face a bewildering array of helping agencies, public and private, with limited abilities to meet their needs. One result is that unemployment rates among veterans are nearly 40 percent higher than those of their peers who have not served.

The challenges for injured veterans tend to be cumulative and compounding. The escalating stresses — loss of career, the demands of mental and physical therapy, the difficulty of understanding and managing a new disability, adjustment to civilian culture and community — can quickly become overwhelming. As the pressures mount, veterans are at risk of descending into depression, self-medicating with drugs or alcohol, committing crimes, even becoming homeless, or, in the worst cases, committing suicide. Their families grapple with a loss of income, relationship problems, uncertainty about the future, and the difficulty of raising children and managing household responsibilities while coping with recovery and disability. Many relationships fail, adding yet another layer of emotional and economic hardship to the mix.

These circumstances are severe and complex, but they are not insurmountable. What's more, they are a national responsibility. Americans' virtually unanimous support for the volunteer troops who have borne the fight against terrorism does not end — and must not end — in the Warrior Transition Unit. Those who have served, sacrificed, and survived are entitled, as they return to civilian life, to a degree of effort from their country and their fellow citizens that is commensurate with the effort they expended on our behalf.

A successful transition to civilian life and careers is a debt we owe to those most severely injured in their country's service

It is tempting, and can sometimes be facile, to describe all well-intentioned public programs as moral imperatives. Some are, to be sure. But here is one whose moral underpinnings are beyond reasonable dispute. The successful transition of Wounded Warriors into satisfying civilian careers provides an invaluable opportunity for the United States to continue benefiting from the dedication, talent, and leadership of its bravest young people. But more fundamentally, making sure that this transition is successful is the ultimate debt we owe to those most severely injured in their country's service. The question therefore is

not whether such an effort is called for, but how creative, smart, and effective that effort can be.

Wounded Warrior Careers is one attempt to find answers to that question. Fortunately, it is not the only answer, nor could it be. But it seeks to draw lessons from other, similar work already under way, to integrate that work into a more effective whole, to build more cohesive partnerships with others pursuing similar goals, and to map out a path for measuring and continually improving the results. What we learn from this experience — and even more, what we do with that knowledge — can be at least a downpayment on the debt that all of us owe to those who will continue, in body and mind, to pay the price of America's defense long after the conflicts of the past decade have ended.

NOTES

¹ We follow the usage favored by many veterans by referring to Post-Traumatic Stress as an injury, rather than as a disorder, to clarify that it is the result of harm suffered during military service.

² All events in this case are real, but they have been combined from more than one actual story so as to disguise the identity of the veterans involved. For the same reason, the veteran's name (but no other element of the story) is fictitious.

³ The Army Wounded Warrior Program, known as AW2, supports the most severely wounded soldiers and veterans who suffer from injuries or illness incurred in the line of duty after September 10, 2001. These soldiers and veterans must receive or expect to receive an Army Physical Disability Evaluation System rating of 30 percent or greater in one or more specific categories, such as blindness/loss of vision, deafness/hearing loss, fatal/incurable disease, loss of limb, permanent disfigurement, Post Traumatic Stress Disorder, severe burns, spinal cord injury/paralysis, Traumatic Brain Injury, or any other condition requiring extensive hospitalizations or multiple surgeries, or a combined rating of 50 percent or greater for conditions that are the result of combat or are combat-related.

⁴ "Return to Careers: A National Qualitative Inquiry into the Career Experiences, Interests, and Support Needs of Veterans Returning from Iraq and Afghanistan with Traumatic Brain Injuries and/or Post-Traumatic Stress Disorder," National Organization on Disability, May 2012, p. 39.

⁵ Jean Winsor, Jennifer Schuster Wachen, Jamie Kirsch, Joseph Marrone, and Cori C. DiBiase, "Education and Employment for Veterans with Post-Traumatic Stress Disorder and/or Traumatic Brain Injury: A Review of the Literature," Institute for Community Inclusion, June 2012, Appendix 6 in "Return to Careers" (*op. cit.*), p. 128-129.

⁶ *Ibid.*, p. 129.

⁷ For more on the model, see http://www.person-centered-counseling.com/carl_rogers.htm

⁸ Winsor et al., *op. cit.*, p. 132

⁹ See additional information at the IRS web site:

<http://www.irs.gov/businesses/small/article/o.,id=253949.oo.html>

¹⁰ *Ibid.*, p. 21.

¹¹ *Ibid.*, p. 16.

¹² Jean Winsor et al., *op. cit.*, p. 129.

¹³ Terri Tanielian and Lisa H. Jaycocks, eds., *Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery*, The RAND Corporation, 2008, p. xxi.

Appendix | A Closer Look at the Data

Even before the program was formally launched, throughout the roughly two years of exploration and program design that preceded it, Wounded Warrior Careers has been built on a foundation of research, data, and analysis. The initial years of surveys and information-gathering, beginning in 2007, produced an extensive database on injured veterans' goals, needs, and experience with existing services. That in turn pointed the way to a new approach to filling the identified gaps, integrating available resources, and making the most of veterans' talents, ambitions, and experience. From then on, continuous data collection has been integral to every step of piloting and implementation, and it remains at the heart of the program as it expands to new sites. It is because of this emphasis on data that we are able to report that *70 percent of those participating in WWC are now in jobs, school, or training* — a rate more than double that for Army Wounded Warriors who are not enrolled in the Careers program.

Yet the value of WWC's data-driven approach is not solely to calculate overall results and provide the raw material for evaluations. In the day-to-day operation of the program, WWC's Career Specialists use data to help participants weigh options and establish goals, identify useful sources of support, measure their progress, and adjust their plans as they go along. Managers use aggregate data to learn about the effectiveness of different techniques and combinations of services, and then adjust practices in the field to take account of new information. As WWC emerges from a pilot test to a more fully formed demonstration program, its growing database has supplied a real-time measure of performance and effectiveness that has helped to fine-tune the model and focus attention on the most cost-effective methods, objectives, and expectations.

Given that the program's mix of services and methods of support were still being piloted, varied, and refined in its early years, NOD has not yet attempted a formal evaluation. In reality, with most participants still in early or intermediate stages of their career plans, it is too early to begin an extensive evaluation of outcomes — which, for the most severely injured veterans, can take several years to solidify. (For example, contrary to many short-term models of employment evaluation, a "job," or even a "career path," may not be confidently identified as a "career" until a few years of employment.)

Nor is it yet clear what kind of evaluation would supply the most practical and useful information on the program's effectiveness. While a randomized experimental approach might offer the most definitive test of cost-effectiveness, it would pose logistical and

methodological challenges that would be costly and impractical to overcome. It may well raise ethical issues as well, given that a control group would have to consist of injured veterans who are not allowed to participate — veterans to whom their country owes a moral debt of service and support. It will take some time to determine the right balance of rigor and practicality in the evaluation design. But given that the model still needs a few more years to generate a substantial body of results to evaluate, such a delay is necessary in any case.

In the meantime, NOD continues to collect and pay close attention to data on every aspect of WWC's design, implementation, and progress. The resulting database contains information on participants' characteristics and needs, the services they receive, the means of delivering these services, and the results achieved at each step of the process. The approach is both formative (recording each activity and each accomplishment or setback along the way) and summative (measuring participants' cumulative progress over a period of time).

The information in the main body of this Four-Year Report has been distilled in part from the data thus collected, with information compiled and analyzed first after 12 months of services for each participant, and then again when the program reached the end of its third year. Other sources of information for the report include interviews with staff, focus groups of soldiers and veterans, and independent observation of program activity. Additional information on Post-Traumatic Stress and Traumatic Brain Injury comes from an NOD study, funded by the Institute for Economic Empowerment, titled *Return to Careers*. For those who may be interested in a more fine-grained examination of the data, this Appendix explores the underlying numbers in greater detail — first, to show the kind of information on which WWC has been built; second, to document some of the assertions in the main report; and finally, to illustrate some of the information that will provide the basis for a more complete evaluation.

To assist with data collection, analysis, and independent observation, NOD retained Economic Mobility Corporation, a nonprofit policy development and evaluation organization. Mobility was also involved in the initial design of WWC, site selection, and early guidance to Career Specialists in how to apply the model to their particular environments. Except where otherwise noted, data and graphics presented here are drawn from Mobility's reports to NOD. Some of the text in this Appendix is likewise excerpted from a draft of Mobility's 2012 report.¹

¹ Economic Mobility Corporation, "Final Report on the National Organization on Disability's Wounded Warrior Careers Program" an Independent Evaluation, Draft - May 2012.

I. Wounded Warriors: Characteristics, Assets, and Needs

At the end of December 2011, NOD's database contained records of 326 participants in WWC since its inception (an additional 11 records contained information on veterans who received no services but were merely contacted).² Additional records are continually being added as new participants enroll. Data collected by Economic Mobility Corporation are based on 233 of these participants who were enrolled between June 2008 and July 2010 at three locations: 65 in Dallas, Texas (starting in June 2008); 72 in Colorado Springs, Colorado (starting in August 2008), and 96 in Fayetteville, North Carolina (starting in December 2008). Of these, 171 of the most active participants took part in surveys on their experience in the program after one year of participation and at again in 2011, when the program had reached the end of its third year.

In Dallas, the Career Specialist started off by taking on the entire caseload of an Army Wounded Warrior (AW2) Advocate, essentially accepting responsibility for 65 people at once. Given that the program model needs to start with personal contact, building a trusting relationship, carefully assessing needs and exploring interests, and formulating a preliminary career plan, this proved to be too large an initial caseload. In Colorado Springs, the referral process was somewhat more deliberate: Two AW2 Advocates screened their caseload and gradually referred Wounded Warriors with the greatest need for career support, allowing time for the Career Specialist to meet each one. In Fayetteville, the program started later and was built around two Career Specialists, which allowed the site to enroll more Wounded Warriors than the other sites. At first, participants came through "warm referrals" whenever an AW2 Advocate determined that a Wounded Warrior was ready to begin career planning. Later, NOD developed a screening process to identify those who were most likely to benefit from the program.

Participant Profile: The typical WWC participant can be described as mid-career with financial and family responsibilities, confronting a major career transition. The majority have psychological and/or cognitive impairments, with most having a primary disability of moderate to severe Post Traumatic Stress or Traumatic Brain Injury. All participants were, or would eventually be, medically retired from the military, a process that can take a year or more. That period typically includes treatment, recovery, medical and physical evaluation board (MEB/PEB) processes, and discharge from the service. (At the time they entered the program, the new Integrated Disability Evaluation System (IDES) was not yet in use.)

² Michael D. West and W. Grant Revell, "Secondary Review of the National Organization on Disability Wounded Warriors Careers Program," Virginia Commonwealth University, Nov. 30, 2012, p. 2.

Table 1 shows a general profile of a Wounded Warrior enrolled in the WWC program. Still, it is important to emphasize that these are statistical averages; every Wounded Warrior has individual characteristics that shape a distinct career transition process.

Demographic & Family Characteristics: On average those who served in the Iraq and Afghanistan conflicts were older and more likely to be married than were their counterparts in earlier wars. Reflecting that fact, nearly half of WWC participants were in their 30s, and nearly two-thirds were married. The chart below gives specifics on the program’s demographics. The one on the next page gives more detail on family and income.

Most veterans were living with family members when they entered the program; only 15 percent lived alone. Most either rented or owned a house or apartment; only 2 percent lived in temporary housing or were homeless. Forty-two percent had lived in their current location for less than a year. Nearly half of the veterans had an annual household income **between \$25,000 and \$49,000**. Nearly two-thirds (65%) lived in low-income households as defined by the U.S. Department of Housing and Urban Development.³ The veterans’ primary sources of income were disability and retirement benefits (accounting for 62 percent of their total income); earnings from their own or their spouses’ work accounted for 24 percent of their total income.

Table 1. General Wounded Warrior Careers Participant Profile

MILITARY EXPERIENCE	
Service	Army
Years in Service	7
Branch / Specialty	Combat Arms Infantry, Artillery, Armor
Rank / Grade	Sergeant / E-5
Total Months in Theater	9
EDUCATION/WORK HISTORY	
Education at Service Entry	High School / GED
Work Experience Prior to Military	Limited
PERSONAL	
Age	34
Race	White
Marital Status	Married - 65% Divorced/Separated - 15%
Children under 18	66%
Household Income (post disability)	\$25,000 - \$45,000
INJURY/DISABILITY	
VA Disability Rating	70-100%
Primary Injury	Post Traumatic Stress / Traumatic Brain Injury

Table 2. Demographic Characteristics of Veterans in the NOD Wounded Warrior Careers Program

Gender	
Male	93%
Female	%
Age	
21 to 29 years	30%
30 to 39 years	47%
40 to 63 years	23%
Race Ethnicity	
White	68%
African – American	14%
Lano	12%
Asian	%
Other	%

³ HUD defines low-income households as those whose earnings are less than 80 percent of the median household income for the area.

Table 3. Family and Household

Marital Status	
Currently married	65%
Living in marriage-like relationship not married	%
Divorced, separated or widowed	15%
Never married, not living in a marriage-like relationship	14%
Has a child support order	
	25%
Annual Household Income	
Less than \$25,000	21%
Between \$25,000 and \$49,000	48%
\$50,000 or more	30%

Education and Work Experience: Many of the veterans on the NOD Careers caseload had only limited work experience prior to joining the Army. In interviews, veterans reported having worked in low-wage jobs in such fields as food service, retail sales, construction, and factory work. Some had started to attend college after high school but quickly dropped out, either due to finances or uncertainty about what they wanted to do. Many joined the Army for the opportunity it offered to gain skills and education and to build a foundation for their careers.

The average length of the veterans' active-duty military service was seven years. Eighteen percent of WWC participants had been in the military for ten years or more. Nearly two-thirds had retired from the military at non-commissioned officer ranks, while about one-third retired at lower enlisted ranks. The veterans' occupational specialties in the military varied.

While just over a third (36%) were in Infantry, fewer than 10 percent were in any of the other specialties. Some of the more common specialties were Ordnance Corps, Corps of Engineers, Armor and Field Artillery. Some veterans started to earn college credits while they were on active duty, but most had not earned a degree. The great majority (81%) had only a high school diploma or GED when they entered the Careers program. Sixty-one percent enrolled in the Careers program either while they were still on active duty or within a year of their retirement from the military. Most of the veterans had not been employed since retiring from the Army; only 30 percent had held any job. Still, 19 percent were working when they entered the Careers program, and another 19 percent were attending college or training at the time they entered.

Table 4. Veterans' Education and Experience at Program Entry

Highest Degree Earned at Program Entry	
High school diploma or GED	81%
Associate's degree	%
Bachelor's degree	%
Master's degree	%
Attending College or Training at Program Entry	
	19%
Rank When Released from the Military	
Enlisted: E1 to E4	32%
Enlisted: E5 to E9 (Noncommissioned Officer/NCO)	63%
Officer	%
Years of Active Duty Military Service	
Less than 3 years	17%
3 to less than 5 years	27%
5 to less than 10 years	%
10 years or more	%
Time Between Release from Military and Program Entry	
Still active duty at program entry	%
Released for one year or less	%
Released for more than one year	%
Employed for Pay at Program Entry	
	%

Health and Disability: Rates of PTSD and TBI were much higher among the veterans on the WWC caseload than among those estimated in the population of deployed service members in the Iraq and Afghanistan conflicts. Eighty percent of program participants had either PTSD or a TBI or both, and 70 percent reported PTSD or TBI as their primary rated disability. Nearly two-thirds had PTSD, and close to half had a traumatic brain injury. Half had a physical disability other than a traumatic brain injury. Overall, more than a third of the veterans (39%) said they required some type of special equipment as a result of their injuries, such as a leg or back brace, cane, wheelchair, hearing aid, or prosthesis. The following graph presents the most common types of disabilities among the veterans in the program; the table gives further detail on their health and degree of disability.

Table 5. Disability and Health Ratings

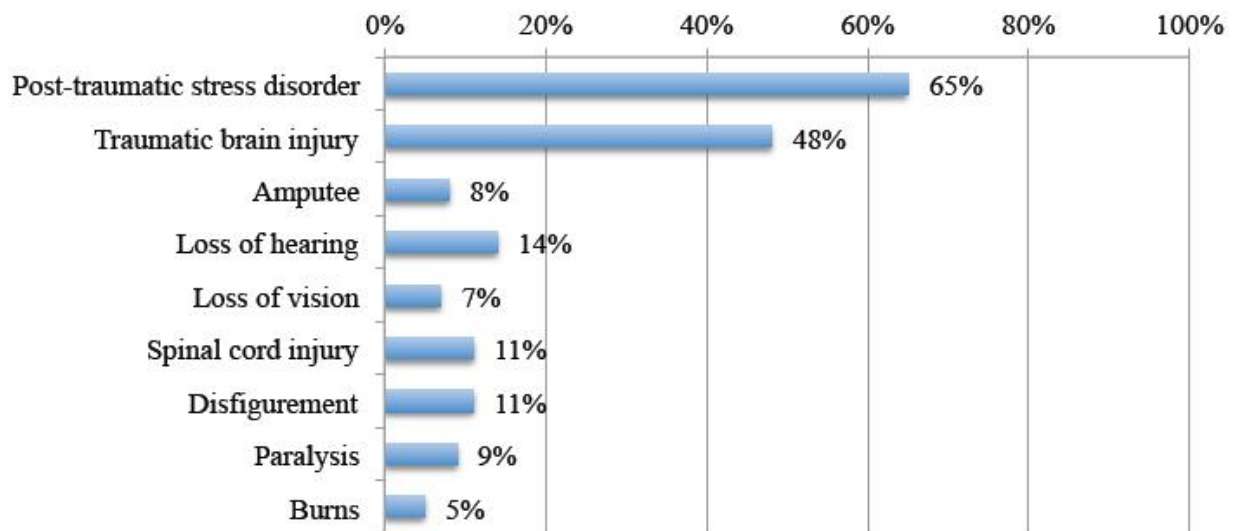
VA Disability Rang	
Less than %	%
50 to %	15%
70 to %	43%
100%	37%
Veterans' Rang of Their Own General Health	
Excellent or very good	16%
Good	41%
Fair	33%
Poor	11%
Difficulty Doing Routine Tasks (paying bills, housework, etc.)	
Not at all difficult	49%
Only a little or somewhat difficult	36%
Very difficult or cannot do at all	15%

Interviews with a sample of the veterans on the caseload provide more insight into how their injuries may affect their pursuit of employment or education. Many veterans who had PTSI or TBI said that they had days when they could not function due to migraines, depression, or nightmares that kept them from sleeping the night before. At times their injury caused them to feel overwhelmed and to experience anxiety attacks. These attacks were often triggered by something that reminded them of combat, including loud noises, crowds, smells such as burning fuel, settings such as construction areas, or being around soldiers or people who are injured. Some were not comfortable being around other people at all; they needed to be able to see everything and everyone around them and felt uneasy when anyone was behind them.

Some participants said they had mood swings and were more short-tempered than they had been before they were injured. For this reason, they worried about their ability to interact with coworkers or customers on the job. Some said they were easily frustrated, particularly when they felt they were not performing as well as they should. Some expressed concerns about being able to handle the stress that comes with working in a fast-paced environment or in a position where they would be responsible for managing others or working on multiple projects, even though this was the type of position to which they aspired. These conditions may well diminish over time, but recognizing and dealing with them constitutes an important early step in considering possible careers.

Most of the veterans who had a traumatic brain injury said they had difficulty with short-term memory. They also felt that it took them longer than others to process information and to perform tasks at work or school. Some mentioned having difficulty with multi-tasking and said they needed to focus on just one thing or a couple of things at a time, whereas in the past they could do more. They needed to slow things down and pace themselves so that they did not become ill. These participants also said they had difficulty concentrating, partly due to an inability to filter out background noise. This affected their ability to take a test, complete a task, or hear and comprehend what other people were saying.

Figure 1: Types of Disabilities Among Veterans in NOD Careers



Note: Figures do not equal 100 percent; veterans may have more than one injury

Many veterans on the caseload had physical injuries that caused pain in their legs, arms, hands, back, shoulders, hips, and joints. Many reported that they could not do the physical type of work they had done in the past, such as construction or mechanic work, or pursue jobs in security or law enforcement, because they could not lift, climb, move quickly, walk a long way, or keep their balance. Some were unable to sit for periods of time, which affected their ability to work in an office setting. Despite the barriers they faced, the veterans wanted to learn how to work through their physical or mental health issues in order to pursue their career goals. The availability of simple workplace accommodations may also help in overcoming some of these perceived limitations.

Differences Among the Program Sites: Participants in the three program sites came to WWC with different levels of education and work experience. In Texas, the program served a higher percentage of veterans who had a Bachelor’s or Master’s degree at the time of program entry than did the other two sites (19%, vs. 13% for the program nationwide). The North Carolina program had a higher percentage who had retired as non-commissioned officers (77%, vs. 63% nationwide). The Texas program also served the

highest percentage of veterans who had been retired for more than a year (48%, vs. 39% nationally). On the other hand, the North Carolina program served a higher percentage of service members who were still on active duty (39%, vs. 28% nationally) than did the other sites. Veterans in the Colorado program were somewhat more likely than others to have lived in their current location for less than a year (57% vs. 42%). They were also more likely to have annual household incomes below \$25,000 at the time of program entry; 88 percent of veterans on the Colorado caseload lived in low-income households, compared with 65% across all sites.

There were also differences in the types of disabilities on the three caseloads. The percentage of veterans who had PTSD, TBI, or both was higher among veterans in the Colorado program (93%) than in the other sites. Veterans in the North Carolina and Texas programs were more likely than those in Colorado to have physical disabilities other than a TBI. Average disability ratings across the sites did not vary significantly.

Demographically, variations among the programs were relatively small. The North Carolina program served a slightly higher percentage of African-American veterans (25%) and Colorado a slightly higher percentage of Latino veterans (18%). Age and gender did not vary significantly.

North Carolina has served the largest number of veterans, with 43.2 percent of all cases through December 2011. The Texas caseload was second-largest, at 34.5 percent of the total, and Colorado had the remaining 22.3 percent.⁴

II. The WWC Model: Program Elements and Participant Experience

The basic service model of Wounded Warriors Careers, and several of its variations, are detailed in the main body of this Four-Year Report. We will not recapitulate that information here. Instead, this Appendix presents additional detail on the extent to which particular kinds of services were used (both overall and by location), and how participants viewed these services.

Frequency and Duration of Contact: Across the three program sites, 90 percent of the 233 participants in the Economic Mobility Corporation's database as of 2011 had been seen in person at least once. The veterans in the study sample entered the program at different points in time; therefore, the number of quarters available to observe their contact with the Career Specialists prior to the end of data collection ranges from five to twelve. All of the veterans were in the program for at least five quarters before the end of data collection; two-thirds were in the program for at least eight quarters.

Career Specialists had some type of contact with three-quarters of the veterans within the 12 months after they entered the program. Excluding contacts made solely by e-mail, 64

⁴ West and Revell, *op. cit.*, p. 2.

percent of the veterans received an in-person or telephone contact during those first 12 months. Overall, the average duration of contact was 18 months. Contact was not necessarily persistent throughout the entire length of the demonstration. Overall, 16 percent of the veterans had some type of contact with the Career Specialists in their final quarter in the program prior to the end of the demonstration; 10 percent had in-person or phone contact. The average number of contacts by any method during the first year after program entry was 11, of which the average number of in-person or phone contacts was seven. Among those who had in-person or phone contact, the number of contacts during the first year ranged from one to 29. The level of contact was greater in the first quarter after program entry than in later quarters.

There was significant variation across the three program sites in the frequency, duration, and method of contact with the veterans. As was described earlier, the method of referring and accepting participants differed over time and from site to site, which led to considerable variation in caseloads, needs, and timing of enrollment. Further, as the model was evolving, Career Specialists took differing approaches to their means and frequency of contact. In some cases, this was driven by a desire to enroll and assist more veterans over time. In some cases, Career Specialists felt that once someone was on track with pursuing their career goals, whether that meant going to school or working, then intensive contact was no longer needed and this time could be better spent with veterans who were not yet on track. Some felt that, once the veterans were in their jobs or education programs for three months, then the relationship should change from one of proactive follow-up to one where the veterans called when they needed assistance.

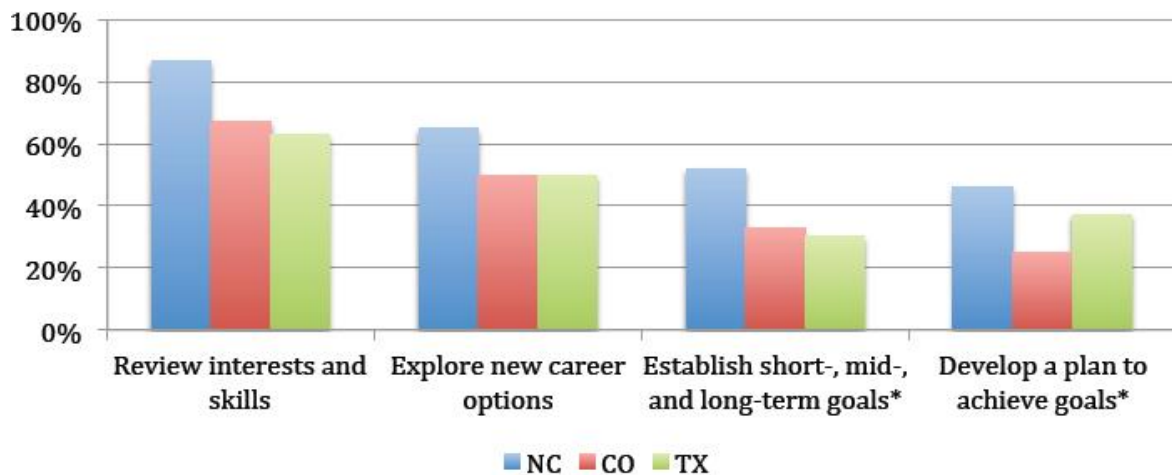
The size of the AW2 caseload increased significantly during the demonstration, increasing the demand for the Career Specialists' services. The caseloads were also spread out across the states in which the Careers programs were located. Some veterans assigned to the AW2 program in Colorado resided in other states and, across the three programs, veterans moved over time to other states. The size and location of the caseloads resulted in the Career Specialists relying more on telephone and email contact over time.

Career Exploration and Planning Assistance: Three-quarters of WWC participants said in interviews that Career Specialists helped them develop realistic career goals, given their interests and the nature of their disabilities. For example, a number of veterans were initially interested in police or detective work but could no longer meet the physical and/or psychological requirements of these jobs. In such cases, the Career Specialists sought to help the veterans explore other options while taking their interests into account, such as considering computer-related or administrative work in law enforcement. Some veterans needed to learn firsthand what was realistic, and Career Specialists arranged for them to talk with professionals or do job shadowing in their field of interest.

At two of the three sites, in Colorado and Texas, the Career Specialists were less likely to develop formal career plans with the veterans. During the intake and assessment process they asked the veterans questions about their interests and had them do research on the internet so that they could learn more about the occupations in which they were interested and what the job market was for them. In some instances, the Career Specialist in Colorado connected the veterans to job shadowing opportunities to get first-hand experience with the field and help them decide if it was a good fit for their interests and skills. In Texas, the Career Specialist referred people who were uncertain about their career goals to a career coach at another agency or to college admissions offices where they could complete assessments to identify their interests and the occupations for which they were best suited.

In addition to helping the veterans make progress in pursuing their careers, the program sought to improve the veterans’ attitudes about their future career prospects and their ability to achieve their career goals. Among the veterans who responded to both waves of the survey (first after 12 months’ participation, second when the program had reached its third anniversary), there was no change in the percentage who felt that they knew what steps they needed to take to achieve their employment or career goals; 85 percent felt that they did. There was also no change in the veterans’ rating of how confident they felt about their ability to achieve their employment or career goals. At both points, a minimum of 84 percent of veterans expressed confidence in being able to achieve their goals.⁵

Figure 2: Veterans Receipt of Career Exploration and Planning Assistance



*These questions were asked only in the second round of the survey.

⁵ About 42 percent of the veterans expressed a high level of confidence and another 42 to 45 percent a moderate level of confidence.

Career Preparation, Education, and Training Assistance: Overall 63 percent of participants reported in surveys that they had received assistance from Career Specialists with admission to college or training, and just over half (53 percent) said the Career Specialists helped them identify disability resources to support them in their education. The North Carolina program provided education and training assistance to a higher percentage of its caseload than did programs in the other two sites. Perhaps as a result, participants in North Carolina were significantly more likely than those in Texas or Colorado to start a college or training program.

Across all three sites, 44 percent of veterans on the caseload enrolled in a college or training program after entering the NOD Careers program. The amount of time between program entry and enrollment in a new college or training program varied substantially among the veterans, with an average time of nine months and median of seven months. Among all the veterans who ever attended college or training after entering the program, including those who were attending when they started, most (80 percent) were seeking either an Associate's or a Bachelor's degree. The most common fields of study were business administration (24 percent); mechanics and repair, primarily automotive (11 percent), and health care, mainly nursing and technicians (also 11 percent).

Only 19 percent of the participants who were enrolled in education or training during the two-year span of the data completed their studies before the data-collection ended. The demonstration therefore did not allow enough time to draw conclusions about whether they were able to complete their studies successfully and find jobs in the corresponding field.

Job-Seeking and Volunteering Assistance: Overall, nearly half of all participants said they had received help in finding a job, and just over a third (37 percent) said the Career Specialists had identified disability resources to support their employment. Beyond directing veterans to job-search engines, the Career Specialists had different approaches to helping them search for work. In North Carolina and Colorado, the Career Specialists developed contacts with human resource personnel on local military bases and at federal agencies. The staff in North Carolina asked these contacts not only to consider the candidates but also to review their résumés and provide feedback on how to improve them in order to increase the veterans' chances of being considered for federal positions. In the Texas program, the Career Specialist referred veterans to agencies such as Vocational Rehabilitation and Employment and the Texas Veterans Commission for help in identifying job opportunities.

Because many participants were reluctant to disclose their disabilities to employers or to seek accommodations (an issue discussed at greater length in the main body of this report), Career Specialists often could not become directly involved in helping to arrange workplace accommodations to address individual veterans' disabilities and raise their odds of success. Instead, the program staff was more likely to focus on helping

participants identify occupations that matched both their interests and abilities and, therefore, in which they would be more likely to succeed. Another strategy was to identify workplaces that were generally more understanding of veterans' needs. For example, in North Carolina, the Career Specialists targeted civilian jobs on the military base where the employers offered the veterans the flexibility they needed to go to their medical appointments. In Colorado, the Career Specialist arranged for the veterans to meet with a counselor when they were starting a job who would talk with them about sources of stress on the job and how to manage new relationships in a civilian work environment.

In survey responses, 29 percent of participants said Career Specialist had helped them find volunteer opportunities or nonpaid work experiences. This ranged from a quarter of the veterans in the Colorado and North Carolina programs to 37 percent in Texas.

Financial Assistance: A consistent theme in interviews with program participants and staff was the veterans' concern about financial stability. Immediate budget pressures often arose, such as the need to support families. For instance, some veterans who were referred to WWC were interested only in immediate employment in any job; they were not focused on developing and pursuing career goals. While the Career Specialists may have been able to help them find work, they did not feel they were helping with the fundamental program goal of building careers. Career Specialists reported that they often needed to help veterans and their families resolve serious financial concerns before they were able to begin working on career plans. This further emphasizes the importance of completing a financial assessment with veterans to ensure that the Career Specialist identifies all barriers to achieving a successful career transition.

Partially in response to the immediacy of participants' financial pressures, NOD established a system of flexible support funds, administered by the Career Specialists, to make small purchases or cover expenses that would help the veterans pursue their career goals. These mini-grants provided a way to deal quickly with barriers for which there were no other reasonably available solutions. Whenever possible, Career Specialists took advantage of other resources available through community, military, or VA systems. Overall, 41 percent of the veterans received some form of financial support, a figure that did not differ significantly across the three program locations.

Use of Other Community Resources: One of the first tasks required of the Career Specialist was to identify resources in the community that would be useful to veterans and to create a resource map. Career Specialists reported that just over half (56 percent) of the veterans on their caseloads were referred to services at other agencies, such as local One-Stop Career Centers, the Army Career and Alumni Program, the VA Vocational Rehabilitation and Employment Program, and other nonprofit, Army, and private employment-related services. In the initial survey, 12 months after being referred to WWC, participating veterans were asked (a) whether they were using employment, education, training, or career planning from outside agencies at the time of the survey and (b) whether they had

been doing so 18 months in the past. An unexpected finding is that on average their use of services from other agencies either decreased in the time between these two periods or remained about the same. It would obviously be desirable to learn more about this phenomenon in future surveys; for now, one plausible explanation is that many of the available resources and services are short-term in nature, and many veterans may have already made use of them before enrolling in WWC, or did so soon thereafter. The experience of career planning may also have helped participants focus on only those services that directly advance their career goals, while reducing or discontinuing their use of other programs. However, these explanations are merely hypothetical at this point, pending further research.

While the use of community resources around career planning and employment did not increase over time, many veterans who were attending college or training did make use of resources available at their educational institutions or through other agencies to help them succeed at their studies. The great majority (82 percent) of participants who were attending college or training at the time of the final survey were using either the GI Bill or Vocational Rehabilitation and Employment Program benefits to cover their tuition costs.

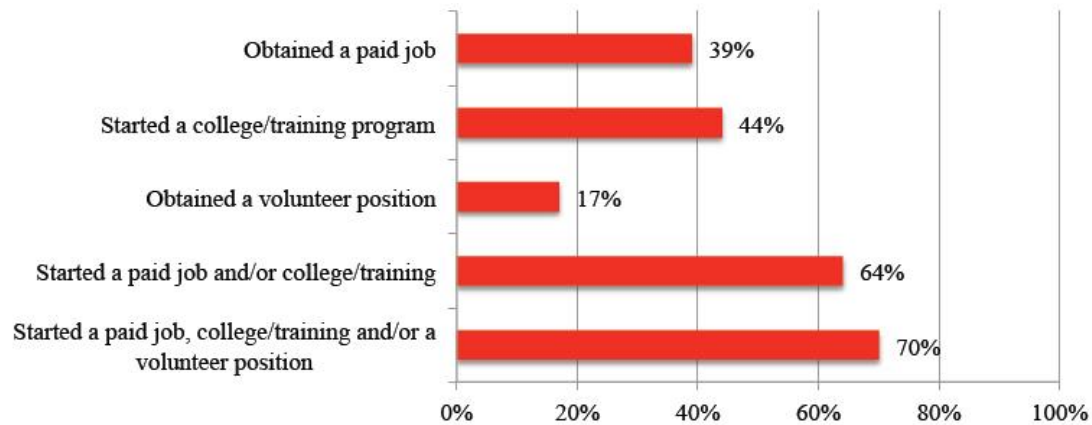
Participant Satisfaction with WWC’s Services and Referrals: Most of the survey respondents reported that the career planning assistance they received from NOD Career Specialists had helped them with achieving their goals. When talking about how they felt about this assistance, the participants most commonly emphasized that they felt the Career Specialists were willing to do anything to help them. While the veterans pointed to specific things the Career Specialists had done for them, they focused on more intangible kinds of support — noting, for example, that the Career Specialists listened to them, understood what they were going through, showed compassion and respect, and were reliable. Career Specialists reviewed options with them, informed them of opportunities and resources, and helped them develop plans for dealing with the barriers they faced. Veterans noted the importance of the personal contact; the Career Specialists did not just give them the name of another agency but introduced them to the relevant personnel and walked them through the process of enrolling in and using the service. Many respondents, particularly in North Carolina and Colorado, also noted that NOD staff had helped them with their résumés, told them about job leads, and called employers on their behalf.

III. Outcomes: Employment, Education, Training, & Volunteering

During the course of the demonstration, a sizable majority of the participants (70 percent) achieved at least one of the program’s primary goals: employment (including volunteering), education, or training. This percentage includes veterans who had not been engaged in any of these activities when they entered the program, as well as those who were working or attending college or training at the time of program entry but

subsequently changed jobs or college/training programs. It does not count those who merely continued in an activity that they were already pursuing at the time they joined the program.

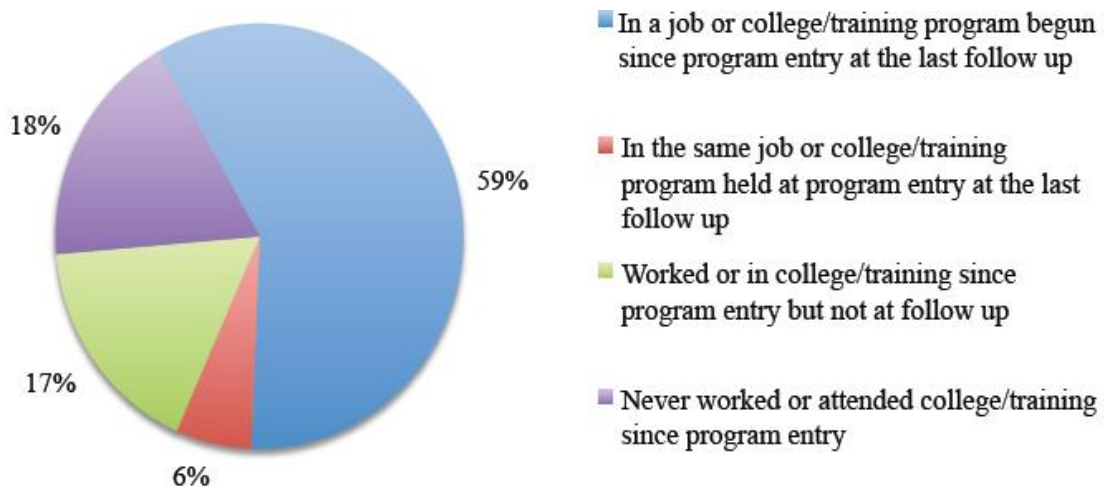
Figure 3: The Outcomes Veterans Achieved after Program Entry



(n=233)

Among participants who completed follow-up assessments at least one year after program entry, more than three-quarters (76 percent) of respondents reported that they had begun their job, volunteer work, or course of study following their enrollment in the WWC program. Only 6 percent were continuing in an activity they had already begun prior to enrollment.

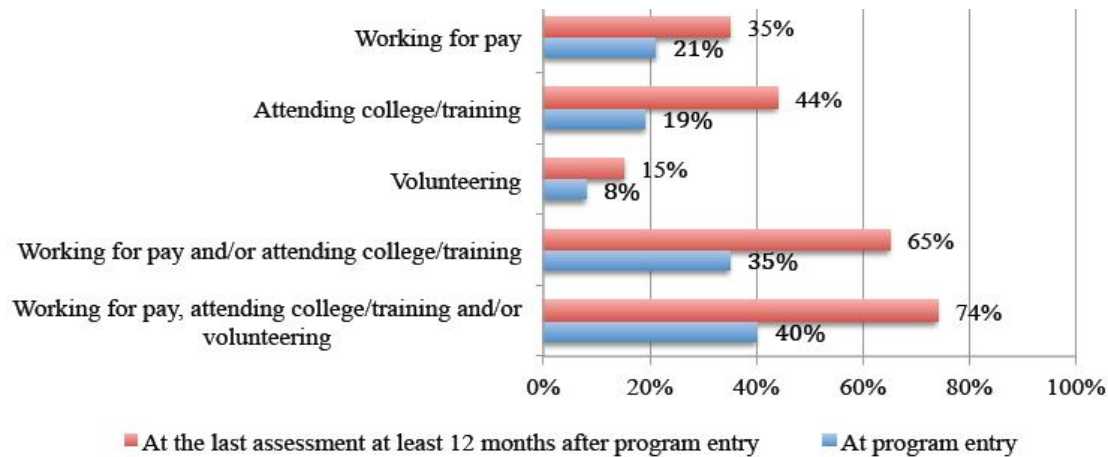
Figure 4: Progress in Employment or Education during the Initiative (n=171)



Overall the rate of engagement in education, training and/or employment (including volunteering) rose 85 percent between the time a veteran entered the program and the time of the final assessment by Career Specialists. Roughly 40 percent were engaged in

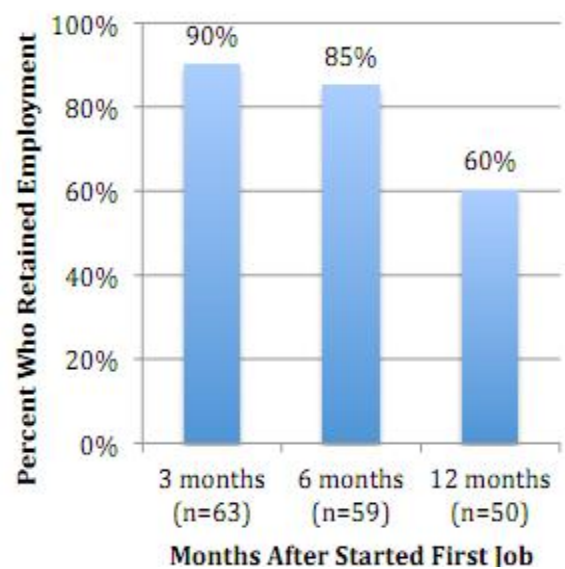
one of these activities at the time they came to WWC; by the time of the final assessment the figure was 74 percent.

Figure 5: Change Over Time in Veterans' Engagement in Employment, Education or Volunteer Work (n=171)



Employment, Earnings, and Job Retention : Of all participants in the program, 39 percent obtained a paid job after entering, and a majority of those continued in that position for at least six months. Twenty-one percent of all program participants both obtained a job after entering WWC and had retained it for six months or more. Fourteen percent of all veterans experienced an increase in hourly wages while in the program. Of those who obtained a job after enrolling in WWC, 60 percent remained employed for at least 12 months. Many participants changed jobs after obtaining the initial one; 42 percent of those who worked in a paid position during their participation in WWC had held more than one job. The graph to the right displays periods of continuous employment — but not necessarily in a single job — for those who took a paid position after entering WWC.

Figure 6. Employment Retention Among Veterans Who Obtained a Job While in the Program



Wages varied significantly, ranging from \$7.25 to \$50 an hour. The mean wage was \$18.20, the median was \$16.35. Nearly three-quarters (71 percent) of the employed veterans worked 35 hours or more per week. Fifty-nine percent had jobs offering paid vacation time and sick leave, while 55 percent had jobs that offered medical benefits. Nearly half (46 percent) of the veterans worked for private for-profit firms, and 39 percent worked for government agencies. The veterans' occupations varied widely, with only one or two people in most

occupational categories. The occupations in which five or more veterans were employed included business operations and management, administrative work, and security.

Figure 8. Sector in Which Employed

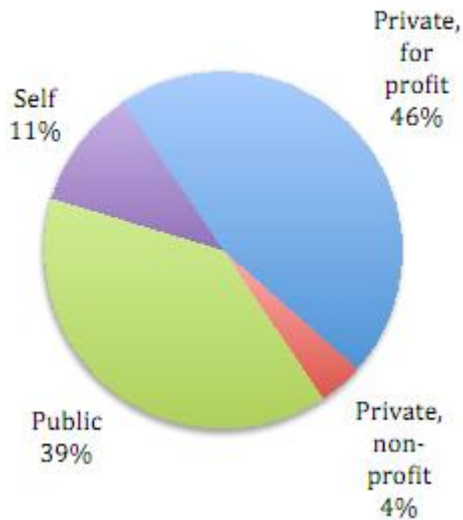
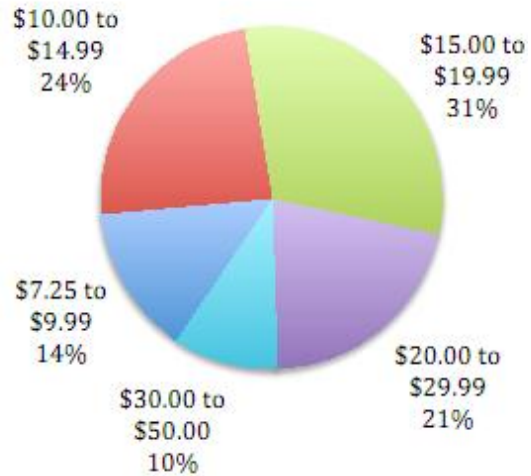


Figure 9. Hourly Wages at the Time of the Last Assessment (n=71)



Many of the veterans on the caseload were not immediately seeking employment. Among veterans who responded to the follow-up survey, a third of those who were not currently working said they were looking for work, including some veterans who were at the time attending college or training. But another 49 percent were either attending college or training or volunteering and said they were not currently looking for a paid job.

Employment, Volunteering and Education — A Second Look at the Data: In a separate review of WWC program data — covering a longer period of time and a larger number of participants than the Mobility analysis reported above — researchers at Virginia Commonwealth University (VCU) found that participants had entered 170 paid jobs between 2008 and 2011. Of those, close to 56 percent were for 32 hours a week or more, and 53.5 percent were for 40 hours or more. Of those who had taken jobs, 54 percent were still employed at the end of the study period, in late 2011. Mean earnings were \$552 a week, ranging from \$10 to \$4,800. The mean hourly wage was \$16.53. Among jobs that were terminated before the end of the research period, the mean length of time that a participant held the job was 31.3 weeks. Nearly one-third (33 percent) had lasted six months, and 15.7 percent reached the one-year milestone. “These numbers,” the researchers conclude, “suggest that the changes brought about by the project were fairly

durable in comparison to data from similar employment programs serving individuals with severe disabilities.”⁶

The VCU researchers were less positive about the outcomes from volunteering. On one hand, they note that of the 80 participants who took up volunteer assignments, close to 54 percent were still in those volunteer positions at the end of the study period. True, roughly one-third were in very short-term arrangements lasting between a day and a week. But “for the remaining two-thirds of volunteer experiences,” the authors note, “durability was remarkable. The mean length of time in the volunteer position was 84.8 weeks. Over half of volunteer positions were active at least one year, and 46.3 percent were active for at least two years.” The less positive observation, however, was that there did not appear to be much of a correlation between volunteering and eventual movement into paid employment: Of 115 individuals who acquired paid employment, only five had previously held an unpaid position, and in only two of those cases was the unpaid work in the same organization as the eventual paid job. The researchers conclude that “The benefits of volunteerism are many, such as increasing one’s self-worth and self-esteem, giving back to one’s community or fellow soldiers, maintaining mental and physical health, and so forth. However, these data do not provide evidence that volunteerism is an efficient and reliable path to employment.”

The VCU report found that 143 participants had enrolled in some type of education or training, primarily in community colleges, business colleges, or trade schools. Of these, 62 ended before the conclusion of the research in 2011, though only 17 of them were recorded as having completed the program of study. In 47 cases, participants terminated one course of study and either changed major or enrolled in a different program altogether.

Differences in Outcomes Among Sub-Groups of Participants: As part of its analysis of program data from 2008 through 2011, the Economic Mobility Corporation examined whether outcomes varied for subgroups of veterans based on their demographic characteristics, education, military experience, the type and severity of their disability, and the program site. Mobility found that, after accounting for all other differences, veterans whose disabilities were more severe were less likely to obtain a job or start college or training after entering WWC.

This finding is consistent with what Career Specialists said they learned during the demonstration about when veterans are ready for pursuing careers: Veterans whose disabilities are more severe may have more medical appointments or pending surgeries, making it difficult for them to attend classes or go to work consistently. Post-Traumatic Stress may impede some veterans’ progress, often due to the medications they are taking,

⁶ West and Revell, *op. cit.*, pp. 4-5.

which have side effects such as drowsiness that make it difficult for them to function well in interviews, on the job or in class. Some veterans who did start work found that they were not mentally ready to work regularly. This is not to suggest that these veterans would not eventually benefit from career planning assistance. But those with more severe disabilities may need more time and support to make progress in pursuing either education or employment.

Mobility also found that veterans who entered the program while they were still on active duty or within a year of retiring from the military were more likely to achieve one of the targeted outcomes than those who had been out of the military for more than a year. This finding suggests that it is valuable to reach out to veterans early, even before they have retired from the military, to engage them in career planning.

In interviews, many WWC participants mentioned that they had been required to attend classes on writing a résumé and searching for a job as part of the process of transitioning out of the Army, but they often found these services too generic and standardized. Several respondents suggested that career services needed to take the veterans' particular experiences, interests, and abilities into account. Receiving that kind of particularized attention early on may help veterans get on track soon after retiring from the military and help some of them avoid career paths that are not well suited to them.

IV. Context and Environment: A Concluding Reflection

Developing and testing any human-service model — and perhaps especially a model designed to increase employment — is an exercise that is necessarily at the mercy of external, partly unpredictable events. That has been particularly true for Wounded Warrior Careers, a program initially planned in the swell of a strong economy but launched near the trough of the Great Recession. The harsh labor market in 2008 and beyond may well have drawn larger numbers of veterans, at least in the near term, toward education and training rather than directly into the workforce. Meanwhile, increases in the GI Bill's living stipend have made it possible for many veterans to commit themselves to full-time education without needing to earn income at the same time. These factors may, in turn, have skewed the data on program results. Whether the balance will shift as the labor market improves is a question that will have to await another round of data-gathering and analysis.

Similarly, during the program's pilot phase, the federal government established several programs to encourage hiring of veterans and people with disabilities. It is possible that the availability of these programs may have drawn more Wounded Warriors to federal employment than would otherwise have been the case. At the same time, rapid growth in the number and type of nonprofit organizations serving Wounded Warriors and veterans created a confusing and complex landscape. It is estimated that there are now more than 40,000 organizations serving veterans. As an early entrant into the field, NOD found that

this expansion often distracted Wounded Warriors and the AW2 program staff and required NOD Career Specialists to devote unanticipated time learning how to navigate among these organizations.

Just as the landscape is rapidly changing among nonprofits, the velocity of change in programs and benefits for injured service members at the federal level has also increased significantly. The President's Joining Forces initiative, the Department of Defense's "Sea of Goodwill," and some new legislation have all created a dynamic environment in both the public and private sector that promotes career transition programs for Wounded Warriors and their families. In general, the growth in the size and diversity of this field has only underscored the value of a program like WWC — one that can select, coordinate, and sequence the multitude of available services and supports in a way that works effectively for each veteran.

Another significant change has been in the size of the total eligible population. When NOD initially began working with the Army, there were fewer than 1,500 service members and veterans in the entire Army Wounded Warrior program. At that point, it was our intention that the sample size of this program would be between 10 and 15 percent of the total population of AW2 Wounded Warriors. As of this report, AW2 now serves more than 10,000 people, which means that the data on which most of this report is based come from approximately 2 percent of that total. That does not necessarily undermine the significance or relevance of the findings presented here. But it suggests that there may yet be a good deal more to learn about the potential of WWC and the way its lessons apply to a much larger landscape.

The Wounded Warrior Careers Demonstration is now expanding beyond the original three-site, three-year pilot design. That expansion is built on the same commitment to data collection, analysis, and publication that has been the foundation of our first four years' work. The establishment of new sites will make it possible to examine the model's effectiveness with larger numbers of veterans, with different caseload sizes for Career Specialists, and with variations in the intensity and duration of services. That experience, plus continued tracking of results for the current participants, will help to deepen understanding of how these factors influence the career success of veterans with varying levels of disability. As the economy continues to improve, the next phase of work is also likely to help clarify the relationship between Wounded Warriors' education and early job choices — their progress through study and training, volunteering, internships, and interim or temporary employment — and their eventual success in building long-term careers that correspond to their abilities, interests, and goals.

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