



VIRTUAL CENTER OF EXCELLENCE FOR
VETERAN STUDENT SUCCESS

VETERAN STUDENT FACULTY GUIDE

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The Military Connected Student

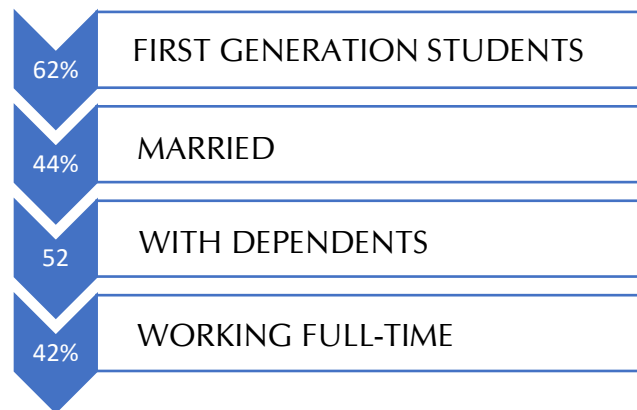
Military and Veteran Student Basics

In addition to the adjustments and challenges all students face when embarking on an academic journey, military and veteran students face some unique challenges. These challenges may become overlooked if we are not aware of how to identify and assist students facing these issues.

The Virtual Center of Excellence for Veteran Student Success serves military connected students (MCS) who are actively enrolled in a Wayland Baptist University Program.¹

MCS Students:

- Are as diverse as the United States and often have global experiences
- Are often resourceful, resilient and adept at team building
- Can feel alone in civilian populations
- Are often unaware of mild traumatic symptoms or injuries
- Often suffer in silence and may be unaware of any learning limitations
- Are likely first-generation students and work either full or part-time
- Often carry with them their service's core values



¹ Military connected students include veterans and current service members. A veteran is defined as a “person who served in the active military, naval, air, or space service, and who was discharged or released therefrom under conditions other than dishonorable.” A military service member is a member of the armed forces which include the “Army, Navy, Air Force, Marine Corps, Space Force, and Coast Guard.” - U.S. Code Title 10 & 38

Military Culture and Issues Impacting Military Connected Students

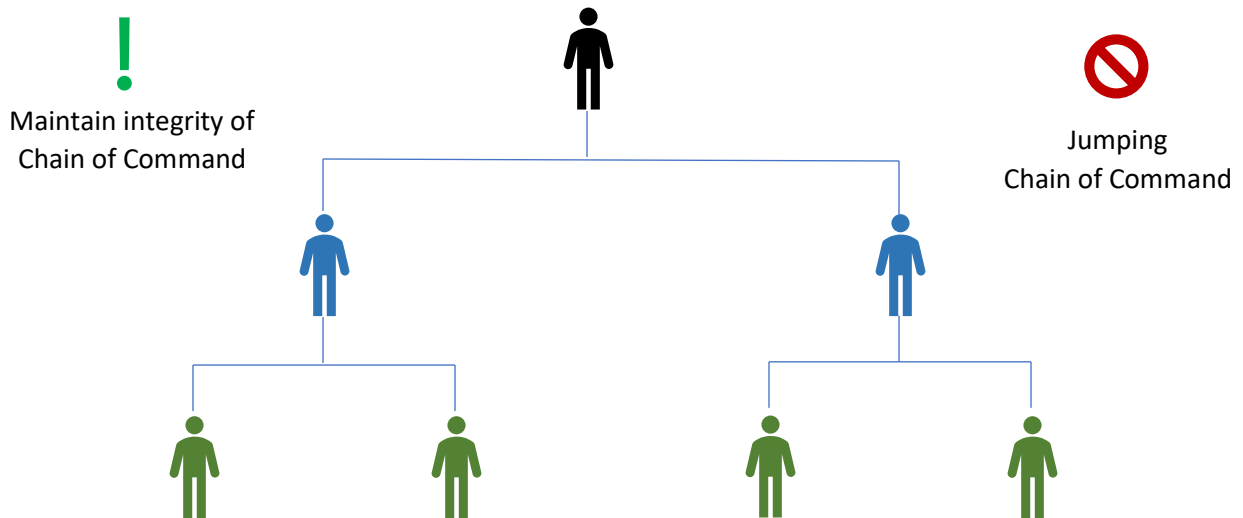
The Military Institution²

Rank and Chain of Command

Officer	Warrant Officer	Enlisted
<ul style="list-style-type: none"> • Commissioned by President and confirmed by Senate • Command units as the ultimate authority and responsible party for the unit. • Plan, direct, coordinate, and control troops 	<ul style="list-style-type: none"> • Considered commissioned officers • Considered technical experts in a specific area • Do NOT hold any command authority of responsibility for personnel 	<ul style="list-style-type: none"> • Considered the “workforce” of the services • Includes noncommissioned officers (NCOs) • NCOs are in charge or control of their units • NCOs bear responsibility for the health and well-being of their people

Chains of command are clear and based purely on rank (regardless of age) with members moving “up” the chain of command and taking more responsibility with each promotion. It is not uncommon for a 25-year-old 2nd Lt to be placed in command over 50 or more members and thousands if not millions of dollars’ worth of assets. They are responsible for the lives and safety of those under them.

Units are clearly structured and organized based on accepted doctrine. Military members are immediately trained to operate within the chain of command. Each individual report to one person who is responsible for addressing all their needs and concerns.



² From “Understanding the Military: The Institution, the Culture, and the People” published by SAMHSA.gov.

The Core values:^{3,4}

- Define how the military member lives their life, approaches tasks, and succeeds at every mission.
- Guides decision making.
- Is ingrained into each member from the beginning of service.
- Includes the mantra “leave no one behind.”

The Military Family

- Often asked to make sacrifices beyond that of civilian families
- Accustomed to moving every 2-4 years
- Endure extended absences ranging from weeks to years
- Little stability for military children leading to increased stress, anxiety and depression
- Have difficulties with reunion and reintegration, having high expectations, facing disappointing realities, and hesitating to re-connect.

The Military Member

- Often embodies the stress from intense working conditions and the “hurry up and wait” reality of war – hurry to plan, wait to execute or change. Feeling is one foot on gas and one foot on brake.
- Frequently operate on little to no sleep and in harsh, uncomfortable, and uncertain conditions.
- Constant awareness in operations leads to a state of fixated hyper-vigilance.
- May be accustomed to making split-second decisions and living with the consequences.
- Often face multiple losses without adequate time to process.
- May be unaware of the existence and consequences of moral injuries.
- Carry feelings of isolation and disconnection upon return from missions.
- Struggle with the uncertainty of family roles upon return – remember the chain of command and structure?

Core Values
Department of Defense Duty, integrity, ethics, honor, courage, and loyalty.
Air Force Integrity first, service before self, and excellence in all we do.
Army loyalty, duty, respect, selfless service, honor, integrity, and personal courage.
Coast Guard Honor, respect, and devotion to duty.
Marine Corps/Navy Honor, courage, and commitment.
Space Force Character above all, connection toward unity, commitment to mastery, courage to be bold.

³ Military Leadership Diversity Commission Issue Paper #6, Definition of Diversity. (<https://mldc.whs.mil/>)

⁴ Guardian Spirit Space Force Handbook 1-1

Issues impacting MCS

- Post-traumatic Stress Disorder
- Traumatic Brain Injury
- Depression
- Chronic Pain
- Substance Use Disorder
- Anxiety
- Sleep Disturbances
- Military Sexual Assault
- Interpersonal Violence

Barriers to care:

1. Worries/concerns about what others think
2. Financial, personal, and physical obstacles
3. Confidence in the mental health care system
4. Navigating services
5. Privacy, security, and abuse of services

The Military Institution

- It's a total institution – an isolated, enclosed social system whose primary purpose is to control most aspects of its participants' lives
 - It's a coercive institution – an organization that has the power to impose its will upon others
-

Because of the all-encompassing nature of the military institution and culture, MCS may face unique social adjustment issues such as a loss of purpose (no mission), loss of “brother-/sister-hood,” and loss of structure and direction.



Impact of Traumatic Brain Injuries and Post Traumatic Stress Disorders on Academic Performance⁵

What is a Traumatic Brain Injury (TBI)?

A blow or jolt to the head or a penetrating head injury that disrupts the functioning of the brain. The severity of a TBI can range from mild to severe and includes a wide range of symptoms. It can result in short- or long-term problems. Most recover rapidly and can return to independent functioning within 3-6 months.

What is Post Traumatic Stress Disorder (PTSD)?

A psychological health injury that can develop in response to exposure to an extreme event. The event can be directly experienced or witnessed in another person, and involves actual or threatened death, serious injury, or threat to one's physical integrity. Symptoms may emerge within a few months or even years later. Some may experience full recovery with treatment while others may have symptoms that persist for years.

How do TBI and PTSD impact academic performance?

TBI and PTSD conditions express themselves individually because the brain consists of many localized functions and no two traumatic events are the same. Subsequently our responses to these traumas are not the same. Depression, suicidal ideations, academic stressors, health concerns, and interpersonal issues may worsen symptoms.

Many veterans are facing multiple life-adjustments in addition to adapting to their TBI and PTSD. These adjustments include: academic life, social life, occupational life, and at times relocation. Some veterans may require adjustments or accommodations to succeed in the academic environment. Determinations are made on a case by case basis.

Of note:

- Many veterans are new to their disabilities and may be unaware of their rights as students with disabilities or how to obtain academic accommodations.
- Some veterans are just developing an understanding of how their injury impacts learning.
- It takes time to process accepting a disability status for those with military backgrounds.
- As non-traditional students (often older, married, at times with children), the disability may impact their personality, family, and ability to cope with their day-to-day.
- Many veterans have a hard time understanding the fine distinction between military and VA disability designations in addition to the nuances of ADA and Section 504.
- True diagnosis of PTSD and TBI may occur after separation from military service which means they may not be aware they may experience issues with cognitive performance.

⁵ Accommodating Student Veterans with Traumatic Brain Injury and Post-traumatic Stress Disorder: Tips for Campus Faculty and Staff

List of Common Cognitive Difficulties after TBI/PTSD

Cognitive Function ⁶	Examples of Impact to Academic Performance
Attention and concentration	<ul style="list-style-type: none"> • Restlessness and easily distracted in classroom • Attention bias toward threatening stimuli and difficulty disengaging from such stimuli • Difficulty maintaining goal-relevant information • Problems carrying on long conversations or sitting still for long periods of time such as with lectures or open discussions
Processing and understanding information	<ul style="list-style-type: none"> • Taking more time to understand and follow directions such as with an assignment • Taking longer to read and understand written information such as in a syllabus
Language and communication	<ul style="list-style-type: none"> • Difficulty thinking of the right word. • Difficulty in remembering long conversations therefore “filling the gaps” at times. • Rambling or getting off topic – may happen when answering a question or with discussions • Difficulty expressing thoughts in an organized manner as in with oratory or written assignments • Trouble with non-verbal communication • Having trouble reading other’s emotions and responding appropriately
Learning and remembering	<ul style="list-style-type: none"> • Difficulty remembering new information • Difficulty with short term memory – may not recall what was discussed in class last week.
Reasoning, planning, problem-solving and judgement	<ul style="list-style-type: none"> • Difficulty planning day and scheduling appointments – issues with meeting assignment deadlines • Trouble with tasks that require multiple steps such as with long term projects

⁶ Cognitive Problems after Traumatic Brain Injury from University of Washington (uwmskts.washington.edu) and Emotion and cognition interactions in PTSD: a review of neurocognitive and neuroimaging studies from National Institutes of Health

	<ul style="list-style-type: none"> • Difficulty recognizing when there is a problem which may be seen as a lack of initiative • Trouble analyzing information or divergent thinking (being flexible) • Difficulty making decisions or get stuck on one solution without considering others • May make impulsive decisions
<p>Inappropriate, embarrassing or impulsive behavior</p>	<ul style="list-style-type: none"> • May deny cognitive problems even if obvious to others • May say hurtful or insensitive things or act out of place • May lack awareness of social boundaries and others' feelings such as being too personal or not realizing when someone else is uncomfortable

The Military Friendly Classroom Environment

Tips for Making Your Syllabus and Course Veteran Friendly⁷

- ☑ Consider including a statement inviting students with disabilities or any academic performance concerns to meet with you to review course requirements and discuss possible academic adjustments. It is important to consider the additional stigma around the word “disability” among veteran and military students. Statements may look like:

Students with disabilities are encouraged to contact me to privately discuss any accommodation needs. Wayland Baptist University ensures equal access to instruction through collaboration between students with disabilities, instructors, and Disability Services for Students (DSS). “Reasonable” means the University permits no fundamental alterations of academic standards or retroactive modifications. Should you have a disability, including unseen disabilities such as learning disabilities, psychological health injuries (such as PTSD), or cognitive disabilities (such as brain injuries), that requires reasonable accommodations, please contact the Office of Disability Services. For more information, please consult <https://www.wbu.edu/student-life/student-services/disability-services.htm>.

** Military veterans and service members with suspected or confirmed psychological health injuries are encouraged to contact the Veteran Student Counselor for possible College Access Services. **

- ☑ Check syllabi for flexibility related to homework assignment deadlines, timed exams, and general content accessibility.
- ☑ Provide the syllabus with specific dates for assignments and tests as soon as possible to allow for planning around work, childcare and course work.
- ☑ Consider providing online class notes, using assessment criteria other than timed exams, and remaining flexible in terms of classroom participation.
- ☑ Permit in-class use of laptop computers for note taking.
- ☑ Provide handouts in an electronic format as well as printed for those that use technology services.
- ☑ Ensure required texts are available/accessible in electronic format.
- ☑ Ensure all audio clips, videos, and movies are captioned or include transcripts.

⁷ Adapted from “Tips for Making your Syllabus Veteran Friendly” VA College Toolkit Handout and Accommodating Student Veterans with Traumatic Brain Injury and Post-traumatic Stress Disorder: Tips for Campus Faculty and Staff

- Permit the in-class use of tape recorders or other audio recording devices as memory aids.
- Allow use of index cards with faculty-approved notes or build memory joggers into the exams
- Allow the ability to take short breaks (5-10 mins) during class sessions or testing environments
- Permit flexibility in class session attendance schedules, as long as there is no conflict with core course requirements.
- Provide clear and concise directions on your syllabi and course requirements.
- Consider offering the ability to complete “extra credit” assignments to offer additional practice in learning new information

Tips for The Classroom

Some things to expect⁸:

- **SEATING:** Some veterans are more comfortable sitting with their back against a wall or in a corner. They may also want to sit away from windows. This comes from a need to “remain vigilant.” It is helpful when such seating is made available.
- **TERMINOLOGY:** It is helpful to learn the veteran’s terminology if they often use military terms as they may still need time to adjust to the “civilian” language. Moreover, do not be surprised if they refer to you as “Sir” or “Ma’am.”
- **RIVALRY:** Know the branches of service. For example, A veteran can easily get “irked” if referred to as a “soldier” when they are really a marine. Pride in one’s branch is a part of the military culture so it is important to know the distinctions.
- **DISCLOSURES:** Veterans are individuals, not labels. Some may not want to identify – or at times would rather forget – their military service. Allow the veteran to share or disclose their status on their own terms
- **TABOO SUBJECTS:** Allow veterans to share their experiences to enrich the learning environment, if related to course discussions, but discourage the expression of in-class sentiments related to war, political conflicts, or military personnel that could alienate them or put them in a position where they feel they have to defend their military service or actions.
- **COMMUNICATION STYLES:** Brevity and efficiency in communication is emphasized in the military and on duty. The veteran may communicate in this way in any environment where they are expected to “perform” such as in a classroom. The veteran may need help with critical thinking tasks and communication that is academic and thus may appear more daunting.
- **ABSENCES:** Veterans still need to meet attendance requirements. However, there may be periodic absences due to Veteran Administration appointments or duty. Veterans may have missed important discussion points and may benefit from a brief summary of what they missed in the classroom.
- **IT’S NOT PERSONAL:** Veterans who suffer from severe anxiety may suddenly depart a classroom in order to regain composure if their current coping skills are insufficient for the moment.

⁸ Taken from “From the military to college and beyond: Growing a culturally sensitive program to support veteran success” by Stefanie Ulrich and Benjamin Freer.

Making a Referral to the Veteran Counselor for Mental Health and Performance

Tips on Making a Referral to Veteran Counseling Services⁹

The Veteran Counselor – Mental Health and Performance

Tania D. Perez-Orozco is a retired military veteran with extensive experience in personal and professional performance enhancement. Her sole mission at Wayland Baptist University is to ensure the academic success of military and veteran students through optimizing mental health and human psychological performance. Tania has experience, knowledge and a deep understanding of the complexities of military life and the unique culture of military service. As a military veteran she understands the importance of confidentiality and trust. Tania is available to work with military and veteran students on a variety of topics and issues which include but are not limited to:

Performance Enhancement	Preventative Services	Recovery Management
Brain-hacking – capitalize on the latest research in neuroplasticity to learn and perform more efficiently	Mindfulness and Medication practices to reduce stress	Manage Anxiety and Depression
SMART Goals and academic planning – one on one assistance in planning your semester and course work to optimize success	Identify and capitalize on strengths, devise a plan to navigate weaknesses	Substance use disorder recovery management and counseling
Optimizing sleep and rest schedules	Build resiliency skills and core life skills	Family and couples counseling
Enhancing soft skills like creativity, communication, emotional intelligence, critical thinking, adaptability, collaboration, etc.	Learn anger management techniques	Trauma, PTSD, moral injury, MST counseling services
Be a better partner and/or be a better parent	Build habits designed to streamline natural success	Grief counseling
Who am I? – Define and refine your identity an become an expert on yourself	Discover how to live with new found purpose	Life phase counseling (transitions such as occupational, marital, parental, environmental, spiritual, etc)
	Interpersonal communication skills	

To schedule an appointment: <https://booknow.appointment-plus.com/1n49xg8e/>

Email: perez-orozcot@wbu.edu

Phone: 210-879-6909

⁹ Adapted from the “Tips on Making a Referral to Counseling” VA College Toolkit Handout

Services Provided

Personal Counseling	One-on-one counseling sessions designed to assist students with a wide range of situations to include assistance in obtaining specialized services when an issue is outside of the counselor's expertise.
Community Referrals	Referrals to appropriate agencies for students in need of evaluation or care beyond the scope of services provided by the Veteran Counselor.
Consultation	Assistance to faculty and staff on dealing with challenging students and difficult circumstances.
Group Counseling	Support groups for a variety of issues pertinent to the veteran population.
Life Skills Coaching	Coaching and mentorship to optimize performance and obtain life goals.

What students should expect

- Complete intake paperwork before the first appointment similar to paperwork required at a first-time doctor's visit. This paperwork collects basic information about the veteran which is helpful during sessions and streamlines the first appointment. It also includes information on confidentiality and privacy.
- The first appointment is called an "intake" and is designed to make an initial assessment of the veteran's concerns and to discuss available services and options. The veteran and the counselor make an informed decision together on the next steps to take.

Addressing concerns about seeking counseling

- Only crazy people with serious problems go to counseling
 - People go to counseling for many different reasons. Sometimes it's helpful to run scenarios by an unbiased person whose job it is to actively listen and help you determine what's best for you.
- Going for counseling is a sign of weakness. I can handle my own problems.
 - It did seem that way in the military. Preventative counseling is more about honing in your strengths than it is about showing weaknesses. It is similar to going to the gym to increase strength. You're working on your mental fortitude and making yourself more resilient to stress.
- Counseling won't work for me. I've tried it before and it didn't work.
 - It's true that there are no guarantees. However, finding the right fit with a counselor is like finding the right pair of shoes. Not every shoe fits every foot and there are a wide range of counselors available. Give this one a try.
- The counselor will tell other people.
 - It takes a considerable amount of time and money to obtain a counseling license and your counselor wants to keep their license. What you share with a counselor is considered confidential. Information is not released to anyone without your permission and does not appear on your academic, administrative, disciplinary, or medical records. Release of information disclosed within a session may not be revealed to anyone without written permission, except where disclosure is required by law and you will receive thorough information on these instances.

Guidelines for Intervention ¹⁰

Whenever possible, speak directly and honestly to the student when you sense academic and/or personal distress. Be consistent in your show of support and be patient with the student.

1. **PRIVACY:** Request to see the student in private. This may help minimize embarrassment and defensiveness.
2. **OBJECTIVITY:** Briefly acknowledge your observations and perceptions of their situation. Express your concerns directly and honestly and be nonjudgmental. Use “I” statements such as “I noticed...” and let them tell their own story.
3. **UNDERSTANDING:** Listen carefully and try to see the issues from the student’s point of view— without agreeing or disagreeing. Be patient and paraphrase on occasion to ensure you understand their perspective. Don’t jump to conclusions. Give little open-ended prompts but do not ask “why.” Respect their boundaries if they are unwilling to disclose information and remind them that they can talk to the Veteran Counselor free of charge at any time.
4. **EXPLORATION:** Be open and curious and don’t be an expert over the veteran’s experience. Attempt to identify the problem and help by exploring alternatives to deal with the problem.
5. **OBSERVATION:** Inappropriate and strange behavior should not be ignored. Comment on what you have observed, but not in a judgmental way. Additionally, manage your own feelings as they come up during the conversation. Do not judge yourself. Just acknowledge them and re-focus on the veteran.
6. **FLEXIBILITY:** Flexibility with strict procedures may allow an alienated student to respond more effectively to your concerns.
7. **LIMITATION:** Involve yourself only as far as you want to go. You may become more involved than time or skill permits when attempting to reach or help a troubled student.
8. **TRANSPARENCY:** Do not agree to confidentiality as that is something you are unable to ensure. Do acknowledge the veteran and their willingness to share. Show appreciation for sharing their experience with you and allowing you to work with them.

Extending oneself to others always involves some risk-taking, but it can be gratifying when kept within realistic limits.

¹⁰ Taken from *Assisting the Emotionally Distressed Student Employee Guide* dtd 2016 and “How to support veterans with loving conversations: the do’s and don’ts of talking with veterans about military experiences” in *PsychologyToday.com*.

Example conversation opener:

Faculty: “Thank you so much for meeting with me. I’ve noticed you’ve been behind schedule on a couple of assignments lately, and I’m wondering how you’re doing.”

Veteran: “I know. I know. I’m sorry. I’m trying to do better. I just haven’t been able to sleep lately and work has gotten busy and I am kind of a mess right now but I’ll get squared away soon.”

Faculty: “Oh, you’re not sleeping well and things have picked up at your job. Sounds like things have gotten very busy lately. Sleep is definitely important. What can I do to best support you?”

Veteran: “Oh I’m good. I just need to get some sleep.”

Faculty: “Well if you’re open to it, I have some ideas that might help...”

*negotiate flexibility on assignments or suggest they meet with the Veteran Counselor who can help with sleep, time management, stress management, and countless other strategies. *

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Appendix

Common Terms and Lingo

(COPIED FROM: https://www.va.gov/vetsinworkplace/docs/em_termsLingo.asp)

Members of the military are referred to differently depending upon their specific Service.

Soldiers: Members of the Army

Sailors: Members of the Navy

Airmen: Members of the Air Force

Coast Guardsmen: Members of the Coast Guard

Marines: Members of the Marine Corps

Guardsmen: Members of the National Guard

Reservists: Members of the Reserve

Official acronyms

AWOL– Absent With Out Leave: not at one's place of duty and not authorized to be absent

CDR – Commander

CO – Commanding Officer

CONUS – Continental United States

COB – Close Of Business: the end of the day or duty shift

CoS – Chief of Staff

DD or DoD – Department of Defense

IAW – In accordance with

ICO – In case of, in care of

IED – Improvised Explosive Device

IRT – In reference to

GWOT – Global War On Terror

NCO – Non-Commissioned Officer: an enlisted person with command responsibility over soldiers of lesser rank

NCOIC – Non-Commissioned Officer In Charge

OEF – Operation Enduring Freedom: official name used for the War in Afghanistan

OIF – Operation Iraqi Freedom: official name used for the War in Iraq

OND – Operation New Dawn: new name for the War in Iraq starting in September 2010 to reflect reduced role of US troops

MOS – Military Occupational Specialty: job or career specialty (e.g., infantryman, intelligence analyst, operating room specialist, military police, etc.)

OCONUS – Outside the Continental United States

POC – Point Of Contact: the person to liaise with on a given matter

ROTC – Reserve Officer Training Corps (often pronounced "ROT-SEE")

R/S – Respectfully Submitted: used as an end greeting in written communication or email

SOP – Standard Operating Procedure: the routine manner of handling a set situation

TDY – Temporary Duty Yonder

V/R – Very Respectfully: used as an end greeting in written communication or email

Phrases

Battle assembly – new term used for Army Reserve weekend drills, unit training assemblies, or multiple unit training assemblies

Boots on the ground – to physically be in a location (some may use this to say that they want "boots on the ground" for a particular project, which means they want everyone physically in the office, rather than having people call in.)

Drill – preparation of military personnel for performance of their duties through the practice and rehearsal of prescribed movements; members of the National Guard and Reserve are required to attend one weekend drill a month (sometimes starting Friday night until Monday morning)

Extended drill – extended time for drill in preparation for a deployment

Liberty – authorized free time ashore or off station, not counted as leave, also known as a "pass"

Ma'am – proper method of addressing female officers in particular and women in general

Sir – proper method of addressing male officers in particular and men in general

Tour of duty – time period during which a particular job or assignment is done (e.g., my tour of duty is 8am-5pm)

Slang

Above my/your pay grade – expression denying responsibility or authority (indicating that the issue should be brought to higher-ranking officials)

Civvies – civilian clothing

Down Range – physically in a combat zone

In-Country – physically in a war zone

Quarters – (a) military family housing, or (b) doctor's direction to stay home from work (e.g., I'm confined to quarters.)

Say again (your last) – request to repeat a statement, question, or order, especially over a radio

Stay in your lane – stay within your boundaries; do your job as commanded and trust that you will know what you need to know when you need to know it

Wilco – Will comply

Common Readjustment Challenges

(COPIED FROM: https://www.va.gov/VETSINWORKPLACE/docs/em_challengesReadjust.asp)

Common Challenges During Re-adjustment to Civilian Life

- Relating to people who do not know or understand what military personnel have experienced (and many civilians don't know that they don't know!).
- Reconnecting with family and re-establishing a role in the family.
 - Families may have created new routines during absences and both the family and the Veteran will have to adjust to changes.
- Joining or creating a community.
 - When moving to a new base or post, the military helps military personnel and families adjust. This structure is often not automatically in place when someone separates from the military. The Veteran and his or her family may have to find new ways to join or create a social community.
- Preparing to enter the work force.
 - A Veteran may have never looked for, applied for, or interviewed for a civilian job, especially if he or she had a career in the military. These are new skills he or she will have to learn and master.
 - In applying for a job, a Veteran will have to determine how to translate his or her military skills and duties into civilian terms and create a resume.
 - A Veteran may have never created a resume. Instead of a resume the military uses a Field Service Record to detail qualifications, training, and experience.
- Returning to a job.
 - If deployed with the National Guard or Reserve, a Service Member will have to adjust to resuming their previous job or another similar job at the same company. For some recently returning Service Members, they may find themselves behind a desk in as little as 3 days after leaving a combat zone.
 - Returning to the job may include a period of catching up, learning new skills, or adjusting to a new position. It will also include adjusting to social changes that may have occurred in the workplace.
 - During the transition back to work, some Veterans also experience worry and fear about possible job loss.
- Creating structure.
 - The military provides structure and has a clear chain of command. This does not naturally exist outside the military. A Veteran will have to create his or her own structure or adjust to living in an environment with more ambiguity.
- Adjusting to providing basic necessities (e.g., food, clothing, housing).
 - In the military, these things are not only provided, but there is often little choice (e.g., you eat at determined times in a certain place, duty station determines your dress).
 - Given the lack of choices while in the military, the vast array of choices in the civilian world can sometimes be overwhelming.
- Adjusting to a different pace of life and work.
 - In the military, personnel do not leave until the mission is complete. In a private sector business, an employee might be expected to stop and go home at 5pm,

whether the "mission" is complete or not. This may not be apparent to all Veterans.

- Civilian workplaces may be competitive environments, as opposed to the collaborative camaraderie of the military.
- Given the direct nature of communication in military settings, there may be subtle nuances in conversations and workplace lingo that are unfamiliar to Veterans.
- Establishing services.
 - A Veteran may have to learn how to get a doctor, dentist, life insurance, etc. These services were previously provided by the military.
 - A Veteran may also need to navigate the paperwork and process of obtaining benefits and services from the Department of Veteran Affairs.

Additional Training, Information, Resources

National Center for PTSD – <https://www.ptsd.va.gov>

Veterans Education Success – <https://vetsedsuccess.org>

Make the Connection – <https://www.maketheconnection.net>

Uniformed Services University Center for Deployment Psychology – <https://deploymentpsych.org>

TBI Center of Excellence – <https://health.mil/Military-Health-Topics/Centers-of-Excellence/Traumatic-Brain-Injury-Center-of-Excellence>

VA College Toolkit – Information for Faculty and Staff -
<https://www.mentalhealth.va.gov/student-veteran/info-for-faculty-staff.asp>

RESOURCE	PHONE NUMBER	WEBSITE
Bereavement Counseling	1-202-461-6530	
Children of Women Vietnam Veterans (CWVV)	1-877-345-8179 (or) 1-888-820-1756	
Civilian Health and Medical Program (CHAMPVA)	1-800-733-8387	
Debt Management Center (Collection of Non-Medical Debts)	1-800-827-0648	
Department of Veterans Affairs' (VA) National Call Center for Homeless Veterans hotline	1-877-424-3838	
eBenefits (General Questions & Technical Issues)	1-800-983-0937	
Education (GI Bill):	1-888-442-4551	
Federal Recovery Coordination Program	1-877-732-4456	
Foreign Medical Program	1-888-820-1756	
Gulf War Veterans Helpline	1-800-749-8387	
Homeless veterans	1-877-222-8387	
Income Verification and Means Testing	1-800-929-8387	
Life Insurance	1-800-669-8477	
Meds by Mail	1-888-385-0235 (or) 1-866-229-7389	
National Call Center for Homeless Veterans	1-877-424-3838	
National Cemetery Scheduling Office	1-800-535-1117	
National Personnel Records Center	1-314-801-0800	
National Resource Directory		https://www.nrd.gov/
Pension Management Center	1-877-294-6380	

Presidential Memorial Certificate Program	1-202-565-4964
Service-Disabled Veteran-Owned or Veteran-Owned Small Business	1-202-303-3260
Special Health Issues	1-800-749-8387
Spina Bifida/Children of Women Vietnam Veterans	1-888-820-1756
Status of Headstones and Markers	1-800-697-6947
Telecommunications Device for the Deaf (TDD)	1-800-829-4833
VA Caregiver Support Line	1-855-260-3274
VA for Vets	1-855-824-8387
VA Inspector General	1-800-488-8244
VA Office of Public and Intergovernmental Affairs	1-202-461-7600
Veteran's ID Theft Hot Line	1-800-333-4636
Veterans' Employment and Training Service (VETS)	1-866-487-2365
Women Veterans	1-202-461-1070
Wounded Warrior Resource Center	1-800-342-9647