

When Jane and Johnny Come Marching Home: How Local Communities Can Help Veterans and Military Families

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Introduction

In recent years there has been a massive outpouring of public and private support for our nation's veterans. This support has manifested itself in a dizzying array of programs, services and organizations, large and small, public and private, staffed by professionals and volunteers alike, all attempting to address a range of issues that have arisen over a decade of war.

Yet, however well-intentioned these programs and individuals are, history reminds us that many of these new organizations and services will be limited in scope and part-time endeavors. Today's fiscal environment will further challenge these programs, which often operate on budgets beholden to dwindling government and charitable endowments. While programs, volunteers and funding come and go, at the end of the day it will be local governments, including city, county, regional and state entities, that will have the most at stake in ensuring the success of post-9/11 veterans and their families. With thousands of veterans set to return home from Iraq and Afghanistan, coupled with planned reductions in overall end strength of the armed forces, it is absolutely critical that local governments understand the military family and veterans issues in their communities and prepare to play an active role in addressing them.

This article will examine one central question — how can local governments determine their role in supporting veterans and their families? To answer this question we must first define today's post-9/11 military family and veteran population, examine the key issues involved and then explore the strategies and tactics that several local governments have successfully used in their communities. Finally, the paper will review the broader strategies employed in these case studies and consider how they can be applied by other communities. While this article will primarily focus on the issues facing local governments whose communities host military installations, veterans issues are a challenge that local governments across the country face, and many of the lessons reflected in these case studies are universal.

Who are the post-9/11 veterans?

The first step in defining a local government's role is to identify and understand the target population it is attempting to serve. There are more than 2.4 million post-9/11 veterans living in the United States today, many of whom are still serving as part of the approximately 1,417,000-member active duty force or 857,000-member reserve component (Select Ready Reserve & National Guard).¹

Despite accounting for less than 1 percent of the U.S. population, post-9/11 veterans span a wide range of demographic characteristics, nearly

¹ Department of Veterans Affairs and the Department of Defense

impossible to accurately encompass in a single account. However, for the new generation of post-9/11 veterans, there are several key indicators that will provide us a more comprehensive picture of today's military demographics. While post-9/11 veterans reflect the overall U.S. population, there are some statistically important differences that help define this new generation of veterans and their families. For the most part, the nation's most recent generation of veterans:

Represent a very small minority in today's society.

Only 0.5 percent of Americans have served on active duty during the past decade. This number contrasts sharply with previous wartime service statistics — 9 percent of Americans served during World War II and roughly 5 percent during the Vietnam War. The current number reflects the overall smaller size of the U.S. military compared with previous generations, and the switch from a draft system, which ended in 1973, to an all-volunteer force.²

Are slightly more diverse than the general U.S. public. Of the 2,509,344 service members serving on active duty or in the select reserve in 2010, 65.4 percent identified themselves as white; 14.6 percent African-American; 4.2 percent other; 3.1 percent Asian; 1.8 percent Native American, Alaskan, Hawaiian or other Pacific Islander; and 1.4 percent multi-racial. Additionally, 9.4 percent further identified themselves as having Hispanic ethnicity.³

These statistics are comparable to U.S. total population figures, which in 2010 were reported as 72 percent white; 13 percent African-American; 19.1 percent other (with the vast majority reporting Hispanic or Latino ethnicity); 5 percent Asian; 1.1 percent Native American, Alaskan, Hawaiian or other Pacific Islander; and 3 percent multi-racial.⁴

Are more likely to be married and have children than their civilian counterparts. Over 55 percent of all active and reserve component members are married, compared with a rate of fewer than 51 percent for all U.S. civilian adults. According to this study, military families are also more likely to have children.⁵

Come from middle and upper-middle income families. More than 70 percent of all enlisted personnel come from households earning more than \$42,000 annually.⁶

Are more highly educated than the general public. In 2010, 95.6 percent of post-9/11 veterans, aged 18-24, were high school graduates, compared with a 2009 U.S. general population high school graduation rate of 89.8 percent for 18- to -24-year-olds.⁷

Are overwhelmingly male. Females comprise only 15.7 percent of the active duty and select reserve force with men accounting for the remaining 84.3 percent. While the female/male ratio may seem severely skewed, female recruitment has been growing rapidly over the past decade and is anticipated to increase at an accelerated rate for the foreseeable future.⁸

Issues Facing Today's Veterans that Local Governments Need to Understand

Post-9/11 veterans face a range of challenges, from housing and education to potential physical and mental health issues. This is compounded by the fact that today's veterans are returning home to a weak and challenging labor market.

² Pew Research Center, October 2011

³ DoD report Demographics 2010; Profile of the Military Community
⁴ U.S. Census Bureau, 2012

⁵ DoD report Demographics 2010; Profile of the Military Community
⁶ Center for Data Analysis: Who Serves in the U.S. Military? Demographic Characteristics of Enlisted Troops and Officers, 2008
⁷ U.S. Department of Education, Trends in High School Dropout and Completion Rates in the U.S., 1972-2009
⁸ DoD report Demographics 2010; Profile of the Military Community

“Everything pivots on employment — health, housing, education, and the transition to civilian life,” said Andrea Inserra, senior vice president at Booz Allen Hamilton and leader of the firm’s efforts to enhance the well-being and psychological health for service members, veterans and military families.

“Issues such as health care, education and housing are shown to be significantly mitigated if a veteran is able to find gainful employment.”

While all of these issues may not apply to each community, understanding the range and prioritization of obstacles facing veterans and military families is an important first step before officials launch new programs to benefit these populations.

Unemployment is the greatest challenge facing post-9/11 veterans. A number of alarming reports have been documenting the growing rate of veteran unemployment. The unemployment rate for Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) veterans reached 15.2 percent in January of 2011, and was an abysmal 30.2 percent for 18- to -24-year-olds.⁹ Those numbers have been improving over the past year, but the rate of post-9/11 veteran unemployment is still higher than the U.S. average, and with a substantial drawdown in military end strength scheduled to take place over the next five years, the number of veterans looking for work will begin to increase dramatically.

A survey conducted by Iraq and Afghanistan Veterans of America in 2012 suggests that while the economic downturn has certainly been a key factor, other veteran-specific obstacles are contributing to the high rate of unemployment of post-9/11 veterans. The survey noted that OEF and OIF veterans had difficulty relating their experiences to employers unfamiliar with military culture and terminology, and felt they had trouble competing with non-military candidates in their age group who had been in the civilian workforce longer. Lack of civilian education and training

was also mentioned as a barrier to employment.

From the perspective of local governments faced with a surge of returning service members, helping veterans find jobs will continue to take center stage in community discussions.

For the minority of post-9/11 veterans that have returned home with severe challenges posed by service-connected physical and mental health traumas, understanding how to find and obtain care is the number one obstacle to their recovery. According to a Department of Veterans Affairs (VA) survey, only 41.2 percent of post-9/11 veterans reported having at least “some” knowledge of the VA health care system. As questions became more specific, the percentages declined significantly, particularly when respondents were asked if they knew how to apply for VA health and disability benefits.¹⁰ As of March 2012, only a third of those eligible to receive VA health and disability benefits utilized those services.¹¹ At the local government level, these numbers tell a story of wounded warriors unable to find and obtain the correct medical care and mental health treatment in their communities.

The housing needs of post-9/11 veterans and their families is a growing challenge. Like many in America, veterans and their families face a range of issues, including foreclosure, burdensome housing costs, underwater mortgages and homelessness. While the challenges will be different depending on a variety of local factors, we know there are significant obstacles to veterans in finding suitable housing, and that veterans under the age of 30 are four times as likely to be homeless than their civilian counterparts, with young women and minority veterans at

¹⁰ 2010 National Survey of Veterans: Understanding and Knowledge of VA Benefits and Services

¹¹ Analysis of VA Health Care Utilization among Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND) Veterans, Office of Public Health, Veterans Health Administration, Department of Veterans Affairs, March 2012

⁹ Bureau of Labor and Statistics

an even greater risk.¹² With the drawdown of forces from Iraq and Afghanistan and a planned reduction of 120,000 service members, the housing needs of post-9/11 veterans are certain to increase, and local governments can expect to see this reflected in their communities.

Many veterans are struggling to successfully complete post-secondary education. Access to higher education is perhaps the greatest benefit post-9/11 veterans receive for their service. Covering the cost of tuition, books and fees, and providing a separate and substantial monthly living allowance, the new VA Post-9/11 GI Bill is the most comprehensive education benefit in the history of the GI Bill program. Despite this substantial assistance, though, alarming reports about the dropout rates of these veterans have begun to surface. Arizona Veterans' Education Foundation reported that some public universities and community colleges were graduating only 3 percent of new veteran students.¹³

While the VA has not previously tracked veteran post-secondary graduation rates, the growing number of such dismal reports prompted President Obama in April 2012 to order the VA, Department of Education and DoD to start tracking college completion rates for veterans. For local governments, the ability of veterans to successfully obtain their GI Bill education benefits and complete post-secondary education in their communities' institutions of higher learning is of crucial concern.

How Local Governments Engage Post-9/11 Veterans

There is a broad spectrum of roles local governments can consider taking on after deciding to tackle veterans issues in their communities. The level of participation depends on a number of factors, including proximity to a military installation, size of the com-

munity, availability of resources, level of state and nonprofit involvement, and community awareness of veterans issues. While many local governments have the desire to help, they often lack a clear understanding of the complex veterans services environment that already exists in their communities.

"There is a strong willingness to get involved, but there is also confusion due to the sheer number of veterans organizations and programs, which can create a hesitancy to act or commit resources," noted John Armbrust, military advisor to the governor of Kansas. Armbrust's observation regarding veterans is similar to assessments made by community leaders across the country.

Some local governments have successfully found ways to become involved, however, and are beginning to assemble strategies that can be adapted by other communities. Many have found that there are already strong veteran-oriented state and federal agencies, nonprofit organizations and military installations that are taking the lead in their communities, and that an effective way to get involved — if only on an indirect basis — is to support existing programs and services. By engaging in this type of partnership, local governments can keep abreast of the issues and the dynamic nature of veterans programs and services, and develop a more limited and support-based role.

Other local governments have discovered their communities lacked a strong veterans support organization and found it necessary to develop more direct roles. One such approach has been to develop new models of collaboration and the necessary infrastructure to provide services. In some cases, local government leaders have become champions of veterans issues and have used their offices to implement new services and partnerships. Another approach is for a local government to assess the various veterans service entities in their communities and provide the critical component of organization and

¹² Armed Forces Journal, Our Veterans Deserve Better: What Is the Responsibility Of Those Still In Uniform

¹³ After Service, Veterans Go on to College, USA Today, May 30, 2012

administration. The following case studies offer examples of how local governments have found an effective role to support the needs of military family and veterans in their communities.

Colorado Springs, Colorado: Developing New Models of Collaboration and Service-Providing Infrastructure

The Pikes Peak region is home to a cluster of military installations from multiple services. The region houses a major Army post (Fort Carson), three Air Force installations (Peterson Air Force Base, Schriever AFB and Cheyenne Mountain Air Force Station), and a service academy (U.S. Air Force Academy). By conservative estimates, more than one in four residents is a former or current member of the military, resulting in one of the highest concentrations of service members in the nation. More than 26,000 soldiers are stationed at Fort Carson alone — double the total from 2006. The presence of the military has created enormous economic benefits for the surrounding community, contributing about \$5.5 billion — or more than one-third of the regional economy.

Since 1967, the Pikes Peak Area Council of Governments (PPACG), a voluntary association of 16 municipal and county governments, has provided local governments a forum to discuss issues that cross political boundaries, identify shared opportunities and challenges, and develop collaborative strategies. In the fall of 2006, PPACG began working on the Fort Carson Regional Growth Plan with federal, state and local governments, businesses, community leaders, and service providers to assess the impacts of the installation's growth on the Pikes Peak region.¹⁴ The exercise has progressed from quantifying the impacts of military growth and recommending ways to mitigate them to

¹⁴ An overview and all documents related to the growth plan are available at <http://www.ppacg.org/mip/fort-carson-regional-growth-plan/growth-plan-documents>

implementing the growth plan's recommendations.

To address a broad range of challenges facing military personnel and veterans, the growth plan recommended the development of a centralized and comprehensive source of information and assistance related to behavioral health and social services. In May 2011, PPACG launched the Network of Care website to provide a range of web-based information and resources for military members, veterans and their families.¹⁵ The Network of Care provides interactive information and resources for consumers, local governments and community-based providers, including a searchable service directory, links to key websites, a comprehensive library, legislative information and community message boards.

Following this initial success, in August 2011 PPACG hired a consulting firm and assembled a steering team of military installation and VA representatives, community and business leaders, local governments and nonprofit service providers to define the key components of a military system of care. The effort to map out a system of care was aimed at implementing a coordinated, collaborative service-delivery system that addresses the broad range of interrelated needs of service members, veterans and their families.¹⁶ Key partners in the strategic planning process included local government agencies, companies, chambers of commerce, the office of the Secretary of Defense, nonprofits, state and federal veterans administration agencies and charitable foundations.

An assessment report completed in March 2012 highlighted the need for developing a centralized communication and collaboration process between the various stakeholders. It also emphasized the need for better outreach to veterans and their fami-

¹⁵ The Network of Care website can be found at <http://pikespeak.networkofcare.org>.

¹⁶ A system of care is a comprehensive spectrum of services and supports which are organized into a coordinated network to meet the multiple and changing needs of multisystem-involved individuals, their families and caregivers.

lies. The strategic plan outlined several steps that would address these needs, including establishing a local leadership infrastructure that could coordinate the various stakeholders and oversee the development of a website that would allow veterans and their families to set up a case management profile and easily navigate the available services.

To achieve these goals, PPACG set up the Peak Military Care Network (PMCN), a broad-based collaboration of military, VA, and community-based agencies serving the region's military and veterans community. PPACG has since partnered with the nonprofit National Homeland Defense Foundation to help manage the Peak Military Care Network. The governance structure includes an advisory board of military, VA, business and community representatives, as well as committees and working groups that actively engage service providers, service members, veterans and family members.

With limited staff supplemented by significant volunteer participation, PMCN continues to enhance and establish partnerships needed to develop a more integrated system of care for all military service members, veterans, their families and the communities of the Pikes Peak region.

The next milestone will be the launch of a pilot program scheduled to begin in early 2013. The pilot will involve about 15 community-based agencies — in addition to military and VA providers — that will provide a broad range of services to the military and veterans community in the Pikes Peak region, including health and behavioral health care, education, employment assistance, financial assistance, family and social services, and transition support.

These agencies have begun collecting and sharing information about available resources, participating in joint training and by helping to identify ways to streamline access to services across military, veterans and civilian agencies. For example, the agencies

may improve their outreach efforts to ensure the military and veteran community is aware of available resources, and establish better follow-up or care coordination to ensure those populations' critical needs are being met.¹⁷

As the pilot develops, the PMCN network will be expanded and enhanced — based on identified critical needs, resources and processes — to help provide seamless access to information and services. In short, the network will connect need to resource for the health and well-being of all service members, veterans and their families and the communities of the Pikes Peak region. It also is anticipated that the PMCN model can be customized and exported to support other communities throughout the state and nation.

San Antonio, Texas: Building on Existing Programs and Infrastructure

The city of San Antonio and the surrounding Bexar County are reverently referred to as "Military City USA." The region boasts three major installations, Fort Sam Houston, Randolph AFB and Lackland AFB, which together employ close to 80,000 service members and DoD civilians; an additional 154,071 veterans reside within the county. The estimated economic impact for San Antonio surpasses \$13 billion after counting the fiscal contribution from installations, personnel, veterans benefits and military service offices. With such a staggering figure, San Antonio is no stranger to veterans, and yet local officials face the same challenges as many local governments across the nation when searching for ways to successfully support veterans.

¹⁷ The goal of the pilot is to collect key data needed to track target populations, service needs and access, as well as potential gaps in services and resources; determine the processes (including training, information sharing, and navigation/care coordination) needed to ensure that service members, veterans and family members have access to and receive the broad range of quality services in the region; and determine ongoing process improvements to enhance collaboration and yield more integrated service delivery based on system-of-care principles.

Dr. Martha Spinks, director of the Bexar Area Agency on Aging (BAAA) for the Alamo Area Council of Government — a regional voluntary association of

local governments — recently developed an innovative approach to veterans and military family issues that is beginning to gain traction in the community. An Army veteran, Dr. Spinks observed that when individuals contacted BAAA's Aging and Disability Resource Center (ADRC), callers were asked a variety of questions to determine which services they were eligible for and to initiate appropriate case management. However, the one question left out, she said, was, "Have you served in the military or are you related to someone who has?"

When the call center began to include that simple question in 2011, agency officials soon realized they had been processing veterans and their surviving dependents through their system, unaware that many of the individuals they were assisting had earned access to a number of veteran-specific programs and services. By asking this one simple question, the ADRC was able to begin directing veterans toward services dedicated to their needs. Furthermore, this improved service required few extra resources, and allowed ADRC staff to guide veterans and their families toward a combination of available civilian and military resources.

Building on this initial success, Dr. Spinks began reaching out to the local veterans service community, discovering dozens of private and public organizations dedicated to helping veterans. During her outreach, she met fellow Army veteran Lt. Col. (ret.) Hector Villarreal, president and founder of the San Antonio Coalition for Veterans (SACV). Villarreal's organization had begun some years earlier as a grassroots movement attempting to organize the numerous veterans groups in the region to form a one-stop referral and case management network.

By the time Dr. Spinks had discovered the coalition,

it already had established itself as the go-to organization when veterans in San Antonio were unable to connect with services through traditional means. SACV, acting as a volunteer-based, ad-hoc, case management and referral-service provider, had organized nearly 1,000 partners — consisting of veterans service providers, individual volunteers and sponsors — into a loose network that pooled resources to address the specific needs of individual veterans and their unique situations.

In 2011, BAAA and SACV combined forces, signing a statement of understanding. This natural partnership has allowed the ADRC to provide its existing call center and website infrastructure to SACV, eliminating the time and expense that would have been required for SACV to duplicate those resources.

In return, SACV provided ADRC staff an established outreach network, a comprehensive local veterans resource database and training on the challenges faced by veterans attempting to access services. The partnership has produced substantial cost efficiencies for both organizations and is being studied as a model for other communities. The Texas ADRC Coalition has proposed expanding the ADRC/SACV model across the state. Spinks and Villarreal believe this model is scalable to the 14 ADRCs in Texas and to similar centers across the country.

To date, 54 state and U.S. territories have received ADRC grant funding since 2003.

Eugene, Oregon: Organizing Stakeholders

In 2011, leaders in Eugene, Ore., recognized the need to prepare for the wave of returning Iraq and Afghanistan veterans arriving across the country. In the face of a troubled economy, high unemployment, unaffordable housing and an overextended social system, city leaders hoped to minimize the threat that returning veterans would fall into a

downward spiral of circumstances culminating in substance abuse and homelessness.

More than 30,000 veterans reside in Lane County — of which Eugene is the county seat — and nearly 3,500 homeless veterans live in the Eugene metro area. In Lane County, the waiting list for eligible families to enter affordable housing provided by other community agencies is 18 months. Unemployment among veterans is about 3 percent higher than among the general population. Local governments do not have the fiscal resources to address these problems on their own.

In the fall of 2011, Eugene’s city manager brought together the general manager of the Eugene Water & Electric Board, the president of the Home Builders Association of Lane County and the executive director of the St. Vincent de Paul Society of Lane County to explore ways for the community to address the challenges veterans face in transitioning to civilian life. The idea was that supporting the transition of veterans and their families when they initially return to the area would prevent suffering, instability and compounded social costs down the road.

That initial discussion spawned the Veterans’ Housing Project (VHP), a way to provide up to two years of affordable housing to support veterans and their families as they attempt to reintegrate into the civilian world. Offering veterans short-term, stable housing can relieve some of the financial and social pressures of their transition and provide them time to put their lives back on a sound footing.

VHP is an independent program under the umbrella of St. Vincent de Paul, Eugene’s largest nonprofit human services organization. A volunteer steering committee governs and manages the program, and includes the founders of VHP and others. Subcommittees carry out the group’s day-to-day activities, including family selection, volunteer coordination,

housing acquisition and rehabilitation, and communications.

The initiative paid dividends for veterans in short order. On Veterans Day in 2011, a single father and his two children moved into one of the first VHP-provided homes. “The VHP has had an amazing effect on not only my life, but on the lives of everyone around me. This program has helped me get my life back on track,” the father said.

Garrett Jubie and Katie Elder, both members of the Oregon National Guard, moved into their new VHP home in September 2012. “Words cannot express how grateful I am,” Jubie, an Iraq war veteran, stated during the dedication of his new home.

VHP is also good for the community. To keep costs down, low cost — often distressed — properties are acquired and rehabilitated. Having veterans live in and care for these homes improves the neighborhood and local economy.

To carry out its mission of offering affordable rental housing to veterans and their families transitioning to civilian life, VHP strives to meet four specific goals:

- Property – acquire and rehabilitate properties at the lowest cost possible;
- Community – bring a variety of community members, businesses, public agencies and non-profit organizations together to accomplish the work and mission of VHP;
- Transition – connect veterans’ families with appropriate social service networks once they are living in a VHP property to better support their transition to civilian life; and
- Sustain – develop a sustainable program model not reliant on public funding for export to other communities interested in starting similar programs.

VHP's initial goal is to complete 25 houses in Eugene over the next three to five years through a variety of creative partnerships. The target for 2013 is finishing five homes, but the organization anticipates accelerating that pace over time.

To acquire its first four residences, VHP purchased foreclosed homes at significant discounts from Lane County and leased surplus properties from the Eugene Bethel School District for \$1 per year, with transfer of ownership anticipated in five to 10 years. Other acquisition models may include partnerships with landlords, investors and banks.

By combining the strengths of a variety of individuals and community groups, VHP acquired, rehabilitated and rented its first four homes in about 12 months, benefiting from more than 3,000 hours of volunteer work and tens of thousands of dollars of donated goods and services from area businesses. VHP will rent each home to a veteran family for up to two years and then turn it over to another veteran family. Each house is expected to serve at least 15 families over its life.

VHP is designed to be self-sustaining. Experience so far suggests that houses can be acquired and rehabilitated for an average of \$100,000 or less, with at least 20 percent of the cost provided by donations and volunteer work. Rents are affordable at \$500 per month, half of which pays for property management, maintenance and insurance. The group believes that the other half of the rent from 25 homes, along with the 20 percent local contribution, will provide sufficient funding to add at least one house per year to the program's inventory.

VHP's second aim is to implement this model in 10 other Oregon communities. More than 250 homes would be made available for Oregon veterans and their families, with another 10 to 15 added to the inventory each year. A parallel approach is to create a \$10 million foundation which would enable VHP to

acquire and rehabilitate about 25 homes every four to five years using annual foundation distributions. A foundation would greatly expand the portfolio of homes available to veterans, their families and their communities.

Auburn, Washington: Coordinating Service Delivery

Tucked close to Joint Base Lewis-McChord, Auburn, Wash., is a community of 75,000 residents, with a service area of more than 250,000 people. Auburn has long served a significant veteran population and has strived to maintain its military-friendly reputation while increasing outreach services to its veterans.

Building on this tradition, Auburn Mayor Peter Lewis recognized that the influx of returning veterans following the planned drawdown of forces in Iraq and Afghanistan potentially could strain the social services available in rural communities. These veterans may require services not normally found outside of larger urban centers and military bases, leaving smaller local government entities and nonprofit organizations to shoulder the burden. Smaller cities, though, typically have only limited resources and lack the organizational infrastructure to coordinate a broad array of services. In Auburn's case, the city was trying to cope with shrinking human services budgets.

A proposal to coordinate service delivery needs among the community's nonprofits offered a possible solution to help the 13th largest city in Washington support its veterans.

In conjunction with community nonprofits and local government agencies, the city in 2008 formed the Auburn Veteran and Human Services Center Association (AVHSCA). The group advocated for a center that would serve as a "one-stop shop" for human services, especially for veterans and low-income citizens with multiple human service needs.

Initial plans called for a facility to house from 15 to 20 local agencies and nonprofits that could provide clients with comprehensive case management. The association's board is broadly representative of the city, local nonprofits and the community at large.

A survey of the area's needs revealed that a central problem impeding the ability of the city's veterans to access social services was a lack of connectivity and information sharing between organizations. That lack of coordination resulted in a "pinball effect," in which veterans and others seeking government and community services were bounced from office to office across the city attempting to find the appropriate organization(s) to address their needs. The survey indicated that many times these individuals would become frustrated and simply give up. In other cases, an organization would attempt to address issues beyond its scope of responsibilities, unaware of another local group's capabilities which could prove to be a better fit.

More than 25 organizations signed a letter of agreement with the city to cooperate with planning efforts for the center's development, indicating their interest in occupying space and assuming an active role as a collaborating provider in the proposed center.

To leverage all available resources to address an urgent regional need, a decision was made to target veterans and their families as well as the large number of low- and moderate-income residents who call the Auburn community home. Auburn took advantage of the Section 108 loan guarantee provision of the Community Development Block Grant program and the New Markets Tax Credit program to finance the center's construction. A combination of levy funds and VA monies makes up the balance of the remaining budget. Operational costs will be shared by the city and the tenant agencies.

Though the project is still in development, the center is planned to be located within the Les Gove

Community Campus, a central area of public services that includes a 20-acre park, a youth activity center, a community center, the King County Regional Library, the White River Museum and the Auburn Senior Center.

Lessons that Can Be Applied across All Communities

Each of the community case studies presented in this article approached the issues facing veterans, service members and their families from the viewpoint of a local government. Community leaders recognized that existing support for our nation's warriors was severely lacking, and looked for ways to harness the sea of goodwill in their community into a more organized and efficient system of programs and services. Their efforts provide several models for local governments to effectively address these issues and reveal a number of key lessons other leaders can take advantage of when launching their own efforts to offer veterans, service members and their families the best possible service and care in their communities.

1. *Assess your environment.*

The veterans service environment, even in the most dedicated communities, is cluttered and complex, making it difficult for local government agencies and officials to understand what benefits and programs are available in their communities and how to help veterans access them. "There are over 150 federal programs out there for veteran employment, and just knowing what's going on in your community is the first huge step" in terms of veterans employment organizations, programs and services, said Tom Stellman, a workforce analysis expert and CEO of TIP Strategies, an economic consulting firm based in Austin, Texas. Each of the local governments highlighted in this article performed some form of community assessment prior to developing its strategies. It was this initial step that allowed these communities to determine the role they would play.

2. *Get organized and create community buy-in.*

The need for an organizing body is critical to a community's efforts to address veterans issues. "In order for a community to truly tackle veterans issues, there must be an organizing body that can bring together the numerous veterans services and organizations," said Andrea Inserra of Booz Allen Hamilton, who organized a series of community summits focusing on veterans issues in 2011. The resulting report, *Community Events to Address Challenges Faced by Military Families*, pointed to the organization of available resources and services as essential to successfully addressing military family and veterans issues in a community.

As was the case in Colorado Springs, Eugene and Auburn, it may be up to the city, county or regional government to convene all relevant stakeholders and create an organizing body. Mayors, city managers, county commissioners and other local officials are in a position to bring diverse community members together to address problems, and mobilize public and private resources. By leveraging the convening power of local government, leaders are able to bring the business community, nonprofits, local military officials, and other federal and local government agencies to the table to develop a unified plan for engaging veterans and military families. After successfully convening all the players, roles can be established, services and programs can be indexed, and shared resources can be committed.

3. *Use your community's existing resources.*

While developing a plan of action, it is important to remember that the local government may not need to invest a significant amount of resources. To support or complement existing service providers, local agencies may only need to modify systems already in place. The Alamo Council of Governments realized that by folding the San Antonio Coalition for Veterans' index of service providers into its existing human services agency and by making simple ad-

justments to an existing system, the community was able to provide exceptional service to a previously underserved population, all without committing a large amount of taxpayer dollars.

Not every community will be lucky enough to have an organization such as SACV that can readily provide legitimacy with the veterans and military community, as well as an index of local programs, organizations and points of contact. All local governments, however, have established social service organizations and agencies that can be leveraged to provide a crucial supporting role without breaking the bank. In addition, local governments can coordinate with local veterans service organizations such as the VFW, the American Legion, and Iraq and Afghanistan Veterans of America, which can provide the crucial initial contact and referral component.

4. *People want to help.*

Community support for veterans and military family issues is widespread and individuals are increasingly willing to donate their time and money. Volunteers can include individuals, businesses and groups as varied as university and high school sports teams, local church groups, local labor unions and Rotary Clubs. Often lacking, however, are organization and direction. Local governments are in a unique position to provide both of these crucial elements, creating an inclusive community-driven effort to address specific veterans and military family issues.

5. *Plan for the future.*

Changes in leadership, whether in the military, local government or community-based organizations, can affect the progress of efforts to address the issues of military families and veterans. As a result, governance structures must prepare for the inevitable changing of the guard. It is critical that current leadership establish an orientation to incoming leaders on the mission, vision and core values of any program or collaboration that has been created.

There are a multitude of veterans and military family programs being developed around the nation by local government entities. While there is considerable confusion surrounding these issues, local decision makers must remember that there is no one right answer or role that ensures success. Local governments must take advantage of available best practices and lessons learned and select an approach that works best for their community, because the worst thing local leaders can do to support veterans and military families is nothing.

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