



This work was sponsored by the New Brunswick Health Research Foundation, Irving Shipbuilding, Desjardins and the Saint John Regional Hospital Foundation. The program evaluation was conducted as part of the Military and First Responder Resiliency Research Project at The Men’s Initiative, UBC Faculty of Medicine.



We also acknowledge the generous support of:

LEON JUDAH BLACKMORE
FOUNDATION

MOHAMMAD H. MOHSENI
CHARITABLE FOUNDATION



www.menshealthfoundation.ca

Citation: Shields, D; Frender, J. & Kuhl, D. (2018) We’re Still Here and We Still Matter: The Shaping Purpose Military to Civilian Transition Program Evaluation and Study. The Men’s Initiative at UBC Faculty of Medicine. Vancouver, BC.

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Preface

In December 2016, Shaping Purpose Inc. contracted with The Men’s Initiative at UBC Faculty of Medicine to serve as the qualitative evaluation center for their delivery of a “military to civilian transition” (MCT) pilot program. The evaluation center was responsible for performing an arms-length, longitudinal, formative evaluation of the Shaping Purpose program, providing regular feedback to support the continuing improvement of the program, and to provide a summative evaluation of the program outcomes for military and Veteran participants.

This report synthesizes findings from the 20-month long evaluation period from January 2017 through June 2018 and describes the context, input, process and product (CIPP) evaluation model used for the study. In essence the evaluation asked: What is the problem to be addressed? Is the proposed program curriculum defensible and relevant? Was it delivered effectively? Was it successful? This approach seeks not only to measure what was achieved in relation to intended program objectives, but also to gain a rich understanding of the context of challenges for Veterans in MCT, and whether the program objectives and methods were relevant to and effective for the population.

To inform the evaluation, interviews were conducted with military personnel and Veterans prior to and two-weeks post program completion, and again at six months post program. In order to supplement information provided by these participants, interviews were also conducted with Nurse Case Managers from CAF medical services, Case Managers from the Integrated Personnel Support Centres, Veterans Affairs Canada, and the Manulife SISIP program. In total, 184 hours of interviews were analyzed to complete the evaluation. The authors also attended four Shaping Purpose programs as participant observers to assess delivery and gather real time feedback from participants.

This report describes themes, generated from these interviews, regarding the key challenges facing military personnel during MCT, their reasons for entering the Shaping Purpose program, and their post-program feedback and descriptions of personal impact. Implications of the evaluation findings are discussed with respect to future Shaping Purpose programming and supporting military personnel in MCT.

Based on the interviews, the evaluation concludes that the Shaping Purpose program has demonstrated its effectiveness as a planning and preparedness activity for military personnel in the MCT context. It is relevant to the needs of releasing military personnel, demonstrates an adequate evidence base for its curriculum, has been responsive to formative feedback, and produces outcomes desired by participants that appear to be durable over time.

The contents of this report will be of interest to public service policymakers, health care organizations and clinical practitioners, Veteran’s advocacy organizations, health researchers, and others with responsibilities for ensuring that Veterans are able to transition to full and meaningful lives after their military service. It may also be of interest to those who wish to participate in the Shaping Purpose program, those who have medical concerns while still in the military or those who have been discharged because of medical concerns.



Acknowledgements

We gratefully acknowledge the participation of numerous individuals in the evaluation process. First and foremost, we would like to thank the military participants themselves who were generous with their time and information during our interviews with them. We were honoured by their willingness to share their personal stories with us, both the parts of which they were proud to tell and the parts that were difficult for them to talk about. We were profoundly affected by their determination and courage to share these stories with us in the hope that their words could improve the transition experiences of their peers who would follow them out of the services in the future. We hope that we have done justice to their stories and captured the essence of their message – every one of their stories informed this work, though not all could be quoted directly nor could all of their unique stories be told. At the national level, Case Managers at VAC, within the CAF, and at the SISIP program have provided vital perspectives and expert information on the challenges that personnel confront when making the transition from their military service to civilian life – in some cases also sharing their own stories of transition out of the military. The participation of these groups has enabled us to gain a more comprehensive understanding of the complex trajectories of transition, and the array of services positioned to provide assistance.

We also thank the Shaping Purpose team of Capt. Andrew Garsch, Lorne Brett, Anita Puniyama, and Ward Yuzda for their openness to feedback, dedication to quality improvement of their program, and efforts to improve the lives of Veterans. Finally, we would also like to thank Laura and Erin Shields for their work editing drafts of the document. Any errors of fact or interpretation in this report remain the sole responsibility of the primary author.

Dedication

To all those who have served and their families.

And to all those who work to assist Veterans to lead meaningful and connected lives after their military service ends.



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Executive Summary

This is a program evaluation of the impacts of the program, Shaping Purpose, on military personnel as they cope with the challenges of transitioning from their military careers to civilian work and other roles. The Shaping Purpose program is an established personal and career development course that has been adapted for military personnel. The program is conducted off-base in a group setting over a four-day period, and consists of a series of lectures, group discussions and exercises leading towards a personal planning process aimed at clarifying participants' sense of purpose and meaning in their post Canadian Armed Forces (CAF) life and roles.

The overall study design is based on the Context-Input-Process-Product (CIPP) evaluation model, which is a well-accepted strategy for improving systems that encompasses the full spectrum of factors involved in the operation of a program (Stufflebeam & Shinkfield, 2007). This approach to impact evaluation seeks not only to measure what was achieved in relation to intended objectives, but also to gain a rich understanding of the context, and how and why these achievements occurred. The approach can discover unintended outcomes, and assess the validity of intended outcomes for recipients and stakeholders.

To inform the evaluation, pre-program interviews were conducted with 60 military personnel and Veterans in order to understand, in their own words, their transition challenges and goals in attending. All branches of the Canadian Armed Forces were represented: both male and female, English- and French-speaking, from recruit to 36 years of service, Commissioned Members and Non-Commissioned Members (NCM's), and with both deployed and non-deployed personnel (total 112 hours of interviews). In order to supplement information provided by these participants, thirteen interviews were also conducted with referral stakeholders. Interviews were completed with Nurse Case Managers from CAF medical services, with Case Managers from the Integrated Personnel Support Centers, Veterans Affairs Canada, and the Manulife SISIP program (total of 16 hours of interview). Forty follow-up interviews were subsequently conducted with participants after they completed the program to assess program impacts (39 hours of interviews). As a purposive sampling, twenty participants were interviewed a third time at 6 months in order to further understand their transition trajectories and to gauge durability of program impacts (a total of 15 hours of interviews). Finally, the program designer was interviewed regarding the program model (2 hours). In total, 184 hours of interviews were analyzed to complete this evaluation.

Based on the interviews conducted, the Shaping Purpose program demonstrated its effectiveness as a planning and transition preparedness activity for military personnel in the MCT context. It is relevant to the needs of releasing military personnel, demonstrates an adequate evidence base for its curriculum, has been responsive to formative feedback, and produces outcomes desired by participants that appear to be durable over time.



AT THE HEART OF A SUCCESSFUL TRANSITION IS A TRANSITION OF IDENTITY;
AN EMOTIONAL SHIFT FROM BEING PART OF THE ARMED FORCES TO
HAVING A FUTURE AS AN INDIVIDUAL IN THE CIVILIAN WORLD.

FORCES IN MIND TRUST (2013).

1. Introduction

The experience of leaving a military career and “re-entering” the civilian world represents a major life transition that brings some degree of challenge for most releasing military personnel (Kintzle et al. 2016). The necessary integration into military culture at recruitment, and throughout training and service, may disconnect military members from civilian customs and concerns and change how members perceive themselves and their world, as well as the values and expectations they hold (Shields et al., 2017).

In order to prepare soldiers, sailors and members of the air force for difficult work under sometimes dangerous circumstances, military training separates recruits from their former civilian identities to build a new military identity predicated on discipline, professionalism, selfless sacrifice and service, and identification with the closely bonded military family (Brooks, 2010; Fox & Pease, 2012; Shields, 2016). This new identity is often experienced implicitly or explicitly as superior to civilian life and identity, and fosters ‘esprit de corps’ and pride in service (Castro & Kintzle, 2014, Shields, 2016).

A Meaningful Contribution and a Sense of Belonging.

For members of the Canadian Armed Forces (CAF) and militaries throughout the world, the work that personnel are engaged in can be deeply meaningful and experienced as important – as making a difference in the world. Few career paths offer similar opportunities to grow personally, confront and overcome adversity, make critical decisions as a trusted member of a team, and experience a strong sense of belonging to a military family. The work of a military career can be a source of life-long pride. The eventual return to civilian life after military service is inevitable, however, and can be a source of considerable role and identity disorientation, loss and stress (Bergman et al., 2014).

Transition Challenges

In the 2010, Life After Service Survey (LASS), Canadian Veterans were asked questions about their adjustment to civilian life after leaving military service. At that time, twenty-five percent of Canadian Veterans reported a



difficult adjustment after their release from the services (Thompson et al., 2011). On the 2013 LASS, twenty-seven percent of Canadian Armed Forces (CAF) members who had been released from the regular forces between 1998 and 2012 reported difficult or very difficult transitions (Thompson et al. 2014). Findings from the most recent Life After Service Study (Van Til et al., 2017) suggest that thirty-two percent of those who participated in the survey had difficulty in their adjustment to civilian life. Veterans with recent releases (between 2012 and 2015) had an even higher rate of difficult adjustment (42%), compared to earlier releases between 1998 and 2012 (29%). These recently-released Veterans had higher rates of service in Afghanistan, fair or poor self-rated mental health and less than 10 years of military service, all factors associated with difficult adjustment.

These surveys also revealed that Veterans cope with a number of chronic conditions at a higher prevalence than their civilian peers, including arthritis (29%), depression (21%), anxiety (15%), and posttraumatic stress disorder (PTSD) (14%). In comparison to civilian populations, Veterans also reported higher rates for hearing problems, pain, and activity limitations (Van Til et al., 2017). All of these conditions can complicate transition out of the forces and adjustment to life after service. When illness or injury result in members being unable to continue to perform essential tasks, they may face a medical release (3B) from the Armed Forces. This release from the Services, which marks the end of their military career, may come against the wishes of the member themselves, and also not on their terms or schedule, presenting an additional adjustment challenge.

Whether leaving the military is expected and planned or due to medical or other categories of release that may be involuntary, adaptation to life after a military career can be difficult. Poor adaptation may exacerbate service-related or non-service related physical and psychological difficulties, creating additional impacts on long-term health and well-being (Adler et al. 2011, Demers 2011, Thompson et al. 2015). These negative outcomes, however, are hard to predict as military to civilian life transition (MCT) is a highly individualized, multidimensional experience, and researchers, clinicians, military leaders and policy makers, do not have a complete understanding of the factors that influence military to civilian transition (MCT) trajectories (Shields et al., 2016).

Given that these Veterans are partners, parents or children who belong to and affect families and communities across Canada, the social costs of poor transition outcomes are high. On the 2016 LASS eight percent of Veterans indicated their partners had difficulty with their release, and 17% reported their children had difficulty with their release. Given the impacts on Veterans, their families and their communities, a better understanding of transition challenges is essential (Dallaire & Wells, 2014; OVO, 2017). “The processes and experiences of transition for Armed Forces veterans are not well understood, and research is only beginning to unpack associated issues” (Cooper et al. 2016).

A Critical Period for Adjustment

An emerging consensus among international experts suggests that the circumstances of the transition “peri-release” period (from 6 months prior to approximately 2 years after release) may play a particularly important role in long-term transition “success” in terms of post-service functioning, community engagement or



participation, and well-being (Thompson & Lockhart, 2015). There is, however, little research concerning the needs of releasing military personnel during this critical period, or of programs that offer services within the peri-release period of transition.



HAVING A MEANINGFUL ROLE IN SOCIETY FULFILLS OUR NEED FOR A SENSE OF PURPOSE AND IS AN ESSENTIAL ELEMENT OF PEOPLE'S IDENTITIES.


THOMPSON ET AL., 2017
VETERANS AFFAIRS CANADA

The Shaping Purpose Program for Military Personnel

Shaping Purpose (SP) is an established civilian personal development program that has been adapted for military members in transition to their post-service life. The program guides individuals through a series of lectures, group discussions and exercises leading to a personal planning process aimed at clarifying participants' sense of purpose and meaning in their post CAF life and roles. The program works to assist individuals to identify their "gifts" (skills applicable to the civilian world), "passions" (interests and activities most crucial for ongoing well-being), and "values" (criteria for judging what is important and motivators of action) in order to inform the creation of a "Life Plan": a detailed multi-dimensional action plan. The process and resulting plan are proposed as a framework for CAF members and their families to think through the choices that they need to make, and concrete actions they need to take, to live an active, connected and contributing life.

Preliminary quantitative outcome evaluation has suggested that the SP program for military personnel may improve psychological well-being scores for releasing or recently released members of the CAF (Yuzda et al., 2015). A comprehensive program evaluation that considers the context and validity of the program goals and outcomes for stakeholders and the beneficiary population has yet to be completed.

In 2016, the CAF Social Science Research Review Board and VAC researchers conducted a high-level review of the Shaping Purpose program. The review resulted in approval by the CO, Director Casualty Support Management (DCSM) to recruit participants through the CAF Joint Personnel Support Units (JPSU) and conduct a formal evaluation of the Shaping Purpose program over the course of four sessions. These four sessions were delivered to military personnel and Veterans across Canada in 2017.



WE NEED SUFFICIENT VISION TO RECOGNIZE THAT A PROFOUNDLY IMPORTANT PSYCHOLOGICAL TASK IS TO HELP THE MAN TO EXPLORE HIS ATTITUDES, HIS SITUATION, HIS CONFUSIONS AND HIS DREAD OF THE FUTURE, UNTIL HE BEGINS TO SEE SOME THINGS WHICH HE HIMSELF WISHES TO ATTAIN.

ROGERS, 1944.
ADJUSTMENT OF DISCHARGED SERVICE PERSONNEL

The Current Study

The goal of this project was to conduct a comprehensive qualitative program evaluation of the Shaping Purpose program for military personnel, to assess the program's impact on military members transitioning from their military careers to civilian work and other roles. Qualitative aspects of a comprehensive program evaluation can supplement quantitative goal/outcome indicators to supply a nuanced understanding of the program in context, and inform both improvement/formative and accountability/summative information needs of policymakers, program developers, and others concerned with assuring a quality program for the beneficiary population.

Additionally, although much research has documented experiences of struggle during the military to civilian life transition, little research has looked to document the particular challenges within the peri-release period. The current research provided an opportunity to contribute to this needed knowledge area.

Organization of this Report

This evaluation report is organized according to the context, input, process, and product components of the CIPP evaluation model. Chapter 2 presents the methodology and sources for the evaluation. Chapter 3 focuses on the context evaluation, summarizing the narrative themes identified from interviews with military personnel in transition and case managers in stakeholder organizations. Chapter 4 examines program inputs of curriculum design and goals against identified population needs and concerns to test relevance of the program. Chapter 5 presents assessments from our process evaluation, informed by observation of the program delivery and interviews with participants. Chapter 6 presents the results of the product evaluation, including our assessment of impacts and the nature of outcomes. Chapter 7 summarizes the key findings of the evaluation.



2. Methods

How do we measure impact?

Program evaluations are often deployed in a post hoc, retrospective design that considers whether a program was effective in meeting its stated objectives. For example, if a program is designed and delivered that trains participants to produce widgets, the fact that it can be established that graduates of the program have learned to produce widgets is taken as evidence of program success. The more pertinent question, however, is whether that skillset was of any relevance or value to the participants in the first place. No matter how effective you are at teaching personnel about trench warfare, and how solid the evidence of your success in delivering that training, it may not be relevant workup training for modern warfare in the desert. Real world challenges require highly contextualized solutions.

For military members preparing to transition out of their service careers, there has been a proliferation of programs and resources in recent years that present an increasingly complex maze for members to navigate, during an inherently challenging time of identity and role redefinition. Members' time, energy and access to resources are finite and, arguably, programs should be prepared to defend both the effectiveness and the relevance of their offerings. Preparation for the real-world challenge of military to civilian life transition requires highly contextualized programming and resources.

The goal of this program evaluation and study was therefore to examine, with rigour, the efficacy and relevance of the Shaping Purpose program, against the context of military participants peri-release MCT challenges. A longitudinal, quantitative evaluation of program outcomes is currently being conducted as a separate research study. Framed within a social constructionist epistemology, this portion of the program evaluation focused on qualitative indicators of efficacy and relevance through observation of the program delivery and the interviewee's rich descriptions of MCT challenges, program involvement and impacts. The Research Ethics Committees of the University of British Columbia, and the Horizon Health Network of New Brunswick, both reviewed and granted ethical approval for the study.

Evaluation Model

The methodology chosen was informed by Stufflebeam's (2007) "CIPP" model of program evaluation. This approach to outcome evaluation seeks not only to consider what was achieved in relation to intended program objectives, but also to assess the validity of intended outcomes for the recipients and stakeholders and gain a more nuanced understanding of how and why impacts occurred. CIPP inquiry assesses four evaluative foci including, population needs, program goals, program delivery, and program outcomes. The core model components are represented in the CIPP acronym (Context, Input, Process and Product):

1. Context evaluation assesses the circumstances stimulating the creation or operation of a program as a basis for defining goals and priorities and for judging the significance of intended outcomes. The key question at this stage is: What are the needs of the population in question?



2. Input evaluation examines the program goals and design in light of the needs revealed by the context evaluation, and against the existing evidence base, to determine whether the strategies to address these needs are sound. The key questions at this stage are: Were the program goals relevant to the population and was a defensible design employed? `

3. Process evaluation assesses program implementation and delivery relative to the stated program goals and desired outcomes. The key question at this stage is: Were the design and delivery well executed?

4. Product evaluation identifies consequences of the program for various stakeholders, intended or otherwise, to determine effectiveness and provide information for future program modifications. The final question is: Did the effort succeed?

Key Questions

Within the CIPP evaluation framework, questions that guided inquiry included:

- What are the common barriers to transition adjustment in the MCT peri-release period as defined by military and Veteran participants and key stakeholders?
- Do referring stakeholders, program developers, and participants share an understanding of service needs?
- Do initial reasons for joining the CAF and in-service attitudes and experiences influence transition adjustment?
- Are Shaping Purpose program goals relevant to and a priority for the stakeholders and beneficiary population?
- How, in detail, does this program work in practice?
- Are there any unintended outcomes of the program including positive outcomes and any deficient, unneeded, and/or unsafe services?
- Can we enhance understanding of particular issues or aspects of the populations needs in MCT and of the program itself through collection of the participants' individual stories and outcome experiences?
- What aspects of the program have and have not worked?

In summary, the goal of this evaluation was to inform problem definition, gap analysis and further refinement of the program design, to document participants' experiences of the program, including any unintended or unexpected outcomes, and to better understand how the program "fits" with participant needs and in the suite of transition services offered by Veterans Affairs Canada and the CAF.

Data Sources

Plausible understandings of complex phenomena are best constructed through multiple sources of evidence. Triangulation is a technique that allows researchers to construct more meaningful propositions about the social world by gathering data from a variety of sources that reflect different ways of understanding phenomenon.



By gathering information in a variety of ways, the researcher can establish links and eventually create a more complete picture of phenomena supported by multiple data sources (Mathison, 1988).

To gather information on the dynamics and issues relevant to military to civilian life transition in the peri-release period, and to inform the specific questions of the CIPP framework, data was gathered from a number of sources. Pre-program interviews were conducted with 60 military personnel and Veterans, in order to understand, in their own words, their transition challenges and goals in attending (112 hours). All branches of the Canadian Armed Forces were represented: both male and female, English and French speaking, from recruit to 36 years of service, commissioned members and NCM's, and with both deployed and non-deployed personnel. (Sample questions from the Participant semi-structured interviews are included in Appendix B)

The military participants in the study ranged in age from 24 to 52. Those who had deployed had served in wartime or peacekeeping missions in Afghanistan, Iraq, or Bosnia, or aboard ship in various regions. Many of the participants had served on multiple missions or deployments. Most of the sixty participants were receiving health services related to physical illness or injuries, mental health and operational stress injuries, or both.

Participants self-identified as being in the process of transitioning out of the military. Participants were either currently employed and waiting for a permanent medical category (PCAT), had already received a PCAT, or had recently released for any reason in the past three years. Military personnel were not eligible to participate if they had severe current and active unmanaged substance use problems or significant cognitive impairments that would interfere with the study requirement that participants be able to engage in the interview process with adequate self-awareness and cognitive clarity.

In order to supplement information provided by these participants, thirteen interviews were also conducted with expert referral stakeholders. Interviews were completed with three Nurse Case Managers from CAF Health Services, with five Service Managers from the Integrated Personnel Support Centers, two Case Managers from Veterans Affairs Canada, and three Case Managers from the Manulife Service Income Security Insurance Plan (SISIP) Vocational Rehabilitation program (total of 16 hours of interview). (Sample questions from the Participant semi-structured interviews are included in Appendix A)

Forty follow up interviews were subsequently conducted with participants after they completed the program to assess program impacts (39 hours of interview). As a purposive sampling, twenty participants were interviewed a third time at 6 months in order to further understand their transition trajectories and to gauge durability of program impacts (a total of 15 hours of interview). (Sample questions from the Participant semi-structured follow-up interviews are included in Appendix C). Finally, the Shaping Purpose curriculum designer was interviewed regarding the program model (2 hours). (Sample questions from the Facilitator semi-structured interviews are included in Appendix D)

Data collection followed a phased approach, beginning with thirteen interviews with key referral stakeholders, and continuing with fourteen initial participant pre-program interviews, participant observation of the first program delivery, and two-week and six-month post-program interviews. Forty-six additional military and



Veteran participants were then recruited and interviewed, pre and post program, at three more program deliveries across Canada. Program delivery was also observed by the two primary evaluators for the three subsequent runs, with field notes kept and integrated into the analysis.

Combining these data sources resulted in a master dataset of 134 interviews with 74 individuals, reflecting the experiences of Veterans and Expert Stakeholders across multiple settings and phases of the MCT process. In total, 184 hours of interviews were analyzed to complete this evaluation. In addition, the evaluation was informed by a review of existing literature on MCT, by analysis of the Shaping Purpose course syllabi, and through direct observation of the delivery process of four Shaping Purpose programs.

Data Structuring Process

Interviews were recorded in digitalised MP4-format and loaded onto the computer research platform, Atlas.ti for analysis. Using a method developed by Hauptmann (2007), interview audio waveforms were direct coded and labelled using the audio “quotation” function of the QDA software. Audio files of interviews are often transcribed into text form through a transcription service before analysis, however this process is resource intensive and already an analytical reduction and a first interpretation of the data (Kühn & Witzel, 2000). If major mistakes occur in transcriptions, they may not be recognised as researchers treat the transcribed record as if it were the primary source. Additionally, nuances such as pauses, emphasis and emotional tone are lost or interpreted in the transcription process. Direct coding and analysis of digital audio data, on the other hand, allow researchers to work directly with the raw data and helps maintain fidelity to the original stories – a key aspect of qualitative validity or trustworthiness (Levitt et al., 2017).

Using this direct coding method, prior to in depth analysis, a deductive structural coding was applied to the interviewee responses in the interview audio files. Questions that were repeated across multiple interviews in the data set were grouped within different conceptual domains of inquiry and given code names. For example, for the contextual analysis, domains included: Demographic Information; Reasons for Joining; Early Training and Experience; Belonging; Challenges in Service; Proudest Moments; Injury; Responses to Injury; Care and Support; Decision Process of Release; Attitude towards MCT; Release Process; Challenges in MCT; Adjustment to Post-Service Life; Identity; etc.

In each interview, the appropriate code was applied to the section of the audio file that included both the interviewer’s question and the participant’s response. Each question and respective response were coded this way. Once all of the data were structurally coded, the evaluation team could easily sort through the data by question or domain to contextualize the data included in specific analyses (e.g., Context analysis of MCT challenges and service needs). This form of structural coding acts as a labeling and indexing device, or Clickable Table of Contents (C-TOC) to organize data likely to be relevant to a particular analysis from a larger data set (Hauptmann, 2007). Because these codes are developed without consulting the data (derived from theory and the interview questions), these codes are neither data-driven nor thematic in nature. Rather, structural coding creates partitions in the interview narrative and results in the identification of large pieces of dialogue on broad topics that form the basis for the in-depth analysis within or across topics (Namey et al., 2008).



The complete qualitative data collected addressed multiple research questions within the CIPP framework. Hence, different parts of the data set were analysed to address each of the framework areas of Context, Inputs, Process and Product. Structural codes were also used to pull together related data for development of data-driven thematic codes. All subsequent analysis used these coded audio segments and only quotations to be used as theme exemplars in the final writeup of the evaluation report were transcribed.

Analytic Process

Goetz and LeCompte (1984) note that in qualitative research, analysis starts at the beginning of data collection and continues throughout all stages of the research process rather than being a discreet step that occurs after all data is collected. In quantitative research, data is collected after the research is fully designed and therefore the researcher may anticipate what kind of data will emerge and its format. By contrast, qualitative research remains a contested work in progress in which the researcher follows the trail of information and absorbs whatever comes in, often in a complex disorganized form. The task of the researcher is to work with this data, remain open to discovering themes or ideas that are “grounded” in the data, and generate something meaningful that holds fidelity to the experiences of those involved (Namey et al., 2008).

Consequently, after the preliminary deductive structural coding, subsequent data analysis followed an inductive approach in the sense that explicit theories were not imposed on the data in a test of a specific hypothesis. Rather, the interview data were allowed to “speak for themselves” through the emergence of conceptual categories and descriptive themes. The size of the qualitative data source allowed the evaluation team to divide the stakeholder and participant interviews into two data sets for independent analysis and initial theme identification as part of the analytic strategy to increase theme validity. The data coding and thematic analysis were conducted by the first and second author, researchers with advanced training and experience in conducting qualitative evaluation research.

In analysing the interviews, the first basic unit of analysis was the full recording of each single interview. Following Ryan and Bernard’s (2003) recommendations, we started with “scrutiny techniques,” looking over the whole of each interview first for repeated topics and any identifiable networks of ideas within each transcript. Open and axial coding were used to capture unanticipated categories of analysis and identify emerging themes (Corbin & Strauss, 2015; Ryan & Bernard, 2003). Using memos and the technique of constant comparison, we identified the “story line” or the major research findings grounded in the data.

After independent initial theme identification across the thirteen stakeholder and first twenty-seven participant interviews (2 program deliveries), the evaluation team met to discuss the emerging themes and reach agreement on an initial coding and interpretation of the data. To ensure that the analysis maintained fidelity to the subject matter, once the themes were developed, we also presented and discussed the themes with Veteran participants in one-on-one discussions in order to test and ensure that the study findings held allegiance to their experiences.



3. Context Evaluation: What are the needs of the population?

Releasing personnel grapple with a number of decisions in the MCT peri-release period that will shape their post-military life. They may be trying to decide what new direction to take in their work life or social role. They may be planning a move and contemplating where they are going to live. They may be applying to schools and thinking through what education or training would be most beneficial. It is also a period of adaptation to functional limitations imposed by psychological and/or physical injuries. They may also have to resolve questions about their own post-military identity and social role. Most of these questions are not simple and bring some level of stress. For those who receive a PCAT designation, these questions may also come on a schedule that is not their own; their release date is set according to the CAF's institutional needs rather than their member's progress in a transition process.

Understanding the complexity of challenges in MCT during the peri-release period started with close study of the context. Context evaluation provides the basis for considering whether the goals and priorities of the Shaping Purpose program are relevant to and attuned to the needs of the target population. Questions that guided inquiry in this phase of the evaluation included:

- What are the common barriers to transition adjustment in the MCT peri-release period as defined by military and Veteran participants and key stakeholders?
- What do Stakeholders and military personnel in the MCT process identify as the key struggles and service gaps or barriers in MCT? Is there a match? What are the key differences?
- Do initial reasons for joining the CAF, or in-service attitudes and experiences influence transition adjustment?

Sources

To inform this aspect of the evaluation, two key sources of data were examined including interviews with participants and expert stakeholders.

1. Interviews with Course Participants

Pre-program interviews were conducted with 60 military personnel and Veterans, in order to understand, in their own words, their transition challenges and goals in attending (112 hours). All branches of the Canadian Armed Forces were represented: both male and female, English and French speaking, from recruit to 36 years of service, commissioned members and NCM's, and with both deployed and non-deployed personnel.

The military participants in the study ranged in age from 24 to 52, and had served in wartime or peacekeeping missions in Afghanistan, Iraq, or Bosnia, or aboard ship in various regions. Many of the participants had served on multiple missions or deployments. Most of the sixty participants were receiving health services related to physical illness or injuries, mental health and operational stress injuries, or both.



2. Interviews with Expert Stakeholders

Thirteen interviews were also conducted with expert referral stakeholders. Interviews were completed with three Nurse Case Managers from CAF Health Services, CAF medical services, with five Service Managers from the Integrated Personnel Support Centers, two Case Managers from Veterans Affairs Canada, and three Case Managers from the Manulife Service Income Security Insurance Plan (SISIP) Vocational Rehabilitation program (total of 16 hours of interviews).

Narrative Themes in the MCT Context

In order to document the main themes, we have provided direct quotes to ground the findings in the data. These quotes enable the reader to gain a concrete understanding of the themes and how they are manifested in Veterans' personal narratives relating to their experiences as they adjust to their transition out of their military careers. Qualitative findings are written within a rhetoric of demonstration where we provide quotes and excerpts to assist the reader to assess for themselves the fidelity of our analytic process (Levitt et al., 2017). Quotes are transcribed as spoken, however, as confidentiality was promised to all stakeholder interviewees and program participants, names are severed and identifying military service or institution details are removed.

Analysis suggests the presence of three intersecting master themes that are woven throughout these Veterans' narratives of transition acceptance and adjustment. A fourth thematic area catalogues program participants explicit goals and reasons for attending the Shaping Purpose program. The master themes that emerged from the data are as follows:

- Mission First: Operational Needs Before Individual Needs
- Starting Over: Denial and Delay, Confrontation, and Identity Renegotiation
- System Overload
- Participants' Needs: At this stage in my transition, what I'm looking for is...

Understanding Complex Systems

It is important to understand that the focus of this portion of the evaluation is on the barriers and challenges faced by releasing personnel; it is about the problems and service or knowledge gaps they are seeking resources to address. An analysis of *who doesn't struggle* and *what, systemically, is working well* would highlight different parts of the system and bring to light different stories – stories also told by the stakeholders and participants. Success stories are equally important but have been documented elsewhere (for example, OVO, 2017), and are not the focus of this report.

It is the nature of complex systems that they often create and maintain outcomes that no part of the system wants or intends (Meadows, 2008). Veterans struggling during their MCT is an unwanted and unintended outcome produced by a complex military/government/civilian system for a significant minority of military personnel. Crafting, or evaluating proposed solutions for such problems requires a deeply contextualized



understanding of these system effects. Analyzing where in the system Veterans are meeting barriers and having challenges is not undertaken to find fault with any part of the system but rather to understand the unintended and unwanted outcomes produced by the whole in order to inform evaluation of proposed solutions.

As a critical narrative analysis, themes are not separated from the complexity of their context. The reader is encouraged to resist the urge to simplify, but instead to seek to grasp the full complexity of the system, and the intersectionality of the themes. Turning to the case data, we will explore the specifics of these four central themes through examples from the stakeholder interviews, the participant interviews and from observational notes from the program deliveries.

Mission First: Operational Needs Before Individual Needs

Narrative Theme Description: The operational needs of maintaining a fighting fit and ready military come before the needs of any one individual within the service. The theme is embedded in the enculturation process during early training as an internalized value of stoic service and sacrifice for mission and team. As an institutional value it is expressed as a group performance culture in which belonging to the group is based more on what you can do today than what you did yesterday. Despite its operational effectiveness, this translates into a number of challenges for military personnel who are adjusting to illness or injury or who are facing a medical release. This cultural artefact contributes to members hiding injuries or delaying help-seeking due to concern about reputation and career advancement, to stigma and to rejection by peers and sometimes by the Chain of Command.

Expert stakeholders and participants both spoke at length about military training and indoctrination into military culture. From basic training, and throughout their military career, personnel are enculturated into a group identity (i.e. to consider 'we/us' to be more important than 'I/me') and a system of values that link acceptance and status to performance, inculcate values of selfless sacrifice for the group, and seek to prepare members for combat or other difficult service. This enculturation was linked by both groups to support and service barriers, to challenges in accepting and adjusting to illness or injury, and to transition out of the military, and to barriers to health services long after release.

Acceptance and Merit come through Endurance and Sacrifice for the Mission

When asked about how their entrance into the military had changed them, participants often reflected back with pride on a changed identity and self-concept. One participant summed up the process of going through the Basic Infantry Qualification (BIQ) course as follows:

They strip you right down, right away, of everything personal. They get everybody down to the same level and then start building you up, making you into what they want you to be. They're really pretty



good at getting you to forget your own home life culture and just focus on the military culture. Living the culture and loving the culture.

Another participant noted how past achievements in civilian contexts didn't matter; it only mattered what you did now.

I got to basic and they didn't care who I was or what I'd done before. We were all equally worthless. Everything that I'd accomplished and had been riding on for the past years they didn't care about. You all have to prove yourself. What you do now is what we're going to judge you on. Through that process I became more self-confident and more of a team player.

Many participants talked about what they had endured in the process of their recruit training in order "to prove yourself" and gain admittance into the military family. One interviewee talked about the tests of early training, and how "seemingly senseless" tasks would separate those who would follow the order from those who would "whine and complain." Another spoke about how, to pass the test, she had to override her discomfort, fear and pain, and follow orders without question.

You're going to leopard crawl across this parking lot and no you can't roll down your sleeves, so we're all bleeding.

Physical tests were coupled with harsh psychological treatment by leaders.

We didn't even get called privates and recruits, we were called larvae, maggots. If you thought you were a fly you would get smacked down – you hadn't made it to that level yet. You were treated like crap.

This test of fortitude was deemed necessary to determine who was fit enough for service and who could be relied on under stress.

They tortured us just to see you break. I think everyone broke at some point and you asked yourself, why am I doing this? Do I really want to do this? We had a bunch of guys drop out, which is fine because you don't want anybody there who doesn't want to be there.

This moment of crisis was often spoken about as a turning point where a personal decision was made to carry on, and to concentrate on getting through no matter what "they threw at you." Those who passed the test spoke of their intense pride, a new sense of belonging and greater purpose.

When I left basic training, my fitness had increased. My level of confidence had increased. My belief in myself about my ability to do things increased. I felt proud that I was serving a higher purpose. Your fundamental expectations changed, your ideology about doing things for the greater good. When you're young you still think that you can make a difference serving something that's greater than yourself. I really identified with the Canadian Forces.



Ongoing Acceptance in the Military Family is Contingent on Ongoing Performance

The centrality of performance testing in military culture, and its link to ongoing acceptance and to status within the military family, is a key feature of the Mission First cultural theme. Interviewees spoke about how the rite of passage of basic training was just a beginning. Testing, and continually proving one's fitness to belong, was a career long process.

After BIQ I was pretty proud. You excel at all these courses and you get to where you want to go and then you have to prove yourself all over again. You get ground back down and then built back up, time after time, throughout your career.

An Expert Stakeholder expanded on how the contingent nature of acceptance in the military family, works to support the accomplishment of mission goals. As well as performance being a condition of belonging, there was significant status associated with the willingness to take personal risk and to step forward to take on the hardest tasks – to be at the “sharp end of the stick.”

Military is a family and yet it's also a hierarchy. There's jostling for position and everyone isn't valid unless they're at the sharp end of the stick. That mentality helps motivate people to do the hardest work...

The process, for the successful, cements close bonds and intense loyalty to the mission and the military family.

Right from the get go, I was finally in a family, the feeling you have when you're with your people. It's something that people on the street, civilians, if you don't have time in, you can't comprehend... Greater than a normal friendship – like your best friend? A million times that – because your best friend may not lay down his life for you – so if you go overseas, you know your buddy, doesn't matter if it's your buddy or you're just working together, you know there's somebody that's going to be looking after you. Civilian life, there's nothing you can relate to that.

This trust was reciprocal in nature. To know somebody had your back, you had to have theirs too.

I was a breacher for my section, I would blow locks, kicks doors, and guys would go piling in the room. My take on it was, I'm a big guy, I fill the door, if there's any bad guys in the room, they'll shoot me first, and my guys will know, and it'll save their lives. Fortunately, that never happened.

The cultural emphasis on putting mission and team before self, has obvious merits for group cohesion and preparing military personnel for service. As one Expert Stakeholder noted, however, “Their dedication to their unit can backfire on them in the end.” The link between selfless sacrifice, performance and acceptance in the military family influenced the behaviour of interviewees who are ill or injured, in ways that had long term consequences for career and transition adjustment.



Don't Let the Team Down

First, loyalty to the team kept personnel from coming forward with injuries because they didn't want to leave their post or create increased workload for their peers who must fill the gap they leave. An Expert Stakeholder explains:

A lot of people don't request posting (to the JPSU) because they don't want to let the team down. The military is really short-staffed right now so many people are doing many jobs and if one person leaves to take care of themselves then they feel the rest of their team is going to suffer.

For many, this came as second nature – it was just the way you were supposed to be. A military participant reflected over the link between his military training and his own delayed help-seeking:

It's funny, the mentality in the military when you first join, and it happened to me, is who cares if you get injured, just keep going, who cares? Who cares? So, you put that mentality into people, then when they do get injured, instead of getting the help they need up front, they deny it.

Members spoke about continuing to push themselves to carry on despite fatigue or pain, and to endure without complaint. An Expert Stakeholder summed it up:

Soldier on, suck it up, support the cause, if you are weak somebody else has to carry your pack. Stamp your feet and ignore the pain. That's been the culture for a long, long time and it's engrained.

Career Suicide

A second incentive for members to “suck it up and carry on” that emerged was that admitting to injury or illness might affect their career opportunities, or cause others within the group to question their dependability. An Expert Stakeholder noted how admitting to injury can be career limiting or career ending, and how that affected disclosure to medical staff.

They didn't report in the past and they're not supposed to talk about that, and that includes physical problems. If they go to their doctor with an injury, the doctor will put them on a temporary category – and once you get your first 6-month temporary category, then it could lead to a second one, and then a permanent category, and then could lead to release, so very few military people will be really honest with their doctor.

Speaking of his own experiences after he was sidelined by his operational stress injury, one military participant recounted:

The minute you say you have issues and you can't sleep, they're going to give you a medical chit which reduces your amount of work. So, you lose all training, if there are classes you don't get to go.



Another, reflecting on an injury in his training, observed:

When you get injured you don't tell because you don't want to be categorized as someone who is not physically fit, as someone who doesn't follow through. Because the other guys who are fit are depending on you to have their back. No matter what people say you're not with the gang anymore, you're someone who doesn't follow through. And you have that stigma.

Stigma: Sick, Lame and Lazy

Stigma and a negative impact on reputation emerged as a third significant disincentive to disclosing injury, whether physical or mental health. Those who sought care were seen as having transgressed a fundamental group value by asserting individual needs over group needs. They put "Me First" instead of "Mission First," and the consequences could be severe.

Nobody ever wanted to go down the medical hole, because as soon as you go down that hole, you know they'll look at you, like "oh you're one of those guys" ...they were all labelled, and I was guilty of it too because I learned it, they were the "sick, lame and lazy" – I'd say that's pretty common across all the services.

And indeed, these comments were present in the interviews with members from every branch and trade.

We all worked together – we went through stuff. I was trusted to have their backs and they had mine. Then the second there's something wrong with you – nobody wants to associate with you. You're a Sick Bay Ranger, MIR commando. You could have an eyeball hanging out but you're lumped in the same category as the freeloaders, the cowards and the malingerers.

One Expert Stakeholder shared how the stigma played out in some of her cases:

The younger guys tend to feel like they're being outcast, being looked down on, for not being able to suck it up and do their job – I had an older guy – getting medically released – say, "I used to make fun of these guys but that's me now, I used to ride these guys so hard, and now I'm the guy who's too broken to keep going..."

Another Expert Stakeholder observed:

They're DEFINITELY the butt of jokes – they call them "chit riders" – especially in the combat trades... they joined the infantry to shoot guns and do stuff, and now they watch their buddies while they sit in the back and peel potatoes...it's hard for them, mentally, to be sitting around doing those jobs, not what they signed up to do...that's hard on their mental health. They've been going through that kind of stuff for probably at least a year before they see me – they're pretty disgruntled, frustrated, upset, they're often done by the time they come and see us.



One of the Expert Stakeholder from another group noted:

Most of our long-term physical (cases) have a mental health component as well, I would say over 90%. This is what happens: those who join the military, want to be in the military – so they don't want to get out typically... then all of a sudden they have an accident and develop a back problem or a knee problem... first thing, they try to hide their problem, because then they won't get to deploy – or they won't get opportunities – and then their pain gets to be so much that they can't do their job properly – or they need to go on sick leave, and because it's such a high operational tempo, they start to have problems with their co-workers, then their supervisors, and mental health problems just develop – and yes, self-medication is totally in there too.

Leadership

As a prized cultural value, the stoic suppression of injury or illness is an expectation internalized through training and normalized by the group culture. Leaders are raised up through the same culture and therefore, in some cases, also struggled with those who admitted to illness and injury. One of the Expert Stakeholders observed:

The leaders with that mindset of suck it up, they really are preventing members from seeking treatment. That demographic that believes that injury is in your head and I've served for many years without seeking help and I'm broken and still going.

One participant talked about his sense of displacement once he was no longer seen as operationally fit.

So, the attitude of the military is, we love you, we love when you're giving 100% – which I experienced, but the moment you have issues, there's something going on, there's almost that hand washing effect, that's what it felt like, and I was powerless, I really felt powerless over this particular thing.

Sometimes the attitude and behaviour of the immediate Chain of Command set the tone for how the ill or injured member would be treated by their peers, and also reinforced the cultural norm of stoic service, ensuring that others would hesitate to step forward. One of the participants talked about the Chain of Command in his unit:

The unit I was at before used to demean anybody that was sick. Like, I work in a very high security zone – so outside the zone, it's all oh we support mental health, but the minute you got into that zone, it was very, very negative – a lot of bullying, a lot of belittling...the Chain of Command would always refer to (the ill and injured) as crybabies, they were whiners, they don't get what they want, so they're using the system...like that was senior ranks saying that, in front of EVERYBODY....So anybody that was ill and injured, they want to go get help, but they wait until the last minute when they're broken.



Another participant related:

I'd see someone I know at Tim Hortons and I'd wave to them and they'd kind of look away because they can't associate with me because I'm on my way out because I have PTSD, because I'm weak. One of my last days I was called out by my Sergeant Major in front of my squadron, calling me a malingerer, a piece of shit, that I'm in it for the money. Talking to me like that in front of 120 guys. When I tried to respond, he told me to call him Sir and started to come on board me.

These experiences were also referenced by several of the Expert Stakeholders.

The culture has changed a lot. But we see certain units where we get a lot of their people coming through the door and we heard that the base was having a lot of issues with certain managers. Just like any workplace there can be bullying and harassment, there are good and bad managers, but when you're in the military you have a lot less freedom or recourse.

There are Chains of Command that think soldiers are faking it. A lot of times these folks with the mental health challenges are difficult to deal with so they've already ticked off everybody in their Chain of Command so they don't want to do the member any favours even though maybe it's not the member's fault. The members themselves may also be embarrassed to let their team down. So, if they're not hauling their weight their buddies have to pick up the slack.

We see a lot of people being released for mental health reasons. And these mental health reasons are not from fighting the Taliban. A lot of these are from perceived abusive Chain of Commands, abusive supervisors. If you talk to the Chain of Command you'll get a completely different story. We're just directing people to do their jobs and this is just a weak individual.

Even the systems set up to help members transition successfully were not immune from leadership issues that left members feeling discarded and betrayed.

The last time I went to the JPSU unit to sign out, they couldn't even be bothered to look up from their desk to say thank you for your service, goodbye. Not a handshake, nothing. And my husband is standing right there. He said in all my years I've never seen such a lack of professionalism, a leadership failure. We witnessed it.

A number of military participants identified leadership conflicts and a sense of betrayal as among the most difficult aspects of their end of service and transition adjustment.

It's reasonable to believe that the PTSD was triggered by the nonsense administration that I had to deal with upon my return that did not give me the space and time to heal as a natural process. You go to Afghanistan, you shoot someone, you pick up body parts. But when we came back, we were treated like shit. I was transferred and my new Sergeant made me report to his office every half hour and stand at attention. Eventually I snapped. I snapped upon my return, not because of the war. I tried to raise



flags but I was unknown there. No answer from the CO. I lost four of my friends to suicide and I was next. I was fearless of that too. I was just in so much pain and I wanted it to stop.

Similarly, another participant spoke about the impact of her direct leadership.

I feel a bit betrayed by the system – I think that’s one of the hardest things. They say that PTSD can be caused by a betrayal of the belief system, and I held some pretty strong beliefs about the system that may have been incorrect. Coming back and working for a bully, being completely devalued by a system that I had fought for and had given my best years to and given my sweat equity to, that certainly contributed to my PTSD.

Another commented:

I don’t believe in totalitarian leadership. There’s a place and a time and they say that between the QL3 and QL5 courses, which are the leadership training courses, those are the times to play the game. But my perfect world, my vision doesn’t include humiliation and disrespect of individuals like I experienced in the military. If part of who has harmed you is the leadership itself, a room full of military personnel can be a trigger. It took me five years to be able to go back on base.

It should be noted that although these challenges were frequently reported, they were not the only story. There were also numerous stories of supportive Chains of Command. One of the Expert Stakeholders felt that the direct Chain of Command was a key determinant of well-being and adjustment to transition.

There’s a lot of excellent Chains of Command out there and it makes a difference. Those folks seem more confident to make a go of a second career.

Another Expert Stakeholder concurred:

If you have a supportive community that you belong to and if you have a supportive command all of these things assist your resilience and support your transition and those that don’t have that may get lost and probably need assistance in trying to figure out what comes next.

Consequences for the Ill and Injured

Whether due to a desire to support the team, fear of loss of opportunity or reputation, or fear of stigma and public humiliation, the cultural and social delegitimization of injury or illness emerged as a recurring thread through the narratives of the participants and was echoed in the examples given by stakeholders.

Stakeholders’ observations suggested that those who complied most closely or for the longest with the stoic imperative, paid a high price for their compliance and loyalty.



A lot of people don't believe in mental health injuries and then they have one. That's a big proportion of our case load. And even if it's a physical injury they often don't believe in seeking help and as the physical issues are exacerbated, they often develop mental health issues adjusting.

The ones that ignore situations for prolonged periods, they tend to be more complex files that end up in integrated transition planning.

We see people who have ignored their mental health to the point that their family has broken up, there are financial impacts. So now it's not one issue it's multiple concerns and it's hard to start focusing on recovery when you don't know where to start. We see that often.

Despite stakeholders trying to intervene, the cultural imperatives proved too compelling for many service members. An Expert Stakeholder spoke about the dilemma, noting:

Us telling people to get help early because it will extend their career? I'm not sure they're buying it. And the difference between the people who get medical treatment quickly and the ones that ignore it and carry on for years before treatment, is significant. Those that ignore their issues and delay treatment in the end are often the ones who we see getting assessed as more complex cases at transition.

Another Expert Stakeholder also notes that the lack of acceptance of their own needs can complicate transition.

They've been deemed unable to meet Universality of Service requirements (UOS), they're not going to be continuing serving yet they want to. And there is denial and they are challenging the Chain of Command every step of the way and saying I want to stay. That transition is going to be rough and they're going to push back on everything you're doing which is going to lead to release.

For some, the cultural imperative to soldier on and not complain also had lingering consequences after release. One Veteran participant talked about a lengthy ordeal proving his case with VAC. He had eventually succeeded, but his story was instructive. He noted:

In the end I didn't complain enough at the time of my injury and it wasn't documented. And because I released voluntarily, rather than waiting for the medical release, I didn't get the SISIP program benefits. That actually happens all the time.

This recalls the comments of the Expert Stakeholder, quoted previously, who noted how concerns about limiting opportunities affected member's disclosure to CAF medical staff.

They didn't report in the past and they're not supposed to talk about that, and that includes physical problems... ...very few military people will be really honest with their doctor.



For some, the sense of betrayal after their injury, combined with the need to fight for benefits after release, resulted in an angry determination to make the system pay. In one of the interviews the interviewer asked a highly decorated, thirty-year Veteran, “You’ve talked about the necessity of moving from mission first to mission me. What fuels that shift for you?” The participant’s response:

Anger. A whole lot of anger. What am I now? Trash. If I was a Veteran the military would take care of me. What I am is trash. It’s been a bitter ending to a sweet journey. I may not be employable but I have a full-time job – fighting them.

The military cultural backdrop of Mission First, with its values, expectation and challenges, emerged as a dominant theme in participants discussions about their transition challenges. Far from being an innocuous cultural artefact, the cultural context of these members during their transition was a significant source of conflict with peers, and a powerful, preoccupying, and overwhelming source of internal conflict.

These stories suggest that entrance and belonging to the military family is contingent on performance – on ongoing performance. With belonging comes status as being part of the elite, elevated from the civilian life they left behind and privileged with more meaningful and impactful work in the world. They are the few – “we happy few, we band of brothers.”

With illness or injury, ongoing performance may become impossible, and belonging will come to an end. Universality of Service requirements (that all members be fit and deployable) inadvertently reinforce the contingent nature of belonging to the military family. Training and enculturation taught members that their place in the military family made them special – it became their identity and foundational to their self-esteem. The loss of that status and place was bewildering for many, devastating for some. For many, loss of belonging brought stigma. For most of these interviewees, exit from the military meant they lost the opportunity to contribute to the work that they had learned and believed matters most.

Within this context of lost status, stoicism and stigma, military members needed to attend to their health, negotiate rehabilitation needs and/or adjust to significant illness or disability. At the same time, they must also think ahead to the future, their practical responsibilities to family, their financial needs and a new identity to come.



Starting Over: Denial and Delay, Confrontation, and Identity Renegotiation.

Narrative Theme Description: Once members receive their official disclosure package with a confirmed release date, the clock starts ticking towards transition out of the Forces, and brings with it a series of administrative tasks and a need to plan for the future. Some members remain in denial that the end of their service is coming, and sometimes information is delayed or lost in the system, so that key opportunities to prepare for transition are missed or delayed. Others experience significant anxiety or struggle to know where to start. Interviewee's accounts suggest that, in the military, "I am" seems to be closely linked to "I do", and, as a result, loss of role is synonymous with identity loss. In *Starting Over*, therefore, finding a new role and purpose becomes a primary task in letting go of the old, and negotiating a new post-military identity.

When it becomes clear that military personnel are no longer able to meet the Universality of Service requirements, they receive a "Permanent Category" (PCAT) medical classification and the focus of support services shift from return to duty to transition out of the Forces. In the normal process, members may proceed through a series of Temporary Medical Categories (TCATs) before receiving a PCAT designation and their disclosure package with their release date and details of benefits. At this point, for most, the countdown starts towards release, and the struggle to accept and adjust begins.

An Expert Stakeholder explains:

When we're working on return to duty, and it starts to look like a member is going to be transitioning, we switch the focus from benefiting the military to benefiting themselves. It's more member focused at that time and they have to realize that they have to put energy into themselves and no longer into their career development in the services. The focus is on retention until it's medically clear that they can't go on.

Complexity is the Norm

Developing a coherent plan to "benefit themselves" is complicated by the fact that military to civilian transition is a highly individualized, multidimensional experience. An Expert Stakeholder observes:

You get such a variety of individuals coming through these programs – Some individuals come through and it's purely to help them get to the point of where they can function, just functionality, they may not necessarily ever be able to work again, and you're looking at benefits and allowances to financially support them, and eventually they'll be off the program because they've gone as far as they can in the rehab. For other individuals we look at a hierarchy of return to work possibilities, looking at the barriers



to return to work – chronic pain, mental health, for examples – it depends on the individuals – there aren't cookie cutter solutions.

Another Expert Stakeholder notes:

There are an overwhelming number of variables (for each individual client). That's why we do multiple interviews – there's no way you can cover all the variables – especially if a person has got a lot of moving parts in his life – you can't talk about it all in one day.

An Early Start to Planning

The highly individualized, complex nature of personnel's release circumstances and needs makes it unsurprising that a consensus emerged in the stakeholder interviews, that an early start to transition planning is key. Members have much to do, and an early start to transition planning increased the likelihood that members could access programs, complete training and allowed more time for adjustment. An Expert Stakeholder notes:

Earlier access is key. If a member knows they might be medically released – there's two things about seeing a transition specialist earlier. If you understand the timeline – if you understand the process (you're going through) what you have to do – all the benchmarks – that takes a lot of anxiety away – you feel more comfortable about the system taking care of you and you're not worried so much – and when something pops up, you know exactly who the person is you go to see.

Another Expert Stakeholder Manager has a similar observation:

The earlier they start and the more a member knows that they have help, and what to expect, the better they feel about the process. And the better they feel about the process the more likely they're going to think about their options and perhaps explore education or other work. If they're wrapped up with the bureaucratic process of getting out, they're not going to have the energy to think a whole lot about their own next options – you can only think about so much at one time.

Where there were delays in the process, for whatever reason, there were sometimes costs to the members. Those who cannot or do not refocus and start to make their plans and arrangements for their future early enough, may miss out on key opportunities and benefits. An Expert Stakeholder offers the following example:

Readiness is not necessarily related to their release date. I think in the end nobody is really ready. I have one who couldn't get himself ready for school, he didn't know what he wanted and then he was too late to apply and then there was a waiting list. The SISIP benefit ends after two years so the clock starts ticking as soon as they release and unfortunately some of them may just not be ready. If we could start them earlier we could help more of them through.



Another Expert Stakeholder reflects on a similar case:

We have one young girl – with young kids at home, one a baby – fighting to stay in so she can take a 2-year course to get retrained. But her mental health is so bad, her clinician is saying she needs another year of treatment, and we don't have any mechanism in place to keep her in – and she is not able to focus enough to go to school – we have so many cases like that.

Denial and Delay

For some members, the first step – accepting that their military career is coming to an end – is a shift they are neither ready for, nor prepared to make. An Expert Stakeholder estimates, “25-30% are in denial. They don't want it, so they don't look at it.” He continues:

They don't want the change so they don't look at the change. They say, I'm not going to engage in anything because I know the military is going to hold me. You come right out and tell them that that isn't going to happen. I've dealt with a number of clients over the years where all of a sudden, they're sitting there on the day of the release and they say, what happened, they let me go and they panic.

Another Expert Stakeholder relates the same experience, saying, “Some of them are surprised when they're getting released, they didn't know. Whether they didn't hear from their physicians or something. But some of them are just not accepting of their fate”. Another Expert Stakeholder from a different group spoke about how “hope” could keep members from accepting the coming change and engaging in the preparation they needed to do until the last minute.

We're often looking at a two, two-and-a-half-year window. And a lot of people are still fighting. We do return people back to active duty from a PCAT in some cases, so nobody is even thinking about transition until they get to the last 6 months to a year before they're being released. They're hoping that they're going to be returned to work so they're not even thinking transition. Then all of a sudden, bang, they get the bad message from their doctor and the system and it's official – they're going to be medically released. Now the Base Personnel Selection Officers (BPSO) are too busy or there might not be a BPSO. And they're thinking about family, money, kids, where they're going to live. They're thinking about all of these things on top of still dealing with the injury or illness that is a primary concern. Plus losing the job they love. That's their career and they picked that job never thinking about leaving. So, it's totally different than a voluntary release. These people have no choice. Once they finally get a release message that's when they can see a VOC rehab counsellor at SISIP and that's way too late, way too late.

Another tells a similar story, noting, “I have people who have been working to get a retention for three years and it's come to the last 6 months and they can't do it.”

Interviews with released members confirmed that some military members did remain certain that they would be able to recover enough to return to duty, right up until their release. Some felt that their PCAT was



unfounded and were sure that “someone in the system would realize this doesn’t make sense,” and they would be retained. Other members gave different reasons for their confusion and surprise, sharing stories about systemic delays and missing disclosure letters and other paperwork:

My disclosure message was missing for 10 months – that’s unheard of – when I tell people that, they go, what?! How could something so important, the message that says we’re going to release you, go missing? I should have received it and had 15 days to respond to it. That comes from Ottawa, and if they hadn’t seen a response, on, maybe, double that 15 days, they should have contacted (my base) and followed up, saying, where’s this disclosure message and why hasn’t the member signed it? It was missing, within my base for 10 months.

Members also suspected that, in some cases, retaliation from leadership was at work:

I’ll never know the real reason that disclosure message went missing – I mean, they said some Major had it and he was posted out, and I’m supposed to buy that, but I mean...the way they are over at that base, there’s a lot of retaliation involved, and retribution, and I think to some extent there’s some of that going on.

Administrative Burden

Once begun, the challenge of navigating the bureaucratic process while thinking about the future was much on the minds of both the Expert Stakeholders and the releasing members. Both groups spoke about the extensive paperwork involved in getting out. One member laughingly observed, “there’s much more paperwork to get out then there was to get in!” Another member shared:

They need to streamline this paperwork - they say it’s cumbersome, that’s an understatement – I mean just trying to fill out the paperwork for my vocational rehab while I’m serving the 6 months prior to, that in itself is a MASSIVE undertaking. You have to get signatures, and sign off by CO’s and doctors, and so these are all appointments you have to be making, so moving from just that one thing, and then the whole release procedure itself. Now somebody that’s got a mental injury that’s medicated to the hilt, can’t function, let alone navigate all this stuff that needs to be filled out, you know, I mean, I had checklists upon checklists, I had a board in my kitchen for checklists.

One of the Expert Stakeholders noted that, “there’s a lot of work that they have to do, and for this process, you’re on your own to figure out the forms and what you’re going to do with your future.” A second Expert Stakeholder shared, “I tell all of them right away to get themselves a fan folder or other system for organizing all the paperwork they’re going to be going through.” Another Expert Stakeholder shares:

They’re very busy and there’s a lot of paper work. Health care, get their pension package filled out, a hundred forms related to that, go house hunting so they can move. It’s such a busy time leading up to release that it’s hard to focus on what’s next.



An Expert Stakeholder from a different organization in the system comments that becoming stressed and overwhelmed in the process is “definitely an issue” for members.

We often give them an action plan when they leave our office – here’s what you need to do within a certain time frame. And a lot of them who are unwell or depressed or have memory issues or difficulty coping – their functioning levels are lower and we’ve given them quite a lot to do. I’ve had very, very functional high-ranking NCO’s who have said, I am so overwhelmed with this, I don’t know how, if I am overwhelmed with this, how are my subordinates who are really ill, how are they dealing with this. A lot are just trying to cope with their own health issues and they also have a lot of work to do to leave the military.

Lost and Overwhelmed

Feeling stressed and overwhelmed leading up to and after release was a frequent topic in interviews with members. Some experienced a crisis in confidence, afraid to make the wrong decision about some aspect of their transition, while others simply didn’t know where to begin in thinking about a future outside of the military. An Expert Stakeholder shared this observation:

Most of the people getting out, their pitcher of water is already full. Their anxiety level is already at peak. A lot of them have some kind of mental health problem whether it is PTSD, anxiety coping disorder, even learning disabilities or ADHD. Almost all of them have some kind of pain. To try to get these people to think about, and to be optimistic about the future, and to be excited about that new chapter in their life and not to be afraid of it, can be challenging. Some of them joined the army because they didn’t know what to do and now they’re being kicked out, and of course they still don’t know what to do.

Another Expert Stakeholder, looking back on her case load of years of transitioning members, reflects:

The ones that struggle the most are those that have mental health issues or very restrictive Medical Employment Limitations (MELs). The majority of the members we see have mental health problems, I’d say about 70%. Anxiety is a huge component of what we see. And that is one of the conditions that we struggle to assist members with because they get anxious over any little change and they struggle to adapt to change. That’s a huge road block because when they come to us, it’s all about change. Whether it’s the main reason why they’re being released or just a side product of other issues, it affects their stability.

A third Expert Stakeholder, also reflecting on who struggles most, shares:

The ones with the more serious mental health injuries they can really struggle to make a plan, and keep to a plan. Some of them start school but they can’t do it. Or they keep putting off their start time and I wonder if they ever got going. Sometimes there’s childhood issues that they haven’t ever resolved that



come up with all the disruption. The PTSD cases are just so overwhelmed, they shake and they cry in the meetings, and we try to help them out, but they're so ill – and then a lot of them are permanently incapacitated, so we put them on CPP disability or whatever, but we're still not really transitioning them to a hopeful type of situation.

Another Expert Stakeholder describes the initial impact of receiving news of release for many: “Half the time they're so scared and worried about their future, they don't even know where to go and how to start.” She continues:

When someone joins the military, they've got an occupation, they're really taken care of their whole career, you're posted here, you're going there, you've got an order move, you get really great medical treatment, dental treatment and all that – whenever you need it, access to specialists way faster than anyone else, and then – bang – all of a sudden they're going to be medically released – so this is a problem – they're not even thinking transition.

One recently released soldier says, “I don't know what I'm going to do next. I thought I would just do my career, do 25 years.” One of the Expert Stakeholder shares:

I see Master Warrant officers, Chiefs with 35 years in and more experience than you can imagine, have been involved with more difficult combat and war experiences, and they don't know where they're going to get next year's pay because they have to go.

Length of Service Impacts

The task of finding where to go and how to start may be complicated by a member's length of service. For those with long service, there may be little social network or experience of life outside of the military, making the cultural gap wider to bridge. For those whose service is shorter than expected, there may be regrets for goals not accomplished, and tangible difference in benefits when major landmarks have not been reached such as ten years for pension or twelve years for service recognition.

An Expert Stakeholder made these observations about the challenges for those with many years of service:

We have people who have served for so long they're almost institutionalized and they have a hard time believing that there is life outside the uniform. For their entire career, they're told where to report, where to live, what to wear, and their lives are dictated for them. They have minimal civilian clothing and they have no idea how to dress in a work placement. It's not uncommon to see fifty-year-old members who don't know how to present themselves outside of the uniform.

Another Expert Stakeholder noted how a medical release impacts those with long service in the military, observing, “A lot of people definitely have a sense of loss of identity with the loss of the uniform”. She continues, noting:



Especially if they've served since they were very young, it's like leaving their family. It's a very strong connection, good or bad, so that's a huge adjustment. There's a loss of career, and there's a loss of family. We have people who have never actually lived as independent adults outside the military. They left their parents' house and joined the military. And then we have this expectation that when they leave the military they're going to know how to live independently. They've never made their own doctor's appointment, never had their own credit card, applied for a loan, all the things that we take for granted.

A member of 25 years service recalled the impact of turning in her kit, marking in a final and tangible way her passage out of the military:

When I turned my kit in, that was a defining moment. It was heartbreaking to turn my kit in – since I'd had it since I was 17! And now I'm 43, I've never done ANY other job. I'd babysat, as a teenager. When I turned my kit in, I was a mess, I couldn't sign the stuff, I was hyperventilating, I was trying to not cry – I felt, like, my god, this is insane...yeah, I feel it a bit again now. I didn't want to be kicked out. It wasn't my choice. I had to convince myself I hated the army just to cope.

In contrast, an Expert Stakeholder had these observations about those who released much earlier than they expected to:

The young guys who only have 4, 5, 6 years struggle for different reasons. The loss of what COULD have been – they joined when Afghanistan started, with hopes of going on tour, to war and making a difference, "I had all these hopes and dreams for my career," and they didn't get to do that...so here they are releasing, and they feel this emptiness of – "I didn't accomplish in the military what I set out to do"...it's a sense of loss, but a different sense of loss from the older generation. I hear them say it like this, "here I am, getting kicked out, getting thrown to the curb," that's how they feel – they really feel like the military has pushed them aside, and they're getting the boot."

One member spoke about his regret that he was released three months before his ten-year mark, which would have given him additional financial supports while he found his way in a new civilian career. With a family to support, and many years of work left ahead of him, the fact that his injuries prevented him from continuing to do the job he loved, and was trained and qualified to do, presented a daunting transition challenge.

I have to write something in the CV. So, what am I supposed to write? That I can lie down in mud for three days and wait for information that is probably out of date by the time I retrieve it and it takes two days to get back. Do I put that in the CV? To work where, Michaels?

Limitations due to Illness and Injury

Many of the stakeholders spoke at length about how members' illness, injuries or ongoing disability complicated the process of finding a new career or contribution after their military service. An Expert Stakeholder gives this insight:



They want to do something after they leave but they just don't know what to do. It's like coming out of high school and you don't know what to do. If you had a physical occupation and now you're restricted to basically clerical type work, not everybody is geared up towards administration so what do you find that might be of interest? So, they're adjusting to getting out, but also need to change what they're doing day to day for their occupation that will give them that sense of value. The military gave them a sense of value, and now because of their MELs they can do very little, their sense of pride may be reduced by the perception that they're doing a "Joe job." Some people may be okay with that but for many they want to contribute to society in a meaningful way and they don't know where to start.

An Expert Stakeholder speaks to the same issue:

Part of the barrier is their diagnosis. Maybe they can't do what they were trained to do because of musculoskeletal issues. So, they can't do their full-time job and they still need to keep busy and feel good about themselves. Others are psychological – PTSD, addictions, that's a barrier – how are they going to plan transition, can they stay in school, do they have cognitive issues concentrating, there's a lot who transition who can't go to school. And then there's, what job is equal to what I did here? They can't think how to transfer skills. What are their positive strengths? They want a job similar to what they have been doing but they may not be able to do that job physically.

One member, recently released, shares his fear and self-doubt around starting a training course to qualify as a paramedic. He was receiving partial benefits for his head injuries and was afraid to jeopardize his financial security by “forging ahead” in case he was unsuccessful:

I thought about doing my EMT course but I'm so afraid of failing. I have trouble just getting out of bed and out of the house. If you say yes, I'll do the course and then you fail the course, then they'll completely cut you off. And then you don't have the little money that's coming in.

Sometimes the first attempt to transfer skills and interests into civilian sector employment is unsuccessful and members become disillusioned and lose faith in themselves.

A lot of our people, they want to become, for example, a heavy equipment operator and go make a ton of money in North Alberta – that's the idea they have – and they take the course, and then they find out it's too physical. They've had an injury, but they don't understand they can't do it – and that's horrifying. They want to be an electrician, a plumber, but they've got a back problem, they can't bend over – we see so many terrible stories like that, over and over, because we're not actually looking at the important things... These are the ones that really struggle. And they don't have a lot of experience sitting and defining and talking about who they are as a person. Their identity is based more on, I do these things versus I am these things.



Another Shares:

It's a loss of identity. "Everyone has told me what to do before this," and they are just at a loss. They don't even know how to start thinking about planning and what they would do next as a second career because they always thought they'd be in the military for 35 years. Their life plan has changed and how do I adjust to that and it's so much their culture and identity being in the military. If your only identity is your work then how do you change to doing something else?

Impact: Loss of Identity with Loss of Role

"If your only identity is your work then how do you change to doing something else?" This turns out to be a frequently asked question. As noted in the Mission First theme, earning a place in the military family imparts status and the privilege of contributing to more meaningful and impactful work in the world. With illness or injury, both belonging and the opportunity to participate in this work will come to an end. An Expert Stakeholder notes, "You're dealing with members who are being forced to leave the military – it's not their choice and it's based on the fact that they're no longer useful". Training and enculturation taught members that their place in the military family made them special – it became their identity and foundational to their confidence and self-esteem. In the face of this loss of identity, place and role, some military personnel struggle to regroup.

An Expert Stakeholder made this observation about the struggle to separate identity from role:

Who am I if I'm not a soldier, navy or air force person? It's a daunting question for many of them. The military tells you who you are. Who you are and what you do are so closely intertwined in the military.

Her comments reinforce the linkage between what you do and identity in military enculturation. "I do" equals "I am." When you are in the military, identity is conferred and affirmed by the social group. It is socially negotiated, not individually claimed. In essence, you are not a soldier unless your peers affirm that identity based on your current "soldiering" ability. Members releasing under a 3B category are no longer affirmed as part of the military or as having a "useful" place in the group; they cannot stay. A second Expert Stakeholder also notes the linkage between role and identity:

You have a whole group of people who are medically releasing who also are having difficulty with, what is my new normal? Where do I fit in in society? Where do I fit in with my family? What are my goals? What is what is my mission? I no longer have a mission. I no longer have my Chain of Command saying here is the hill we're going to capture. Either figure out how we're going to capture it or stand by for instructions. Having a mission gives a sense of purpose. There's that loss. Even if they're happy to be leaving the military, they still have issues with that role definition. Who am I? What do I contribute to society? Where do I go from here?



In *Starting Over* then, finding a new role and purpose becomes a primary task in negotiating a new post-military identity. The preferred military identity is no longer accessible, and, in the absence of a readily defined and acceptable post-military identity, members are left to try and define an identity and role for themselves outside of any social group. After training and enculturation and years of service, they do not really associate with being a “civilian.” And, whereas the identity of “Veteran” might have played this role in past eras, it was not an identity comfortably claimed by many of the interviewees. A member, released two years previously, talked about his challenges in defining who he was today, and what he hoped to gain from attending the program:

I don't consider myself a Veteran. I did seven months in Afghanistan, but my grandfather did three and a half years in Europe in WWII – he was a Veteran. That's why I'm here, to figure out my new identity. I don't know what I am. That's who I used to be. I was a Sapper and I loved my job. I was good at my job. And now I have nothing. It's what it seems like. I don't know who I am now.

A recently released member articulates the place of her past military work, her search for a new identity, and her attempt to “validate” that identity for herself:

I was passionate about my work in theatre. That, I was passionate about. So now what am I passionate about? What are my central values? I don't know who that person is anymore. I know who that person was at eighteen, and then I know who that person was within the defined values in the context of the military setting, but now I'm kind of lost. I'm looking for a way to give myself validation. It's amazing how much of your identity is related to wearing a uniform and your rank. Now I'm a parent, I'm a caregiver and I'm a student. Beyond that I no longer do my profession. Those are all roles, that I do in relation to others. Beyond that I don't know who I am. I feel like I'm on a treadmill doing stuff for everyone else. I'm here to take care of others.

A number of Veterans recounted stories of “keeping busy” serving everybody around them in the early days of their post-military life, replacing lost identity and role with a different kind of selfless service. One shared, “I was always doing things for the family but I kept leaving myself behind.”

I don't know what brings me joy anymore. I fill my spare time with chores and looking after other people. Currently my purpose in life has to do with other people and I have no purpose for myself.

Another member, contemplating his role and purpose after release, also raised the subject of loss of sense of self:

You would think that your core values should stay the same. But I can't say that in the military. They did influence me and some of my core values aren't really mine – they're what they told me they should be. I've had to put away a part of myself. Anybody who has spent a number of years in the military will have that issue. I need to rediscover myself.



Another member adds this observation about values and sense of self:

You're eighteen, you don't know what your values are. They tell you. So, you lead with honesty, integrity, loyalty, obedience and what they tell you are your social norms. But never in the process of developing you as a leader do they make you investigate your own social personal values and beliefs and what your priorities are. Now I'm out, I have no idea who I am or what I'm going to do when I grow up.

An Expert Stakeholder speaks to the process of exploration and self-discovery that members need to embark upon to think creatively about self and service in post-military life, and the lack of supports in that area.

Physically you're never going to run a marathon again. It's not possible but there's something else that you'll be able to do that will bring you equal meaning. They need to buy in to there's other components to who you are that you can focus on – you're not just military. The medical system isn't there to help you replace that meaning.

Another Expert Stakeholder:

There's a lot of people who don't have a clue and I don't see anyone in the current resources who really takes that on in detail or in a personalized way. For the ones who don't know what to do for work I think there's a gap. There just isn't enough to refer people to who are really struggling. They may be prepared intellectually, but not ready for the emotional impact. I wish there was somewhere that could prepare them for that so that they could be guided to a place of recognizing that they do have a purpose after release. They've lost their identity and they're not recognizing what their skills might be. There's lots that they could do but they just don't know what to do. When they don't know what to do, I don't know how to help them. We have mental health services but their roles are not really directed towards transition.

A third Expert Stakeholder concurs:

We need to build them back up and have them appreciate what they're bringing. Their military career might be over but they have so much more. If they don't know what their career path is, they don't know what to research. They haven't wrapped their mind around that whole vocational piece at all. There's nothing for most people until you get your release notice and then you have 6 months to piece it together.



System Overload

Narrative Theme Description: Throughout the system, Case Managers and military personnel alike commented on the lack of resources, system overload and resulting systemic barriers to rehabilitation and transition supports. For military leadership, a “do more with less” budgetary and human resource climate creates management tensions around prioritizing the needs of ill and injured personnel versus supporting the mission, tensions exacerbated by the demands of a high operational tempo. Likewise, Case Managers were stretched thin by growing caseloads, and expressed concerns about diminishing quality of care. Case Managers also voiced their frustration over their inability to stay informed about frequent policy and service delivery changes in their own, and in other agencies, and a lack of information and coordination between agencies that contributed to service duplication and service gaps. System overload often translated into frustration for service users, who either couldn’t access existing resources or fell through gaps left by lack of coordination or lack of human resources.

Resources Prioritized for Operations

Stakeholders and participants noted that pressures from under-resourcing and high operational tempo were stacking the system against the military leadership trying to support medically releasing members. Middle management personnel were stuck in the middle, struggling to perform and also create a people first workplace. An Expert Stakeholder observes:

It’s a balance because the job has to be done. The Chain of Command has to balance between getting their operational mission done and also supporting their troops. So sometimes some supervisors go too far down one side than the other. Creating a “people first” workplace is harder to measure than operational outcomes, so it’s the first to go.

Many of the participant interviewees had been in leadership positions themselves and testified to the human resource shortages and the challenges they presented to task completion. One senior NCO recalled:

I remember doing 4 months straight of 15-hour days...doing my job plus my boss’ job, and whenever we were short, I’d cover people – doing 4 people’s jobs. I had to. I asked for help and got “figure it out, click.” I’m pretty sure if I hadn’t figured it out, I would have got charged with something.

The Chain of Command would sometimes get involved when they wanted to retain a member in their unit after a decision had been made that the person had to go. An Expert Stakeholder recounted the following exchange:

Here’s a guy with severe PTSD. He received his PCAT recommendation from his doctor. A couple of days later his Chain of Command are here. Times 2! His Chief Warrant Officer and his Officer, both at the office, fingers on the desk saying, “what do you think you’re doing releasing my member?” They



went, “you’re not releasing this guy. This guy is one of our best guys.” But he had to go for his own well-being.

More often, at least for these interviewees, shortages meant that a member’s transition needs took second priority to operational needs. An Expert Stakeholder spoke at length about members’ struggles getting posted to the JPSU where they could focus on rehabilitation or transition tasks rather than on operational roles.

Sometimes they want to be posted to the JPSU because they’ll have more time to focus on their own situation. But a lot of times the Chain of Command doesn’t support their posting here, or Ottawa hasn’t supported their posting. Even right up to the end, even during their last six months when they’re able to do the vocational rehab program for serving members. The last six months full time, the member can ask their Commanding Officer if they can do an on the job training or schooling fulltime. I’ve seen requests go up to Ottawa to post the person to the JPSU and they’ve been denied and they were told to keep the person on their establishment. The Commanding Officer wants to post the person to the JPSU so that they can have someone who is fully fit posted into that person’s position. The reality is that the CAF is so under borne at the moment that there’s a lot of vacant positions in the units so the career manager doesn’t have someone to replace that person anyway. So, they come back to the Commanding Officer and they’ll say, there’s no one to replace them so if you get 10 hours or 20 hours of work out of them per week keep them.

A different Expert Stakeholder shared her impression that the emphasis and higher value put on operational versus transition tasks also applied to medical and transition services:

We’re not really valued in primary care because they’re focused on getting them better and back out to go serve their country. And here we are not focused on that at all. Our goal is to get them to function as a human being once they’re out of the military. The clients that we’re focusing on, and they associate us with these clients, we’re a drain, we’re a burden on the system and they just want them out so they can focus on healing the ones that they can get out the door and back to work.

Another Expert Stakeholder referenced the data on her service list to provide this assessment of their ability to support transitioning members:

Right now, of all the people being medically released, only about 10% are posted to the IPSC – 10% – if that. There are hundreds more in this region, mostly on permanent categories, that we can’t get to for early transition because their Chain of Command will try to get every ounce of work they can out of them, because of the shortages and the high occupational tempo, that’s the sole reason, to get mileage out of them. They can’t retain operational functionality without them.



Caseloads

Despite the estimate that only 10% were being posted, Service Managers in all four groups of Expert Stakeholder were already concerned about their resources being stretched too thin. An Expert Stakeholder summarized the current status of her work as follows:

We have a really good rapport with our members, but right now, with this caseload, I don't feel that we're giving them the quality care. Burnout is a serious concern in our organization. We're really spread thin. Google us on the CBC and you'll see that this has been a systemic issue for many years. The members who could be a little more monitored, we don't have the opportunity to do that.

Another Expert Stakeholder gives the figures, noting that “it's recommended to have sixty people but right now I have a caseload of over 75 plus another portfolio, and my colleague has over 90 members”

Caseloads were mentioned as stressors and sources of significant concern for quality of care across all stakeholder groups. Another Expert Stakeholder described the situation:

Our national office and our professional work standards, they've researched and set an upper limit that says that we shouldn't have any more than fifty-five clients. Well we have seventy and have had more. So, we don't have the staff to do the work that's coming in the door every hour and as a result we're stressed and overwhelmed. Burnout is a big part of this job and we're dealing with PTSD stories every other hour as a lot of them are getting released for that.

Case Managers also talked about the shortage of Base Personnel Selection Officers (BPSO) who play a key role in transition:

The BPSO, these offices, all across the country, are swamped. They're helping people with occupation transfers, they're doing testing, career kinds of things – people want university programs, they're so busy, they actually don't have time. Sometimes they're so busy they can't take meetings so people just don't have access. Basically, members have to go online and do research themselves...And the BPSO's are awesome but it's usually too late to get to see one by the time you know you're getting out.

An almost identical description emerged from a Case Manager on the other side of the country.

Some areas there's no BPSO. Sometimes there's only one BPSO in each area, or for an entire base, thousands of people. Sometimes they're so busy they can't attend meetings at the IPSC. This is supposed to be the first step where transitioning members get support, and they're too busy doing other duties.



An Expert Stakeholder from the final reference group of Case Managers faced the same resource issues:

My caseload is about 55. It's supposed to be a ratio of 25 to 1 but we're not there yet. We have double the caseload than the ideal and then we're collaborating with DND case managers on the identified complex cases as well and then there are the already transitioned members who go into crisis and become complex.

One of the Expert Stakeholders spoke more in depth about how members who had transitioned years before could suddenly take most of their time as “crisis and complex” cases.

If the person releases voluntarily and ten years down the line they are finally coming to terms with the fact that they have mental health problems, they may come to us saying I'm suicidal, I'm drinking and I'm being threatened with losing my driver's license. So, that's pretty complex and that person can in one week take up 40% of your time and there are another fifty people. They were not an Early Transition Service person and never deemed complex by DND yet they become complex and you suddenly have to find the resources for a person who previously never engaged in anything.

Another Expert Stakeholder is clear about the impacts of under-resourcing on quality of care, stating:

My caseload is at fifty however the department's goal is to get us down to twenty-five. If I had twenty-five clients I could do so much better a job for all of them.

Communication, Continuity and Coordination of Care

An Expert Stakeholder talked about how high caseloads, and keeping up with basic patient care, made it difficult to keep up on current services and supports being offered by partner agencies.

It's hard to keep up on availability for certain resources. Like the two-day career transition workshop with the BPSO, where they work on job searching, resume writing and interview skills. It's usually offered once a month but it drops off in the fall because the BPSO is too busy. Also, MFRC is offering a transition workshop I only just found out about. So, we're not even connected to the available resources.

Another Expert Stakeholder raised the same issue:

I think there's a weekend career transition workshop that I'm not kept up to date on. That's VAC I think or maybe SISIP. I'm not kept up to date. No-one tells me. By happenstance we find out. The publication of that must not be great because most of my clients don't seem to know.



This contributed to a lack of coordination and difficulty navigating the system:

All the different people involved... there's many departments doing similar things which makes it confusing for the members.

And again from another Expert Stakeholder:

I don't see a lot of people working together. We don't have a lot of synergy.

Members highlighted the gaps that opened due to this kind of under-resourcing and lack of continuity or coordination. Those who were less vocal, or less clear about what resources to ask for, got less access and attention. One soldier being treated for PTSD told the interviewer:

I got posted to JPSU and they told me to come in once a week to tell them I was alive. I came in the first couple of weeks and they wouldn't have anything for me so I said why don't I just email you every day rather than making the drive and they said okay. So, I sat at home for three months before I got a job placement.

Another member recovering from physical injuries told a similar story:

They say, go away and if anything changes make sure you inform us. I was on sick leave for close to three years and I would go in to let them know about any changes, but other than that you don't hear a thing from them, they don't follow up with you, nothing.

Two of the interviewees found a way around the bureaucracy by voluntarily releasing rather than waiting for the 3B release process to unfold.

The CO said that we were losing too much talent to CSOR or JTF2 and they certainly weren't going to let me go to the JPSU. The Base Surgeon lost my paperwork, the CSM lost my paperwork twice and so they kept making me wait. So, I did up my voluntary papers and I put them on his desk. Well they lost those too. I ended up going to see someone from the release section and lucky enough I had copies of all my paperwork and that was it, I was out. So, in the end I wasn't released on a medical release because they lost my paperwork three times.

Another member from a different branch spoke about his own, similar, challenges:

The system is set up to purposely irritate people so that they'll walk away from claims that they're entitled to. That actually happens all the time.



Transfer to Civilian Care

Transfer of care to civilian health care providers at transition was also associated with long wait times. Shortages of Case Managers and civilian health care providers made continuity of care particularly challenging for some.

It's a bit of a rude awakening going from the military medical system where the wait times are very small, everything is 100% covered and all of a sudden, they're going into the civilian system where the wait times are longer, not everything is 100% covered, my medications aren't covered, not getting physio covered. So, there may be a pay gap and increased medical bill at the same time. Some of the complex care people have as many as 8 specialists to transfer over – if they can find them at all. In many areas it can take as long as three years to find a civilian GP. And a GP is the gateway to everything. VAC has a lot of paperwork and some family physicians refuse to take ex-military patients because of the amount of paperwork that they don't get paid for.

Another Case manager told the same story about problems finding a GP for military members who had transferred out of the military health system.

It can take up to three years to get a GP – there's no walk-in clinics in this area. So, how do they get medications refilled? Insurance paperwork completed? You're walking into physicians you've never met – there are some civilian GP's who will refuse ex-service people, because there's so much VAC paperwork.

A participant shares his own experience accessing a physician once he had left the military:

I've been out two years and I still don't have a doctor. You're being released with physical and medical issues and it takes years to get in the system. Luckily you can continue to see your military psychiatrist if you haven't broken contact. But for medical you're on your own.

Another participant talked about the same issue accessing medical services, civilian side:

I'm waiting on a Medicare card and they won't see me until that. VAC needs the paperwork for me to access benefits but the doctor at the clinic won't fill it in because they don't know me or my history. And then my lawyers couldn't go to my military doctors who have my background, so I have no case to fight for benefits either.

An Expert Stakeholder shared the following case as “not atypical”:

One case was medically released with a request to have a VAC Case Manager and three months later they're still waiting, they haven't been linked to mental health resources and they're still ill throughout this. A lot of these people have chronic conditions, mental or physical and there's a gap or delay in services. If we aren't able to do that transfer of care piece while they're in the military, because we have



limited resources here as well, then they definitely need that support especially while they're transitioning and sometimes there's a delay in getting that type of care. There's an adjustment period. Especially for these people with complex or chronic care issues, they're very comfortable with their health care team and a lot of them depend very much on their health care team. Their case manager, their physician, their psychologist. And all of the sudden we have changed everybody for them and a lot of them have a hard time accepting that "now I have to tell my story all over again." A lot of them have been with these specialists for years.

Despite these shortages and frustrations, participants were often quick to qualify their negative experiences by pointing out that "It's the system, not the people." Numerous stories were also told about the lengths that Case Managers would go to assist members. One member detailed the care and attention that she had received from her Case Manager, giving her high praise.

Every time I went to see her I balled and cried, cause I was like, oh my god, I can't believe I'm being released, I haven't even made it to my 20 years yet - oh yeah, I felt safe with her...she was my rock. She pulled me through that. Without her? I probably would have been one of the people who lost their minds in the MIR. I was on the edge and she knew it...she would call me, she's like, you have 3 appointments this week, you have an appointment with _____, and with _____, and you have to do this, and, when I left her office, she would have it all hand written out for me, because she could see it all in the system. She even called to remind me of the appointment to return my kit.

Another member spoke of her experiences:

I've had excellent case management, excellent support. I didn't sit helplessly. The only thing that has been hard is getting my civilian medical card. The support I got for my release was crazy good. The clerks in my release section, everyone was excellent, but I was on top of it though, I'm a planner. I knew how to navigate it and if I didn't I knew how to find someone to ask.

Another talked about her struggle adjusting and accepting supports and how her Nurse Case Manager helped her through:

I had an excellent Nurse Case Manager when I finally got her - she walked me through everything, even though I had no proof that what she was saying would be true, when I was like so fucked up ...they put some accessibility accommodations in my house, which pretty much gutted me when they were putting those in, and I had refused it and refused it, and she (my CF Nurse Case Manager) said no, you need to put them in, because eventually, you're going to need them, and make the army pay for it now, while they will...she's very supportive, very good at her job. It was probably one of the most defining moments of my life when they came and put that stuff in, I was like oh my god, I can't even believe that this is my life now...(crying) I still can't...



Case managers, for their part, described how being able to make a difference was the most satisfying part of their work.

Very rewarding when you meet with someone early on and they're stressed to the max and you're able to give them the information they need and so by the last six months they're going to school and actually looking forward to their next career.

These successes were important for Case Managers who often didn't see the long-term results of their efforts. High case volume and transfer of care to other parts of the system often meant that long-term follow-up with clients was not possible. An Expert Stakeholder shared her concern with the limits of her own capacity to follow up with clients:

By the time they leave I can predict the ones who really won't do well but I don't get to follow up with them after they leave. There're some really serious ones and hopefully VAC will follow them afterwards. PTSD and addictions are often lifelong battles, any pre-existing issues as well. It's very hard.

Another remarked:

All those guys and girls I've counselled, some of them have phoned me, some of them have sent me emails, some will promise to invite me to their graduation – but most of them, I'm a nobody to them – so they'll move on, and hopefully their life is good, but I'll never know the outcome.

Despite genuine care and concern, system overload simply didn't allow many stakeholders to provide the care that they wanted too. Despite these resource shortages members faced a transition clock that had started counting down to their release, ready or not. Stakeholders expressed their frustration with the current situation and talked about the challenges trying to collaborate for a better solution. One asked, "Why can't we just come up with a transition plan, with all the stakeholders having some type of input about what's actually going to work." Another notes:

Stakeholders are reacting before they know what other stakeholders are doing – and sometimes different stakeholders – while yes they are looking at client interests first, as organizations they still need to look out for their own interests as well – and they don't always reach out (to each other) – to look into overlap or redundancy or continuity of services – that's usually an afterthought in bigger organizations, because we're always reacting – we think we know what the problem is and we're reacting to that problem, but that's not the real program, we're always looking at the immediate problem, instead of going all the way back, to what the original problem is.

Another echoed the same concern about whether the real problem has been identified. "It's hard for us all to keep track of what we're all doing – but we're in the middle of an evolution at the moment – we're in the middle of solving the problem, but it's hard to pinpoint the problem."



Participants Needs: At this stage in my transition, what I'm looking for is...

Narrative Theme Description: In the participant pre-program interviews, interviewees were asked why they had come to the Shaping Purpose program and what they hoped to achieve. Observation of the four program deliveries provided a second source of information about participants' goals in attending the program through group discussions about participants' goals at the beginning of each program. Participants' answers provide another first-person glimpse into the challenges and dominant unresolved questions they were facing in their transition, issues that had not been addressed through the services that they had accessed. These two sources reveal a diverse set of participant hopes and needs ranging from practical advice on available resources and completing paperwork, to guidance on how to navigate the system, a desire for social contact and affirmation by other releasing peers, and questions about meaning and purpose in their post-military life.

In the interviews that were completed prior to the program attendance, interviewees were asked how they had heard about the program and what their goals were in attending. As expected, their answers were often directly related to the areas of challenge that they talked about in their interviews, which have been discussed in previous themes. For most, the transition had brought some degree of loss of social supports, social role, identity, structure, purpose, financial security, in addition to their ongoing adjustment to illness or disability. Their answers about what they hoped to get from the course, however, are instructive as they framed, in positive terms, what they identified as the solutions to these challenges. Themes in these participant responses are provided with illustrating quotes.

Reclaiming Self-Worth

As we saw in the previous theme sections, many of the interviewees struggled with a loss of self-worth and self-confidence. Their loss of role and belonging due to illness or injury had raised questions pertaining to whether they had any contribution to make and where they belonged. In their responses, what they were seeking centered around themes of reassurance about worth, competence and contribution.

The transition was definitely difficult, because when it came to the realization that I had nothing left of me, I felt empty, no confidence. That's another thing I'm hoping to gain from the course, a bit of confidence... I'm looking for baby steps in building that confidence back up, feeling that I'm worthy. That was the big kicker – the military made me feel so unworthy in the time of my injury, was I even of value? I started questioning my life.

A friend of mine recently took Shaping Purpose and said, "I thought this would [be] great for you." I feel quite emotional about it, because (pausing) it's such an isolating experience, to have PTSD, or just what I've gone through, I've isolated myself, so for somebody to reach out and say "I believe in you" when



you don't believe in yourself anymore...is huge – it's hard to put that in words. I'm at that stage to start asking: what am I going to do for the rest of my life?

I'm hoping it's going to be working as a group, to get an understanding of what you're capable of, what your worth is, so you can transition into the civilian world. To brainstorm as a collective, an understanding of, I don't know, your importance, who you are, what you have to bring to the outside world – that just because you're not in the military, doesn't mean you don't have any capabilities, goals, positive attributes, stuff like that.

Finding a Starting Point

Some of the program participants came to the program without specific goals. Their answers, instead, reflected a hope that they would find a starting point. They didn't know what they needed. They simply knew that they needed to start somewhere (each paragraph is spoken by a different participant).

I have a pretty open mind about this, I want to participate fully and try to get the most out of it, I don't know 100% what it's going to be, but I'm hoping it will guide me, if nothing else to move me to get STARTED. My plan is to find a new civilian career...but, WHAT? Yeah, hard to imagine.

I've been in the military 33 years, so the transition now is...wow, now what? It's such a different world. I'm here to see, to help me: where to start? What I should do? I can't see ahead right now because it's a fog of war.

All of my future planning was always seeing myself in the military. So then when they told me, now you're a 3B, it was like, well now what do I do? So that's when I heard about this program, I thought this is perfect for me.

The military is what I know, it's all I know. Some of the skills are transferrable and all the other attributes, teamwork, and all that... I bring a lot of skills, life skills, but the learning curve would be steep. And I don't know if I want to go back full time, part time, go volunteer...I have to do SOMETHING, I really miss that gratification of coming home and feeling like you've accomplished something, a project...

I got the Shaping Purpose brochure from my JPSU section commander, and I read everything, and I thought, hmm, interesting – I could use some help in that department, because I don't know what I'm going to be doing when I release – any little bit is probably going to be valuable, even just one bit, is probably going to be that important little piece of the puzzle, so I said, yeah that looks interesting, can I go?

I want more tools that could help me move forward, maybe learn something new I could find out about myself, that I don't believe is there, something new, something different. I don't get that from the military. I just want to take anything I can get my hands on, to help me. And it's for me, helping me, but maybe I could help someone else too...



If I can find what interests me, even if it's just for a hobby to take up some of my free time, then that would be good. Hopefully I can find some closure on the fact that I'm not in anymore and hopefully find something else that I'm interested in. I have no idea what else I like. Anything. A new chapter. An actual new chapter.

Renewed Meaning and Purpose

Participants were often searching for a meaningful role or something to occupy them that “mattered” in some way. It wasn't enough to be employed or financially stable, they wanted to make a meaningful contribution somewhere in their lives. This was seen as a key attribute of their work in the military and was something that they yearned to find a replacement for.

I've talked to my therapist about this...I mean, what's the way forward? What's the aim? What's the goal? You have to have a purpose, and if you don't? At least that's the way I see it. You need a reason to get out of bed.

I'd like to find something to do. I know I couldn't start a job but I'd like to have a goal or vision and start working towards that. Something to do. I would just like to do something to help someone else. I just want to be useful. I just want to have a purpose. I want to feel needed.

I joined to make a difference to help people. And in the end, the whole purpose of why I joined had disappeared. I want to get back out there and start helping people again.

I have no purpose for myself. So, the idea of a life plan? That's really relevant to me.

My hobbies are becoming my job. That's not right. The Quebequois composer Félix Leclerc said, if you want to kill a man, give him welfare. Rob him of his meaning. I need to find something meaningful to do.

Creating Structure and Defining Goals

Goals and systems of accountability are ever-present within the structure of military life. Transition into civilian life, by contrast, represented a dramatic loss of this imposed structure for many interviewees, and shifted the need for establishing goals and timelines to the individual. This shift, and a lack of familiarity navigating civilian life and institutions, caused participants to seek practical assistance on how to choose and set achievable, relevant goals for themselves.

I'm not entirely sure what my goals are, where I'm headed...it's a weird transition state – a weird feeling, not knowing where I'm going to end up. It's the unknown. That unknown causes a bit of stress...

I'm hoping Shaping Purpose will guide me so that instead of me being all over the place and not knowing what I want to do, maybe instead, direct me to focus more on one area – because I've taken courses from all over... I'm just trying to be more focused, maybe it will help me out.



A lot of people are really good at setting themselves up for hitting their checkpoints, so that everything leads to a point in the future. That was their goal...that was their aim, and they've achieved checkpoints along the way and are confident in their direction. I haven't been like that. I was just along for the ride, having a good time. Reg force? Sure! That's basically my life, and flying by the seat of my pants like that, at this age, isn't really in my best interest. I need a plan.

A path – give me a path. Give me a bit of direction. You're hearing from lots of people, and there's a whole bunch of information – but I'm hoping that through Shaping Purpose I can get my OWN path. I'm not expecting it to GIVE me a path, but I hope to get some guidance in where I should be going for me.

Negotiating a New Identity

We have seen that entrance into the military also involves enculturation into a military identity. In the face of loss of place and role in the military due to a medical release, some participants struggled to define their post-military service identity.

That's why I'm here. To figure out my new identity. I don't know what I am. That's who I used to be. I loved my job and I was good at it. And now I have nothing. It's what it seems like. I don't know who I am now.

What I'm looking to be able to get out of this is to gain a bit of an identity to look forward to when I get out – how to apply myself to becoming a civilian – I joined when I was 16, I am 42. 26 years later I'm being medically released.

This is what I wanted to come to Shaping Purpose for – I wanted this to help me figure out who I could be, without that uniform, and those military comrades, and help me move on. That's why I'm here. That's what Shaping Purpose represents to me.

You would think that your core values should stay the same. But I can't say that in the military. They did influence me and some of my core values aren't really mine – they're what they told me they should be. I've had to put away a part of myself. Anybody who has spent a number of years in the military will have that issue. I need to rediscover myself. I want to rediscover what my values are, who I am.

Network and Comparing Notes

Participants described feeling isolated from their military peers after they had become ill or injured. The opportunity to gather with other people who had had the same or similar experiences was seen as a major attraction to the program. Participants sought the opportunity to compare notes, normalize experiences and seek guidance from those further along in the transition, or give back to those who were just starting out.

I want to learn – I know I've still got a year left, but I just want learning experiences. Maybe there'll be something bought up in these groups that I didn't know was allowed, or feasible, was out there...



I'm quite stagnant, I took a paper pushing job cause I couldn't work in the same environment anymore, I can do it, but it's not hands on, and it's definitely not for me...so the reason I came here, for networking, meeting people, hearing some of their stories, and maybe if I hear somebody that's doing a job that intrigues me, I could poke and prod at them and get a sense of what their life is like...I'm not 100% sure of what's going to happen at this thing, so I've got a million questions but I don't know what to ask first.

I've had a of couple buddies who've been through the release process, and I've leaned on them. This is an opportunity just to talk to people who are transitioning, to identify any fears, or possible problematic areas you might be facing as you release. If they have some insight into what I can expect, if I can take from their experiences, that's what I'm hoping to get from this Shaping Purpose seminar.

I'm here to take a close look at myself – learn about myself, discover myself. And also, being with a group of different people, I hope to get different ideas and perspectives.

I'm really switching paths – I'm excited about it – but I still have trepidation – am I going to be successful? Am I going to fail? So hopefully it'll help build my self-esteem again, and work towards that, creating a network, somebody to build up around me, so that if I need to call on people, and maybe get another direction, or hear other people and think, hey, I never thought about that before.

A Chance to Think

Finally, participants talked about the busyness of their lives and the difficulty finding time to think about where they want to be and make plans for the future. Whether due to family, work or other commitments, time away and a chance to think about the bigger picture of their lives in a structured way and supportive environment was an attractive aspect of the Shaping Purpose program.

If you're trapped in your little world you don't realize what goes on out there in the world.

Coming here I was looking forward to getting out of the day to day – I never get this time to contemplate. I need some time to get out and brainstorm what I should do. If you don't get out of your everyday routine you can't see anything new.

I've never had four days to think. Never.

Day One: What do you want/expect from Shaping Purpose?

At the start of each of the four deliveries of the Shaping Purpose program, the evaluation team members observed the facilitated group discussion that elicited participants goals. Themes were generated by clustering each answer given by program participants to the day-one question, “what do you want/expect from Shaping Purpose?” Where participant responses had multiple interpretations, they appear within multiple themes.



Themes were clustered into six groups including:

1. Hope/Emotional Support
 - explore my inner feelings
 - learn coping mechanisms / tools
 - decrease fear of the unknown
 - overcome fear of transition
 - address anger issues
 - post-traumatic growth
 - overcome loss of confidence / self-esteem
 - overcome barriers
2. Looking for a Personal Growth Opportunity
 - explore shortcomings
 - develop confidence/ self-esteem
 - post-traumatic growth
 - overcome the obstruction of injuries / medical issues
 - overcome barriers
 - rediscover strengths & self-confidence
 - self-discovery
 - learn how to make decisions by myself
 - think outside the box
 - develop new tools
3. Assistance Addressing Pragmatic / Logistic / Financial Issues
 - overcome obstruction of injuries / medical issues
 - address financial pressures
 - family considerations – I.e. moving / partners still in military / posting / divorce / parenting
 - Develop work/life balance
 - overcome barriers
 - identify priorities
 - think outside the box
4. Addressing Isolation / Increasing Social Connection
 - develop a new network of support
 - learn how to form new relationships with family
 - address loss of relationships
 - group validation of my life plans
 - reinforcement
5. New Identity Formation
 - find a new identity
 - learn how to put myself first
 - self-discovery



what will I be "when I grow up"?
identify: what is my purpose / my "new meaning"?
find an inner compass
learn if my current direction aligns for me
identify as a civilian

6. Developing a Planning Process / Methodology / Mechanisms

goal setting
develop a life plan / path / direction
find / live with clarity
learn a decision-making process
group validation of my life plans
learn if my current direction aligns for me
learn how to make decisions by myself
identify priorities
think outside the box
gain new perspectives
develop new tools

Context: Closing Comments

In this chapter, the key finding from the context evaluation of the CIPP model have been presented. Analysis suggests the presence of three intersecting master themes that are woven throughout these Veterans' narratives of transition acceptance and adjustment. A fourth thematic area catalogued program participants' explicit goals and reasons for attending the Shaping Purpose program. The master themes that emerged from the data are as follows:

- Mission First: Operational Needs Before Individual Needs
- Starting Over: Denial and Delay, Confrontation, and Identity Renegotiation
- System Overload
- Participants' Needs: At this stage in my transition, what I'm looking for is...

Evaluating proposed solutions requires a deeply contextualized understanding of where in the system Veterans are meeting barriers and having challenges. The focus of this context portion of the evaluation, therefore, was on the barriers and challenges faced by releasing personnel; it was about the problems and service or knowledge gaps they were seeking resources to address, rather than on who wasn't struggling or what was working well.



These stories suggest that entrance and belonging to the military family is contingent on ongoing performance. With belonging comes status as part of the elite, elevated from the civilian life they left behind and privileged with more meaningful and impactful work in the world. With illness or injury, ongoing performance may become impossible, and belonging will come to an end. Universality of Service inadvertently reinforces the contingent nature of belonging to the military family.

Despite its operational value in motivating people to step up to the challenging work that must be done, the stoic performance culture of the military translates into a number of challenges for military personnel. Members spoke about hiding injuries or delaying help-seeking due to concern about reputation and career advancement, they also talked about facing stigma for physical and mental health needs, and about rejection by peers and sometimes by the Chain of Command. Case managers linked delays in help-seeking to more complex transitions.

Training and enculturation taught members that their place in the military family made them special – it became their identity and foundational to their self-esteem. For most of these interviewees, exit from the military meant they lost or were about to lose a preferred identity and the opportunity to contribute to the work that they had learned matters most. Interviewee's accounts suggest that, in the military, "I am" seems to be closely linked to "I do", and, as a result, loss of role was synonymous with identity loss. Finding a new role and purpose emerged as a primary task in letting go of the old, and negotiating a new post-military identity.

Within this context of lost status, stoicism and stigma, military members need to attend to their health, negotiate rehabilitation needs and/or adjust to significant illness or disability. At the same time, they need to think ahead to the future, their practical responsibilities to family, their financial needs and a new identity to come.

Once members receive their official disclosure package with a confirmed release date, the clock starts ticking towards transition out of the Forces, and brings with it a series of administrative tasks and a need to plan for the future. Some members remain in denial that the end of their service is coming, and sometimes information is delayed or lost in the system so that key opportunities to prepare for transition are missed or delayed. Others experience significant anxiety or struggle to know where to start.

Throughout the system, Case Managers and military personnel alike commented on the lack of resources, system overload and resulting systemic barriers to rehabilitation and transition supports. For military leadership, a "do more with less" budgetary and human resource climate creates management tensions around prioritizing the needs of ill and injured personnel versus supporting the mission, tensions exacerbated by the demands of a high operational tempo. Likewise, Case Managers were stretched thin by growing caseloads, and expressed concerns about diminishing quality of care. Case Managers also voiced their frustration over their inability to stay informed about frequent policy and service delivery changes in their own, and in other agencies, and a lack of information and coordination between agencies that contributed to service duplication and service gaps.



What can be said, then, about the needs of this group of releasing military members? Certainly, military to civilian transition is highly individual. Complexity is the norm. Coping skills and psychological stability are highly variable. Physical injuries may be a barrier to learning and attention, or endurance. On top of physical and psychological injury, participants may be dealing with a legacy of stigma, bullying and harassment. There is an immanent or a realized loss of belonging to a preferred social group, and many may have no starting point for imagining a palatable alternative role or career. Confidence may be at an all-time low and identity is uncertain. This is the challenge for curriculum design.

Despite the challenges, an expert Stakeholder offers a reason for optimism, observing that:

Military people often don't realize the assets that they have – for example, most are excellent students – because they've been excellent students in their careers. They've been brought up that way...if they go to a course they're very disciplined, very structured, they do their homework, they won't be late for class, they'll show leadership in class. But, before they release, they don't realize that they'll do that. They may feel a lot of anxiety about going to school or to courses, but the truth is that most military personnel love to learn, otherwise they wouldn't have stayed in the military. Every day we learn... and they have such a strongly embedded esprit de corps, they are a team, they are loyal and they help each other along.

As shown here, context evaluation provides a means of examining the objectives that have been chosen in a given program and determining if those objectives are relevant to the population to be served. This is fundamental to accountability. When outsiders, including the community, representatives of funding agencies, and external evaluators, come into a system and pose basic questions about the value of objectives being pursued, program facilitators need to be able to identify their objectives and the rationale for those objectives. What are the objectives? Why were they chosen? What assumptions do they make about the needs of military Veterans to be served? Are those assumptions socially and scientifically valid? Context evaluation provides a basic means to help answer these questions.



4. Input Evaluation: Was a defensible design employed?

Introduction

Input evaluation examines the program goals and design in light of the needs revealed by the context evaluation, and against the existing evidence base, to determine whether the strategies to address these needs are sound. The key questions at this stage are: Were the program goals relevant to the population and was a defensible design employed?

Sources

To inform this aspect of the evaluation, several key sources of data were examined including interviews and discussions with the program designer and facilitators, observation of the program delivery, and examination of the course syllabus and curriculum materials.

1. Program Facilitators

The curriculum developer of the course content was informed about the purpose of the study and interviewed, in-person, for approximately two hours regarding their sense of the needs of the beneficiary population, including key challenges, barriers, current resources and any perceived gaps in services, knowledge, skill or abilities. They were also asked about the intended outcomes of the Shaping Purpose program and the theory of change used in the curriculum development.

Two additional program facilitators, central to the delivery of the four pilot-programs under evaluation, were engaged in ongoing discussions throughout the evaluation period about the course content and rationale. None of the facilitators were asked to comment on the details of specific cases or participants.

2. Observation of Course Delivery

Two members of the evaluation team attended each of the four program deliveries as participant observers. Short conversational interviews with participants and facilitators were conducted during each of these visits. Evaluators recorded summaries and impressions in written notes and also kept records of the theoretical material and evidence base referenced at each of the program deliveries.

3. Course Materials

Course materials included the participant binder, syllabus, handouts, psychometric pre-test materials and session activities. Online promotional videos and written material were also reviewed to examine facilitators' comments and claims about the course.



Program Description

Shaping Purpose (SP) is an established civilian personal development program that has been adapted to assist military personnel in MCT. The program guides individuals through a series of lectures, group discussions and exercises leading to a personal planning process aimed at clarifying participants' sense of purpose and meaning in their post CAF life and roles. The program works to assist individuals to identify their "gifts" (skills applicable to the civilian world), "passions" (interests and activities most crucial for ongoing well-being) and "values" (criteria for judging what is important and motivators of action), in order to inform the creation of a "Life Plan," a detailed multi-dimensional action plan. The process and resulting plan are proposed as a framework for CAF members and their families to think through the choices that they need to make, and concrete actions they need to take, to live a fulfilling life post-CAF. The course could be summarized as a close examination of a single question within multiple domains of well-being:

Three years from today, if you were looking back over the last three years, what would you need to happen both personally and professionally in order for you to feel satisfied with your progress?

Theory of Change

The program was initially designed for adults moving into retirement or through other major life transitions. As such, it bases its theoretical model on the work of Cambridge historian and social scientist Peter Laslett, CBE, who wrote and worked on the historical understanding and practical betterment of the elderly. Laslett explored the distinction between the "third" and "fourth" ages of life and argued against the tendency to push those above working age to the periphery. He argued that the flexibility and freedom that comes after "golden years" could be used to make conscious choices to live an active, connected and contributing life.

The Shaping Purpose program extends the theory and practical implications of this work to benefit those in other life transitions, and, through consultations with former military personnel, has been adapted to support individuals in Military to Civilian life transition. The fundamental premise of the program is that through close examination of where you came from and who you are, you can plan and take action to move towards a more meaningful and purposeful life.

Purpose, which is theorized as providing this overarching and longer-term sense of direction, is differentiated from goals, which are defined as being smaller, and concerned with how to execute activities that are based on or driven by the broader purpose. Informed by work of Richard Leider, a prominent leadership author in the U.S., a sense of purpose is characterized as essential for individuals to make clear decisions about using their unique abilities and talents with people and activities they genuinely care about, in environments that value them, and that are healthy for them. The program follows a trajectory from self-awareness, building on the past, questioning yourself, planning for the future, creating executable goals, and reviewing and renewing plans to move towards a life more aligned with preferences in key areas of well-being.



Course Content

Day one introduces participants to Shaping Purpose’s models and concepts, and introduces a self-discovery module that includes identification of core gifts, passions and values. Day two continues this work and introduces a six-domain well-being model. Day three continues to examine the well-being model, with participants considering individual needs and values in the areas of prosperity, health and happiness. Day four, the final day, culminates in the consolidation of previous days’ work and creation of a strategic plan, or “Life Plan,” for the months and years ahead. The program logic trajectory is mapped out as a journey in the graphic shown in Figure 1.

Figure 1.



Life Cycle Model

The program begins with presentation of a life span model that considers the life cycle as unfolding in chapters. Active phases are followed by a reflective phase (liminality) and then back into new active phases. For example, pre-military life may represent several chapters, and the military career may be considered as another chapter. Deployment may be a chapter within the military career. Transitions between these chapters mark the end of active phases and the beginning of reflective stages that also represent opportunities to make decisions about new directions. The key challenges of these transitions are proposed to be related to the loss of identity, loss of routine, and loss of social networks.

Participants are encouraged to examine the highs and lows of their life events to identify strengths and signposts that point to gifts and passions; qualities that got them through difficult times. The program also calls attention to the tendency for our “life roles” within chapters to become our “identity.” Activities and discussions in the program prompt participants to explore the relationship between the two, first by identifying



the multiple roles played throughout one's life, and then by examining which roles are necessary, which roles are limiting, which roles are fulfilling, and which desired roles may be missing.

Self-Discovery: Gifts, Passions and Values

Gifts, passions and values are presented as personal systems of evaluation – a personal compass for navigating life and adapting to change. Gifts are defined as each individual's unique abilities and talents; they are things one does effortlessly or truly enjoys. An exercise, in which participants sorted cards labeled with different skillsets, was used to help participants self-identify the things that they see as their gifts and each was linked to a corresponding Holland code, also known as RIASEC. The Holland Code suggests that personalities seek out and flourish in career environments they fit, and that jobs and career environments are classifiable by the personalities that flourish in them. Holland codes were used by participants to recall and brainstorm environments that support and allow expression of their gifts.

Passions are defined as the things that matter to people and create the drive to act. A second card sort exercise was used to help participants self-identify the things that they love and that give them energy. Group discussion and individual reflection identified environments that support passions or that are experienced as depleting.

Finally, values are defined as judgements about what is important in life, which serve as standards or criteria for selection or evaluation of actions, decisions, people and events. All participants had completed the Reiss Motivation Profile® (RMP), a standardized assessment of what motivates people, prior to attending the program. The Reiss Profile identifies 16 essential desires that shape a value system, our needs and goals in life. Participants examined their profile results and used their values identification to examine the choices that they are making in how they live their daily life, their current roles and their goals for change.

Well-Being Model

After the self-discovery module, a model for well-being is presented; wellbeing incorporates the domains of prosperity, health and happiness. These three domains of well-being are defined as follows:

1. Prosperity is defined as creating a state of well-being through control over our environment. It includes our financial assets, sources of income, our home and our possessions, and geographical concerns such as where we live.
2. Health is about the physical body and is reflected in our vitality, strength, flexibility and endurance. This domain includes realizing our physical potential, nutrition and fitness, and access to appropriate health care.
3. Happiness reflects our psychological happiness and the social system that supports our happiness. This domain includes everything that gives us pleasure, engages us, or gives us our sense of meaning and purpose. It also includes our social bonds and connections with family and friends. This domain is informed by Seligman's (2012) attributes of psychological flourishing and resilience, represented by the

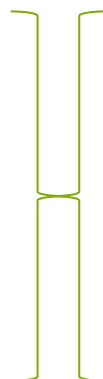


acronym PERMA: positive emotion, engagement, relationships, meaning, and accomplishment. Seligman’s research on the building blocks of resilience and growth also provides the theoretical base for the US Comprehensive Soldier Fitness (CSF) program.

The three domains of well-being are interactive with no one domain being more important than any other. Participants consider current and desired day schedules, applying the domains of well-being to determine well-being deficits and set goals that allow for better balance. The model uses a different language and organization but shows substantial overlap with VAC identified domains in post-service well-being (Thompson et al., 2017).

Shaping Purpose Well-Being Model

- Purpose and meaning
- Financial Health
- Health
- Goal setting and system navigation
- Social happiness
- Prosperity and geographical concerns



Veterans’ Affairs Canada Domains of Well-Being

- Employment or other meaningful activity
- Finances
- Health
- Life skills and preparedness
- Social integration
- Housing and physical environment
- Cultural and social environment

Resource exploration

On the third day of the course, when participants were ready to move into setting out specific goals in the domains of well-being, facilitators gave a presentation and facilitated a group discussion about available programs and resources to support military Veterans in achieving their goals. Contact information and a brief overview of organizations and programs in the private, non-profit and government sectors were included, and participants were encouraged to share their own experiences and information with the group. This module also included a PowerPoint slide deck provided by the CAF transition advisors for presentation to the group.

Life Plan: Putting it all Together

The program culminates with each participant creating a strategic Life Plan. This Life Plan is proposed as an iterative planning and problem-solving process that aims to assist individuals to identify situations, circumstances and opportunities that are aligned with their gifts, passions and values, and thereby allow them to live a more purpose driven, engaged, fulfilling and rewarding life. In creating a Life Plan, each participant identifies goals and milestones that align their activities with their gifts, passions and values in each of the domains of well-being. Goal setting has been identified as one of four evidenced-based, cognitive behavioural therapy-based techniques that help individuals cope with stress and improve their mental health and resiliency, and is also at the center of the R2MR program (Donaldson, 2016).



Analysis

Key Challenges and Goals

The program hypothesized that the key challenges of transitions are loss of identity, loss of routine, and loss of social networks. The key barriers to addressing these challenges were inertia, indecision, lack of self-knowledge, lack of conscious decision making, and lack of specific goals. The challenges identified in the context evaluation included loss of identity, loss of role, loss of meaningful contribution, loss of community, loss of direction and starting point, difficulty navigating resources, uncertainty and emotional overwhelm, and difficulty crossing the civilian/military cultural gap including prioritizing self over group.

The stated goals of the program were to assist individuals to identify their “gifts” (skills applicable to the civilian world), “passions” (interests and activities most crucial for ongoing well-being) and “values” (criteria for judging what is important and motivators of action), in order to inform the creation of a “Life Plan,” a detailed multi-dimensional action plan. Goals identified by participants and stakeholders included getting emotional and social support, addressing fear, self-discovery, getting started, accessing new information, comparing notes with peers, identifying priorities, developing tools, setting goals, finding a new identity, finding meaning and purpose and getting time to think.

Summary Evaluation of Inputs

Input evaluation examines the program goals and design in light of the needs revealed by the context evaluation, and against the existing evidence base, to determine whether the strategies to address these needs are sound. The key questions at this stage are: Were the program goals relevant to the population and was a defensible design employed?

The programs framing of the key challenges of transitioning military personnel are largely aligned with the challenges identified in the context evaluation. In particular, the focus on finding meaning and purpose is highly relevant to releasing members who have lost or are about to lose the opportunity to contribute to work they have learned and come to believe is the most meaningful work they could be engaged in. One of the strengths of the program lies in its articulation of purpose and the structured process of identifying personal priorities.

The use of a well-being model to frame areas for exploration and goal setting corresponds theoretically and practically to VAC’s (Thompson et al., 2017) research on domains and determinants of well-being. It may be useful for Shaping Purpose curriculum developers to explore whether outright adoption of the VAC model or alignment of language is possible. The “Happiness” domain of the well-being framework is based on Seligman’s (2012) research that has already been found useful with the US military (Donaldson, 2016).



The emphasis on a structured system of goal setting and system of accountability is consistent with best practices. Goal setting is considered to be a key evidence and cognitive behavioural therapy based approach to assisting individuals cope with stress and improve their mental health and resiliency.

A number of Stakeholder comments about what participants need also support the goals and strategies of the program. For example:

I like the idea of someone being guided towards feeling like they do have a purpose in life after they release. I have some that I think would benefit from that type of a program.

There's a million directions they could take. They just need someone to wargame them through it.

Members who take the initiative are the ones who have success. Particularly when they know and have a plan moving forward. They know what they like doing, they have looked at all the variables, quality of life, financial, etc., and we're just referring them to other sources that might help them get there.



5. Process Evaluation: Was the design and delivery well executed?

Introduction

Process evaluation assesses program implementation and delivery relative to the stated program goals and desired outcomes. The key question at this stage is: Were the design and delivery well executed?

Sources

To inform this aspect of the evaluation, several key sources of data were examined including observation of the program delivery, and follow-up interviews with participants.

1. Observation of Course Delivery

Two members of the evaluation team attended each of the four program deliveries as participant observers. Short conversational interviews with participants about the program delivery were conducted during each of these visits. Evaluators recorded summaries and impressions in written notes.

2. Interviews with Course Participants

Forty follow up interviews were conducted with participants two-weeks after they completed the program to assess program impacts (39 hours of interview). As part of the follow-up interviews, participants were asked process questions about their experience of the delivery of the course, and invited to make comments about process strengths and weaknesses.

Strengths in the Design and Delivery of the Program

Right Timing

A number of participants commented on the timing of the program within their own transition journey, and shared their thoughts on when the program would be most beneficial. One participant noted:

I'm glad I had it before my release. I'd rather have the information too soon than too late because if you have the information then you can use it when it's time. People should take the course as soon as they figure out that they're going to be medically released because that's when a lot of people panic and think, oh my god, what am I going to do. Particularly when people are young and don't have a pension, I think this course would be really advantageous for them.

It came at a great time for me – It should come as soon as you know rather than at a specific time relative to your release because that's when you need to start thinking differently. If you start the whole process and then you go to the program at the end that's too late. You can discover yourself and launch yourself in a whole new direction and some people don't even seem to know that you're on the priority hiring list.



Another participant, already released, echoes the same opinion about timing:

This course would have been phenomenal to have prior to being released. I feel that if I had it then I would not be as lost as I am. I was released in 2014 and I've been lost ever since. Maybe if this were introduced before the SCAN seminar this would have been a really important tool then.

One participant felt that that the program was not relevant in his circumstances, although he found benefits from other aspects of the experience:

This program just isn't right for someone at my stage. I've had 35 good years, I'm releasing medically, I'm financially stable and I'm not going to be looking for a job. This was a total waste of time for me. But I really liked being in a room with other military folk again. I'm taking away a lot of information I didn't know before – so that was good.

Overall, heterogeneity of opinion about right timing was the norm. Some appreciated the program as an exploration of self and new ways to serve despite not seeking employment. The evidence for the literature would suggest that earlier preparation is preferable where possible (Shields et al., 2016). Planning for MCT may contribute to practical preparation and identity “rehearsal” that paves the way for assumption of new roles.

Right Format

A number of participants commented on the retreat format of the program and the civilian context as assets. Participants appreciated that the course was not on base, noting that the base was still too potent a reminder of things that had gone wrong in their release. One observed:

If you're bitter, you really don't want to go on base for a course.

Other participants appreciated the opportunity that the course offered to have uninterrupted time to reflect, regroup and plan for transition and set personal goals. For example:

All the other programs happened in the context of my daily life. With this program you're removed from your daily life and forced to focus on yourself.

Coming here I was looking forward to getting out of the day to day – I never get this time to contemplate. I need some time to get out and brainstorm what I should do. If you don't get out of your every day routine you can't see anything new.

I've never had four days to think. Never.

Right People

A number of participants made comments about the benefits of taking the program with a cohort of their peers. These comments highlight the benefits derived from delivery of the program in a peer group setting,



that are supplementary to the benefits that derive from curriculum content. Participants appreciated that the course was specifically offered for military and ex-military members. For example:

I'm very...I've been in a long time, just shy of 24 years, I'm very institutionalized, I have a hard time in public ...I'm very uncomfortable in a civilian setting. But when I found out more, its FOR soldiers, there's going to be other soldiers there, that instantly made me feel better, because those are the people I relate to. We're all going through the same thing...for sure it made it easier, knowing its going to be my peers.

It was nice, I've been in courses, where there's a mix of military and civilian, and you get the civilian talking about stuff that...is totally not relevant, to you or to the military content. That was nice, that the conversations and discussion had that common understanding, common piece to them.

One participant felt that mixing commissioned and non-commissioned members created an underlying tension. This sentiment was not widely held, but is noteworthy as an internal cultural dynamic for facilitators to manage:

You could tell the difference between who was an officer, and who was an NCM in the room and the officers... They tended to dominate conversations and questions, but that's what they do. It's not a huge deal, but depending on the group that you have, you're going to have some NCM's that...shut down, or don't participate in the conversation as much, or whatever, just because conversation is being dominated by officers.

Many participants commented on how important it was to hear about their peers' experiences and their appreciation for their willingness to share during the program. Participants commented that the open, non-judgemental exchange of stories allowed them to discover a community of experience that normalized their challenges and losses.

I really loved the fact that everyone was sharing their own experiences, which was making me realize about my stuff...and other people had ideas you didn't think about (before) and I learn a lot by talking. By talking with somebody else I will realize my own stuff - so, since everyone was so communicative in the class, it helped me going forward.

I felt like I belonged there, because I don't feel alone, everyone was talking to me, and its so good to have people around that know, and that understand. It was amazing, as much as the facilitators... it was such a safe place, it was amazing.

Facilitator Attributes

A number of participants made comments about the facilitators use of self-disclosure, sharing times from their own lives, whether civilian or military, that illustrated their points. Self-disclosure was seen as an asset, that increased participants' perception of facilitator genuineness, care, credibility and expertise. For example:

The fact that they used their own personal experiences, to describe things, that goes a long way in me understanding stuff - so you know they know too, they understand what's going on, they've been



through the same thing, you know...they've obviously been there themselves, and they're trying to make it easier for everybody else, its almost like they had to break the trail first, and then its easier for us.

The willingness of the ex-military facilitator to share his story was seen as particularly important in modelling the willingness to self-reflect, take responsibility, and take action to improve one's personal circumstances.

Initially when I sat down, in a room full of strangers, seeing the ex-military facilitator up front, I immediately perceived that student teacher relationship, I'm the guy taking notes, he's the guy on the pedestal, and there was that division between us. And then when he started talking about his own personal experiences, and he briefly showed his graph (timeline) and told about some of the really bad things about his past - that student teacher relationship was thrown out the window, and for me - like, he wasn't the guy on the pedestal...he was the guy sitting in my shoes that already took the notes, and now he's sharing about what he's feeling, and I'm just saying, oh yeah, me too. To be able to tell a group of 25 or so people the worst things in your life and how they've affected you, I can only imagine is monumentally difficult. But the fact that he shared, really levelled the playing field and made me feel more comfortable about sharing some of my story.

Others commented that the facilitator self-disclosure helped them to slow down and focus on themselves in a more considered and substantial way:

I thought the facilitating was just fantastic, I mean you go through a deck of cards, I mean, what does it actually mean? But taking the time to stop and thinking about how does that apply to what I used to do, and how does it actually apply to what I'll do moving forward? The facilitator sharing his story broke the ice for me and allowed me to focus on myself, which is a massive win, totally, to go through the process myself.

Content Coherence and Relevance

A number of participants made comments about course material during the delivery. These comments represent first impressions of the course coherence and relevance rather than being "outcomes" per se. As such they give some insight into the effectiveness of the delivery and the perceived relevance or match between participant needs and the course content. Examples include:

They've got their thumbs spot on the issues that we're facing.

I noticed the instructors were very knowledgeable, and very patient.

Even just how its framed, gifts passions, values, even just delineating that - for me, and a lot of military - or maybe I would say combat arms is what I would speak to, I don't know about the other trades - we're very model oriented, having a framework to understand things is really helpful...so Shaping Purpose, my big takeaway is having a framework to understand what I got out of my career, how it shaped me as a person, and maybe a little bit of insight into how to use that moving forward.



I really liked the way we wrote out the life plan the last day. And how each section of the course led to the next and contributed to the end. It was a good outside approach. When you get anything from the military or from Veterans Affairs that you read, it's military writing. And this was civilian being adapted to the military, and the military facilitator didn't overtake it with the military. They lay out the purpose and the direction right at the start, at least with this it gave you a chance to think outside what was said instead of going straight to the point.

This whole process is really familiar to me – we're basically starting with the desired end state and planning backwards. In the military it's called a fast estimate. We start with the end state, look at influencing factors and courses open and plan around enemy, terrain and intangibles. That's what we're doing here just the language is different. I totally get this.

The presentations and ensuing discussion about available support resources across the public, private and non-profit sectors, was commented on as particularly important for a number of participants.

When they went through all the resources out there, that was really useful for me and I know it was an eyeopener for people still in.

I liked the information about all the other groups that are there to support us and the board where all of the participants could share the groups that they knew about. That was really good. That was us helping each other.

I didn't know about half of this!

A number of participants who were already released commented that the information sharing was helpful because they had not had the opportunity to attend a Second Career Assistance Network (SCAN) seminar before their release.

I didn't get a chance to do a SCAN seminar, I would have liked to have. I didn't know about anything.

I never took the SCAN seminar, I didn't have that opportunity. So, as an injured person it was pretty important.

Areas for Improvement

Cultural Competence

Cultural competence is defined as the ability of providers and organizations to effectively deliver services that meet the social, cultural, and linguistic needs of participants (Betancourt et al., 2003). A culturally competent program delivery can help improve outcomes and quality of programming, and can contribute to the elimination of curriculum access barriers.



Critiques about cultural fit were raised first by stakeholders, suggesting that some work may be warranted to ensure that language is not a barrier to access for military personnel in transition. One Expert Stakeholder shared:

For a lot of people when they read the one-page promotion, they looked at it and it talked about prosperity, health and happiness and all of this fluffy, weird civvy stuff. So, a lot of people just weren't interested just because of the language.

A number of participants made comments about non-Veteran facilitator's mistaken knowledge and assumptions about military culture that detracted from facilitator credibility, the sense that the participants were understood and that the material was relevant to their needs.

They weren't familiar with that whole concept of being in the military, it's not a job. Your body is a commodity and a lot of civilians don't get that. Even though they have the ex-military facilitator there, I don't think they were listening to him enough.

In the culture of the military, it's its own thing. It's not like dentists or lawyers. Someone said it's like being brainwashed and the civilian facilitator said, it's not, it's not. But it kind of is because when they train you they break you down. They sleep deprive you and give you physical training until they break you. And then they build you back up. And they do that to you over and over on all of your courses throughout your career to make you be how they want you to be. Everybody in the room has been through that and they understood certain things. She doesn't understand us as well as she thinks she does.

Participants also commented on the benefit of having the ex-military facilitator "translate" the material.

I don't think they used him enough. Because honestly, you've got this team here, and there's only ONE who's ex-military - only ONE who can directly relate to what we're going through and who we are. I don't think they used him enough.

A lot of things I just didn't get until the ex-military facilitator would stand up and say, okay it's like this.

Sometimes the other facilitators would say something and we'd just be looking at them and then the facilitator with military experience would say, this is what they mean and would make the translation. He bridged the gap. I think having the facilitator as ex-military and willing to share that he went through the same thing made it much easier for us to open up.

Despite these opinions, the perception was not unanimous. Some participants felt that diversity of facilitators was an asset and allowed a balanced perspective.

I think that, a very diverse group of presenters, which I think helped. I think there was a very diverse crowd, and I think they worked together enough that they could step in and emphasize something a little bit different than the other presenters, that seemed to be that they knew each other well enough, had worked together well enough, that they didn't have to worry about getting in the way of what the original presenter was doing. And I think having a diverse group of people present that stuff, helped people understand what they were getting at.



Having such a diverse audience, meaning people with 25-30 years experience, 10 years experience, having corporals, having officers, its SUPER challenging to deliver a product that's going to be, difficult to be able to give each of the participants what they need, at a level they can understand. And I thought, for the most part, they did a great job.

Another participant felt that it was attitude, not experience that was the essential ingredient:

I'll be honest with you, I don't think the facilitators status as a Veteran matters. It does provide value added, but the value he adds is as much his personality and his ability to relate, as it is his military experience.

Despite the diversity of opinions and the subjective nature of participants reactions to the facilitators, understanding the experiences and world view of the participants is a necessary competency for facilitation, particularly with military participants who may be in a vulnerable phase of life. Attention, should be paid, in particular, to how military enculturation and experiences may erode participants sense of safety or autonomy. Quotes that illustrate these areas of potential concern, include:

It goes with the military training, you do as you're told, so I put stuff out there even though I didn't feel safe.

It's very disconcerting when they would wander around and come up behind you, approaching from behind. That was difficult.

These concerns were voiced more frequently during and after the first course delivery of the four offered. The comments of participants in later offerings suggest that facilitators were integrating lessons from feedback to improve the learning environment. One participant shared:

Every day the environment was very relaxed - which is what I like, cause, like myself, I get anxiety out of the blue, which is a pain, so something will trigger me out of the blue...but there, it was relaxed enough I had no anxiety or triggers, and that was nice. I felt like I was in an environment where they understood that that could happen, so that helps a lot. The instructors seemed to understand that could happen to any of us - when I received (the joining letter) they had some questions, like any special needs, and they paid attention to it, like for me, I can't sit with my back to the door, and I couldn't sit in the middle of everybody, and so, the whole time I was there, even though we had to change tables, I was always facing the door, and always on the outskirts of the group...so, I just felt like that they listened to my special requests.

Volume of Material

By far, the most common criticism of the course pertained to the volume of information and activities. Even where the material was seen as being vital by participants, many were frustrated by their inability to take the necessary time to assimilate the material, or their own inability to sustain attention and concentration. Participant comments about the volume of information included:



Feels like we're just going through the motions because there's not enough time. But overall it's amazing. It's exactly what I want to be doing.

I would like to see the material streamlined down - there's good to know, and there's must know, and you need to highlight the MUST KNOW stuff.

Some felt that the ambitious activity schedule created time pressures that resulted in barriers to accessing the material.

My ability to process the information was overloaded which was frustrating. Too much material. I wouldn't consider myself as injured as many people who were there and I've got a good level of intellectual ability I think, I could not process any more by Thursday afternoon. I was done. I needed some time to process everything. Even if there was a brain break day.

I don't think I was ready. For people with PTSD the days were too long. For me I found it very long and I couldn't process it all. There's so much information, it's a good course and I let them know here, but I wasn't ready for it. At the end of each day I was so tired from all the information.

We started at 8:30 in the morning, which was perfect time, and we would go to 5:30 and we would have lunch there. So, I find that when you're learning a lot of material like that, and you're military so there's PTSD, depression, whatever, putting all of that information in your brain, at the end of the day I wouldn't even eat dinner. I'd go to my room and just breathe. It was taxing.

Time needed for lectures and activities also detracted from the opportunity to spend time sharing and socializing with other participants.

If the days would have been shorter we would have had more time to talk to the other participants. Sometimes I wish the days weren't as long, so we could have MORE time at night (to talk and be with each other) because everyone was so exhausted at the end of the days, that we were all in our rooms, mentally exhausted - so like maybe days that are shorter, in a 5 day course...more time to just DIGEST everything by talking with the others - even talking with the facilitators - just to spend some time with the other people.

We would benefit more from more group discussion rather than just listening to the instructor.

The time pressures also meant that breaks were shortened or eliminated and days went longer than planned, causing further difficulties for participants accessing and assimilating the material.

For military personnel if you don't cover your course material across in the allotted time then you've failed. Then as a result there were no breaks and that meant that there were no opportunities to medicate so by the end of the week I was severely under medicated.

There was too much material and we went over every day. They need to extend it a bit or cut out some of the repetition.



Repetition of material, although a useful device to ensure learning consolidation, was noted by a number of participants as an easy-to-apply remedy for the time pressures in the curriculum.

I think that the information was good but, as an instructor, I thought that some of the days we could have finished earlier and got the breaks in if it wasn't as repetitive. They could have been more efficient with time.

Analysis

Pre- Screening Considerations

Pre-screening and clarity of inclusion/exclusion criteria for referrers will improve program outcomes. Based on observation of the course delivery and feedback from participants, some conclusions about suitability may be considered:

Participants with mental health issues that are not yet stabilized, may find the self-reflection and life course aspects of the curriculum to be triggering. Adequate self-regulation skills may be a prerequisite for those coping with high anxiety or operational stress injuries.

Participants with cognitive deficits that would significantly impair concentration, attention or executive functioning, whether due to traumatic brain injuries or ongoing mental health issues, may not be ready to attend the course without supports.

Medications that impair cognitive function may limit the ability of some participants to access the curriculum. One of the participants, shared: "The experience was completely worth my time, that's for sure, I had one regret, I had started a new medication that made me awfully drowsy at the beginning of each day".

Interestingly, although observation of the course delivery suggested that chronic pain may be an obstacle for some participants, it was largely absent in participants' comments about barriers to accessing the course. An Expert Stakeholder's comments about pursuit of education and pain management are instructive in this area:

I see a lot of folks that struggle with physical pain, they can't sit through my whole session, but they're able to get on with education and get through. We just can't generalize based on what they're dealing with because how they deal with it is so individual.

Summary

Four days of intense classroom work, sitting for long periods, and reflecting on self and service were found to be barriers for some participants. Breaks and adherence to activity timelines provided, are important aspects of the course accessibility for this population. Due to the program's initial development for civilian audiences, the program may have initially underestimated the impact of military enculturation as a barrier for participants to identify and prioritize their own needs, and the impact of psychological and physical barriers to accessing the curriculum. This initial underestimation seemed to be remediated after the first program delivery.



The most significant concerns were raised regarding the volume of material presented within the time frame. Volume of material presented a barrier to accessing the curriculum and assimilation of learning for some participants. Process feedback suggests that the course material needs to be stream-lined, or the time period for delivery needs to be reconsidered.

The majority of comments received about the delivery process of the course were positive. The course format and location were deemed appropriate and conducive to learning by participants. The peer group cohort were found to be beneficial and helped support information needs, esteem needs and social inclusion needs. Facilitators were judged to be genuine, concerned and knowledgeable. Material was found to be relevant and the course logic model, trajectory and content were coherent and relevant to participants.



6. Product Evaluation: Did the effort succeed?

Introduction

Product evaluation identifies consequences of the program for participants to determine effectiveness and provide information for future program modifications. The final question is: Did the effort succeed?

Sources

To inform this aspect of the evaluation, two week and six-month follow-up interviews with participants were examined. Stakeholders interviewed had not encountered graduates of the program and therefore could not comment on outcomes.

1. Follow-Up Interviews with Course Participants

Forty interviews were conducted with participants after they completed the program to assess program impacts (39 hours of interviews). As part of the follow-up interviews participants were asked about their initial reactions to the course, and about increases in knowledge and/or skills, or changes in attitudes. They were also asked about transfer of knowledge, skills, and/or attitudes from the program to daily life, changes in behaviour, and any outcomes, positive or negative, that resulted from their attendance and participation in the program.

2. Six Month Follow-Up Interviews

As a purposive sampling, twenty participants were interviewed a third time at 6 months in order to further understand their transition trajectories and to gauge durability of program impacts (a total of 15 hours of interviews).

Participant Feedback About Course Outcomes

The following themes capture participants feedback about the course, as well as their reports about changes they experienced in the weeks and months to follow that they attributed to their attendance. Themes reflect the changes that participants still considered to be valid six months after the course.

General Satisfaction with the Course

Participants made a wide range of positive comments about the course and the material in the follow-up interviews. A small sample of those comments includes the following:

The material was fantastic. The whole thing was really positive.

It was definitely on the better end of the courses that I've been to.



I loved it. The alarm would go off in the morning and I'd be like, perfect, I can't wait for today.

Compared to other courses that I've been on, I walked away from this feeling more positive and I've been engaging with the material, flipping through the material and using the material. They believed in what they were giving us and I came away believing in it too. It wasn't like, they're done for the day, I'm done for the day.

Recommendations to Peers

Many of the participants noted that they would recommend the program to colleagues and/or Chain of Command. These recommendations are revealing about how participants felt about the value of the course material and process for themselves and their peers. Examples include:

It gave some very good tools that I'm going to use well into the future, that I can use to plan...basically my whole life moving forward, and I told my Chain of Command here when I got back to the unit, that it would be a really good program for anybody that's going to be transitioning out of the military, not just people who are necessarily being medically released, but if they're going to be releasing sooner than they expect to...to have a plan for the future for them too. Definitely anybody that's going to be 3B released, or 3A released, it should be part of the transition process, and before they get out if possible, and even after if they're having difficulties.

I would definitely recommend it. It's a well put together course. For anybody who is getting out and has to find a second career, still has kids home, and has to pay the bills. And just to get beyond this thing that your life is the military. There's a life beyond the military.

I would definitely recommend it. It was really, really worth attending it. IPSC asked me and I said I would highly recommend it. I would actually highly recommend that the Chain of Command of IPSC attend it so that they can apply it to members who haven't been yet. It is a tool in your tool box for future usage.

I've mentioned and recommended this course to a number of people. People that are sitting in limbo that aren't sure of which direction that they'd like to take. How they would like to proceed with the next stage/chapter of their life. Particularly people who have their release date but are just getting started in the process.

Negative Feedback

Negative feedback regarding the course content and goals came from a sub-group of participants who were seeking a more specific direction to follow for their careers. Without exception, these participants expressed appreciation for the opportunity to meet with peers, and for information gained during the sessions, however, they did not feel that they met their goals in attending. For example:



So what I expected (from SP) was to figure out what I'm good at...but what I wanted was, to translate that into: where to next? and that's my #1 criticism, you know I really enjoyed the Gifts, Passions, Values, part - it didn't teach me anything new, it just confirmed what I knew ...the part that was missing from that whole exercise for me was, what does that mean? I have no idea what jobs are well suited to people who have my specific gifts, passions, values.

I came right out of high school - the military is all I know. I don't know about job searching - I know about researching for an operational plan - like, tell me what job. Give someone something that says based on your gifts passions values, you're suited, in order of priority, for employment in these fields, and specifically these jobs.

If you look at a guy like me, medically released, I'm SEARCHING, I'm trying to find a sense of direction, and that needs to be more than just a bunch of fluffy words, its needs to be concrete, like military folks are task oriented, you've got to give us a task at the end of this, to be able to have a sense of direction.

In the feedback interviews, participants were asked to identify key insights, ideas or skills that they had taken away from the course. They were also asked if they had noticed any changes in attitude towards themselves, their peers, the transition process or other relevant areas of their life that were associated with the course experience.

New Perspective on Life's Ups and Downs

Participants reported changes in how they viewed past events in their lives, including difficult or traumatic experiences related to their service or transition.

The time line exercise definitely showed the drastic ups and downs in my life, and for me that really showed that for every down cycle there was always an up cycle and what brought me there. Seeing that on paper, because I tend to be visual in a lot of things, so seeing that as a tangible thing in front of me, that really helped. I've never done that before.

The course gave me hope for when I get into my down times that looking back I always seemed to get myself out. It kind of all put things into perspective about how I managed. The questions about how I got out of dark times, I always knew what I did but I had never focused on that. I think I always focused on what brought me down there instead of what brought me out of there. So that, to me, was very helpful. It showed me that there's always a light at the end of the tunnel and that there's things that I need to do, and have done in the past to get there. So that's what it meant to me, to see those things.

It helped me put it away and see it as a chapter in my life that I can feel okay about. Still working through some parts, but I can be proud of what I've done and move forward. It's one of those things, it filled the hole.



I guess the biggest thing for me is to understand that I'm not the same person that I was five years ago. That I've evolved in so many different ways, and to embrace the person that I am now based on my experiences. That was big for me, very impactful for me to understand that and to be okay with the way I am and to look at my strengths and make them overshadow my weaknesses.

Hope and a Positive Outlook

Participants remarked on a number of changes in attitude and outlook that were sustained between the course completion and the follow-up evaluation interviews. One of the key areas of attitudinal change that participants identified was a renewed sense of hope and a more positive outlook. Comments included:

It gave me a sense of hope. I think that's what a lot of us need is to rekindle that hope and that desire to push forward again.

It's one of those things that you can feel your spirit being picked up again. I can totally see how understanding your passions and gifts and nurturing them to use them to your advantage and work on the things that matter.

Since the course things have been excellent. I've been really upbeat and positive. I can remember prior to the course, I had said this couldn't have come at a better time. The week prior I was pretty down and out and had a lot of questions about my future and about my current situation. I haven't felt that way since the course. The information that I learned, the other troops I met, it opened my eyes and gave me a lot of perspective.

It captivated me. It opened the doors to things that I couldn't understand and made me see things that I either had refused to see or just couldn't see through the darkness that I was experiencing.

I'm really setting more goals for myself, and finding ways to achieve them, which is wonderful - because when you feel accomplished in life, you feel happier.

A number of participants also reported that they felt calmer and more resilient to stress after attending the course.

When I came out of the seminar I felt calmer and more centered.

After the course, I felt like, I really wanted to accomplish my goals much more, and make changes in my life. And then the last weeks have been really, really crazy, but despite that, I've been able to stay more positive, and understand that okay, well there's this stuff in my life, but I can still accomplish smaller goals right now, and go back to my bigger goals afterwards.

Future Focus

Many participants noted that with renewed hope and a positive outlook, they became more focused on the future.



It changed how I see things. To be around other people who have had the same experience, it gave me the sense that I wasn't alone. We were trying to do something to move on. I go to other groups and there's a lot of complaining and talking about the good old times but we're not thinking forward. This propelled me to think forward.

Over all, I got quite a lot out of the course. I'm putting more thought into what will help me and get me further ahead. There're jobs out there. They may not be fulfilling jobs but I can get that from my hobbies. If I need to keep a roof over my head, I'll take the job and that's a fact of life. If I can get employment that gives me fulfillment and there's programs that will help me get there then I'll go for it.

We're getting into chapter two. Now's a chance to step back and take a look at what I really want to do. I have twenty years of working in chapter two ahead of me, so let's make sure it's what I want. It's also going to involve my spouse because whatever I do has to work for her too.

Clarity about Priorities

Participants shared their experiences of going home from the course with a new sense of clarity about what was most important to them in their lives.

By finding my GPV's (Gifts, Passions and Values) I'm able to figure out what I WANT as goals...before I was like, what do I want as goals? With all the exercises in that course, I was able to find out what I want, and then its easier to go on to find ways to accomplish my goals.

We're not here to find a second career, we're here to help you see what's important for you. It was very, very useful in that way. No matter what stage of recovery you're in that's really, really useful.

Many of the participants linked a new sense of clarity about their priorities to having had the opportunity to self reflect.

The biggest thing was the self reflection, to take the time to take an inventory of yourself. To devote that time to it you don't get to do that usually. So, to have a course to allow you to do that was great, and the exercises gave you the opportunity and process to think more deeply on things.

I think having that self reflection in the course gave me a bit of piece of mind in that I've done the due diligence that you need to do to figure it out and think things through. I'm not saying it gave me all the answers but at least I thought it through, put the time into thinking about it and am more mentally prepared.

Family figured prominently in the priorities that participants spoke about. Often, they reported that they had always known that family was important to them but that they had changed how they acted on that priority in their day to day lives. For example:

It really did remind me of how important my family is and to not be so self absorbed and that wallowing doesn't do anyone any good.



I keep going to that inner compass thing and everything was family, family, family. I don't need a checklist of the things that I need to do every day. Now I don't have that mission before self. Before, I was giving the kid the tablet to get the housework done. But I'm missing this quality time. His tablet is teaching him things that I should have. Shaping Purpose showed me where to pay attention to.

The program helped me think through what I want in my life now. It's opened up a whole conversation with my wife about me doing something that I like rather than just doing what's in front of me. I'm still in the group thinking but my family is the group that I'm running around serving rather than connecting to her and connecting to my kids. The life plan is the backbone. One of my goals on my life plan was to share everything with my wife. I mean I knew that, but I needed someone to make me stop for five days and think about myself and what I want, what matters to me.

I went from thinking my purpose was keep the house clean to realizing my passions is family. And one of my gifts is instructing and here's my child and I can teach him every day. I feel like I've got something to contribute and not just as a provider.

Planning Toolkit

Perhaps the most commonly reported take-away from the course was the systematic process of identifying personal goals, and connecting specific, planned actions taken today to those goals in order to make progress towards a desired end state. A sample of the participant comments are as follows:

Shaping Purpose is all about strategic planning your life, developing critical objectives, overarching objectives and subordinate objectives, and putting in a plan for monitoring and evaluating your progress.

I feel like this has definitely given me more purpose. Nobody had showed me SMART goals before and I've grabbed hold of that. That's helped me point in the right direction and sort through whether my goals are feasible.

I think about SP every day and the goals that I set out for the next 12-18 months. The whole experience was just eye opening and the way I see myself because the military changed me. You have to deal with the experiences in the military and carry that as a bag of experience going forward on the civilian side.

I definitely learned something from the experience. I approach my planning with a more structured approach. I'm grateful for having taken it. I plunged into it. It was a milestone.

My husband thinks its a useful course too - we both looked at my timeline when I got home and he's glad I have this plan in place. I've picked up a tool (from Shaping Purpose) that I'll use ongoing in my life...

I kept wanting to fix myself, and that's where I kept being stuck. When we did our plans I now have a structure in my day. I get up at the same time. I feel way better since being there. It's a total change in me. I'm way happier. For me it was a pivotal point in my life going to Shaping Purpose.



Contribution and New Direction

Participants spoke at length about discovering that they had a contribution to make, or finding a new sense of direction through the course. Sample statements by participants include:

I found I was able to re-identify things that I'm good at. I discovered that since getting out I've disconnected who I was, from who I am now. This allowed me to connect those two identities. Even though you don't do that military role anymore, you still have those skills. I was a leader, a mentor and athlete and even though I'm not in that role, those are still things I'm good at. I'm not just an unemployed alcoholic. My take away was to have more faith and confidence in myself.

Its helped me think about, fight out, who I am, and that the military isn't the only thing that makes me who I am. Knowing that, there are things that I'm going to be doing in the future, and I'm excited for the future.

I felt more confident coming home, excited to share the experience with my husband. It's been a long time since I felt like I could make a contribution and I realized that I can contribute as a wife and mother and that I'm doing something to move forward. I haven't felt that for at least six years. It was a significant experience for me.

Instead of focusing on the bad things and what I can't do and what I don't have anymore, it focused me on what I do have. What I'm able to do, and what I can contribute. For me that was big because honestly for the last two years I really didn't know what my direction could be, treading water, not knowing what direction I could go.

I have an awareness of what I have to offer and I got that directly from the course.

I broke down what I was good at and when I really broke it down it opened some different options.

Before I went on Shaping Purpose I knew that I needed to do something but I didn't know what. I'm not saying I have all the answers now but it's a change in outlook. I see more options. Even changing outlook gives you a bit more of a purpose. You feel like there is something after the military. It opens up those doors. You know that there's things there for you. You know that there's opportunities.

It's given me the confidence that there is life after the military and there is a place for me that I'll thrive in, and I'll feel comfortable in, and feel part of whereas before I just didn't feel that I'd fit in. Thirty years of conditioning an being a certain way and then coming out into the real world. There's a whole cultural shift, like going from Canada to China. Everything is all different. The way I feel now is that I will fit into that mold of civilian society – I think so. I feel better equipped to get myself there and I know it's not going to be an overnight process. It'll be work and I have to do my part. Get in there and do it.

Sharing and Normalizing



Participant noted benefits from contact with peers who were also in the process of transitioning out of their military careers. Some found that the experience helped to normalize what they were feeling and going through. Others felt that the stigma of injury was lessened by exposure to their peers. Examples of participant comments include:

I got piece of mind knowing that all of our injuries were so unique. There's a stigma around injuries that aren't "battlefield injuries". On the course people didn't all have battlefield injuries and I liked that. It made me feel equal and worthy of being there.

Hearing other's stories, it's made me more accepting of where I've come from, how my life has changed and made it okay. I had a really tough time with acceptance of it, and not accepting it and how my life has transformed.

The main goal of the seminar was really good for me. I know when I went there I was really in a grey area. I was stuck. It was like, what am I going to do next. And I heard that from a lot of people on the course that they were in a grey area too, asking what am I going to do next. And I found that even a week later it sinks in even more as time goes by and I find I'm still thinking back to it.

I think I'm speaking for a lot of troops when I say that sometimes you're going through something in your life and you feel pretty alone. Then you get around other troops who are going through similar things or worse and it opened up my eyes. I left the conference and I feel like I'm going to be okay on civvy street.

Strategies for Maintaining Gains

Participants were asked what aspects of the course material they continued to use over time. Other than the goal setting skills and the lifeline planning tool, most reported that the course had served a more "transformational" role rather than being explicitly maintained through ongoing reference to the course material (transactional). Despite this, a number of participants described how they explicitly referred back to the course material over time.

I have a picture of the GPV's (gifts, passions and values) on my phone so that I can refer to it as I look through job postings.

The life plan is a tool for continuing reflection and it makes me think differently just because I have it. I have it in my office and I refer to it. In reality this course was really, really good for me. I'm still reflecting on it.

I came back more confident. I think that's because I'm engaged with my life plan and working it actively. It's another tool in my toolbox.

The life plan had the biggest impact. I keep looking at it every day and I've already actioned two items on it. I like the pull-outs from the book.



Thinking of my gifts passions and values has been helpful. I showed it to my therapist and we're actually going to use some of the tools to go through together.

I've been able to use the material to search for courses and employment opportunities and it's given me a reference point that has allowed me to apply for jobs that wouldn't necessarily have occurred to me before.

The binder, its hands on, and you can bring it home with you, and for me that's a big deal, because I'm the type of person that will revisit that.

Analysis

Program Goals

The stated goals of the program were to assist individuals to identify their “gifts” (skills applicable to the civilian world), “passions” (interests and activities most crucial for ongoing well-being) and “values” (criteria for judging what is important and motivators of action), in order to inform the creation of a “Life Plan,” a detailed multi-dimensional action plan. Goals identified by participants and stakeholders included getting emotional and social support, addressing fear, self-discovery, getting started again, accessing new information, comparing notes with peers, identifying priorities, developing tools, setting goals, finding a new identity, finding meaning and purpose and getting time to think.

Program Outcomes

According to the participants interviewed after completing the program, the Shaping Purpose program largely delivered on its stated objectives. Participants made a wide range of positive comments about the course and the material in the follow-up interviews. Many of the participants noted that they had already recommended the program to colleagues and/or Chain of Command. These recommendations were revealing about how participants felt about the value of the course material and process for themselves and their peers.

Negative feedback regarding the course content and goals came from a sub-group of participants who were seeking a more specific direction to follow for their careers. Without exception, these participants expressed appreciation for the opportunity to meet with peers, and for information gained during the sessions. They did not feel that they met their goals in attending, however, because they did not come away from the course with a specific career or job to pursue. As noted in the previous section on Process, participants also noted frustration over access issues related to the volume of information that was delivered. This may have also affected outcomes for some of the participants.

Participants reported positive changes in how they viewed past events in their lives, including difficult or traumatic experiences related to their service or transition, and also remarked on a number of changes in attitude and outlook that were sustained between the course completion and the follow-up evaluation interviews. One of the key areas of attitudinal change that participants identified was a renewed sense of hope



and a more positive outlook. This sense of renewed hope often translated into a heightened focus on planning for the future.

The systematic process of identifying personal goals, and connecting specific, planned actions to those goals in order to make progress towards a desired end state was the most commonly reported take-away from the course. Participants reported experiencing a new sense of clarity about what was most important to them in their lives, and actively engaging in goal-setting to align their current activities with desired future outcomes. A number of participants spoke about how the planning process had opened up constructive conversations about the future with their spouse or changed how they prioritized family activities.


Participants also talked about discovering that they had a contribution to make or that they had found a new sense of direction through the course. Other benefits were derived from the opportunity to share experiences with peers. Some found that the experience helped to normalize what they were feeling and going through in their military to civilian transition, lessening their isolation and their sense of stigma around their illness or injury. As one participant put it, “I realize we’re still here, and we still matter”.

Summary Evaluation of Products

Product evaluation identifies consequences of the program for participants to determine effectiveness and provide information for future program modifications. The final question was: Did the effort succeed?

According to the majority of the participants interviewed after completing the program, the Shaping Purpose program largely delivered on its stated objectives. Improvements to course outcomes will be linked to resolution of delivery (process) issues discussed in the previous chapter.

Participants reported a wide range of outcomes that were consistent with the goals of the course and their own goals entering the program. Participants found the material useful and relevant and derived benefit from the course material and process. Interviews with participants six months post program completion suggested the majority of those who benefited from the course were continuing to use a structured process of goal setting and system of accountability independent of the course written material.



OUR SOCIAL GROUPS ARE A SOURCE OF PERSONAL SECURITY, SOCIAL COMPANIONSHIP,
EMOTIONAL BONDING, INTELLECTUAL STIMULATION, AND COLLABORATIVE LEARNING ... THEY
PROVIDE US WITH A SENSE OF PLACE, PURPOSE, AND BELONGING

HASLAM ET AL. 2009.

7. Summary Assessment

The goal of this project was to conduct a comprehensive qualitative program evaluation of the Shaping Purpose program for military personnel, to assess the program's impact on military members transitioning from their military careers to civilian work and other roles. To inform the specific questions of the Context, Input, Process and Product (CIPP) evaluation framework, pre-program interviews were conducted with 60 military personnel and Veterans, to understand, in their own words, their transition challenges and goals in attending the Shaping Purpose program. In order to supplement information provided by these participants, thirteen interviews were also conducted with expert referral stakeholders.

Forty follow-up interviews were subsequently conducted with participants after they completed the program to assess program impacts. An additional twenty participants were interviewed a third time at 6 months in order to further understand their transition trajectories and to gauge durability of program impacts. Combining these data sources resulted in a master dataset of 134 interviews with 74 individuals, reflecting the experiences of Veterans and Stakeholders across multiple settings and phases of the MCT process. In total, 184 hours of interviews were analyzed to complete this evaluation.

Context

The stories gathered suggest several key themes in the challenges of military to civilian transition in the peri-release period for these participants. One of the key storylines that emerged suggested that entrance and belonging to the military family is contingent on ongoing performance. With belonging comes status as part of the elite, elevated from the civilian life they left behind and privileged with the opportunity to contribute to more meaningful and impactful work in the world. With illness or injury, ongoing performance may become impossible, and as a result personnel may find that their place and status in the military comes to an end. For most of these interviewees, exit from the military meant the loss of a preferred identity, and the loss of the opportunity to contribute to the work that they had learned and believed matters most.

Despite its operational value in motivating people to step up to the challenging work that must be done, the stoic performance culture of the military translated into a number of challenges for military personnel. Members spoke about hiding injuries or delaying help-seeking due to concern about reputation and career



advancement. They also talked about facing stigma for physical and mental health needs, and about rejection by peers and sometimes by the Chain of Command. Case managers linked delays in help-seeking to more complex military to civilian life transitions.

Within this context of lost status, stoicism and stigma, military members need to attend to their health, negotiate rehabilitation needs and/or adjust to any illness or disability. At the same time, they need to think ahead to the future, their practical responsibilities to family, their financial needs and a new identity to come. Finding a new role and purpose emerged as a primary task in letting go of the military identity, and negotiating a new post-military identity.

Throughout the system, case managers and military personnel alike commented on the lack of resources, and resulting systemic barriers to rehabilitation and transition supports. For military leadership, a “do more with less” budgetary and human resource climate created management tensions around prioritizing the needs of ill and injured personnel versus supporting the mission. Likewise, Case Managers were stretched thin by growing caseloads, and expressed concerns about maintaining quality of care. Case Managers also voiced their frustration over their inability to stay informed about frequent policy and service delivery changes in their own, and in other agencies, and a lack of information and coordination between agencies that contributed to service duplication and service gaps.

Inputs

The Shaping Purpose program’s framing of the key challenges of transitioning military personnel are largely aligned with the challenges identified in the context evaluation. In particular, the focus on finding meaning and purpose is highly relevant to releasing members who have lost or are about to lose the opportunity to contribute to work they have learned and believe is the most meaningful work they could be engaged in.

The use of a well-being model to frame areas for exploration and goal setting corresponds theoretically and practically to VAC’s (Thompson et al., 2017) research on domains and determinants of well-being. It may be useful for Shaping Purpose curriculum developers to explore whether outright adoption of the VAC model or alignment of language is possible. The “Happiness” domain of the well-being framework is based on Seligman’s (2012) research that has already been found useful with the US military (Donaldson, 2016).

The emphasis on a structured process of goal setting and system of accountability is consistent with best practices. Goal setting is considered to be a key evidence and cognitive behavioural therapy-based approach to assisting individuals cope with stress and improve their mental health and resiliency.

Process

The course format and location were deemed appropriate and conducive to learning by participants. The peer group cohort were found to be beneficial and helped support information needs, esteem needs and social



inclusion needs. Facilitators were judged to be genuine, concerned and knowledgeable. Material was found to be relevant and the course logic model, trajectory and content were coherent and relevant to participants.

The most significant concerns were raised regarding the volume of material presented within the time frame. Volume of material presented a barrier to accessing the curriculum and assimilation of learning for some participants. Process feedback suggests that the course material needs to be stream-lined, or the time period for delivery needs to be reconsidered.

Product

According to the majority of the participants interviewed after completing the program, the Shaping Purpose program delivered on its stated objectives. Improvements to course outcomes going forward will be linked to resolution of delivery (process) issues discussed in the previous section.

Participants reported a wide range of outcomes that were consistent with the goals of the course and their own goals entering the program. Participants found the material useful and relevant and derived benefit from the course material and process. Interviews with participants six months post program completion suggested the majority of those who benefited from the course were continuing to use a structured process of goal setting and system of accountability independent of the course written material.

The importance of family in supporting the transition process emerged from a number of the Expert Stakeholder interviews. A number of participants spoke about how the planning process had opened up constructive conversations about the future with their spouse, or changed how they prioritized family activities. Given the importance of family in the transition process, it may be beneficial for Shaping Purpose curriculum developers to explore the feasibility of including spouses in the course itself to support knowledge and skill transfer back into daily life.

Conclusions

Simmonds-Goulbourne (2009) likened MCT “preparedness” to “disaster preparedness”. Preparedness activities seek to put in place the required resources and capabilities to ensure effective and efficient responses to a known hazard, to ensure that that hazard does not overwhelm coping capacity and become a disaster. At this point we understand that MCT holds inevitable hazards for Veterans, and early preparation activities are most likely to be useful and preventative of later challenges.

The Shaping Purpose program has demonstrated its effectiveness as such a preparedness activity in the MCT context. It is relevant to the needs of releasing military personnel, demonstrates an adequate evidence base for its curriculum, has been responsive to formative feedback, has not produced negative outcomes, and produces outcomes desired by participants that appear to be durable over time. As one participant commented:

Its helped me think about, fight out, who I am, and that the military isn't the only thing that makes me who I am. Knowing that, there are things that I'm going to be doing in the future, and I'm excited for the future.



Limitations

As Stake notes, the function of this kind of research is not necessarily to map and conquer the world but to sophisticate the beholding of it (1995, p.43). Interviews conducted here allow us to make tentative conclusions about the broader contexts in which Veterans live with their MCT health challenges, and assess the appropriateness of proposed strategies to influence MCT trajectories. The conclusions, however, are limited to the population interviewed and may not reflect the experiences of members of the larger population.

In narrative research, the researcher must present evidence to support the conclusions they make and present the reasoning that led to their conclusions. The argument presented does not result in certainty; it produces likelihood (Polkinghorne, 1988). Popper proposed that verisimilitude is the limit of all scientific inquiry, and that in quantitative research, we limit our claims to the demonstration of the falsity of null hypotheses rather than “truth”. The conclusions presented here, likewise, remain tentative and are open to scholarly critique and consensus as the ultimate test of verisimilitude and trustworthiness (Polkinghorne, 1988, p. 177–178).

Final Word

The systems theorist Donella Meadows used an example from ecology to describe problem solving in complex systems. She writes that, planning efforts to protect endangered species used to be confined to the physical boundaries of parks. But park boundaries are regularly crossed by people, by migrating wildlife, by waters that flow in and out, or under the park, by effects of economic development at the edges of the park, by acid rain, or by climate change. In order to effectively manage the endangered species “health”, therefore, policy makers needed to think about a boundary wider than the parks official perimeter (Meadows, 2008).

If we conceptualize the problem of difficulties in MCT as “residing” within the military, or civilian society, or government policy, or, perhaps, the members themselves, we are unlikely to be able to address the larger systems issues. It is the nature of complex systems that they often create and maintain outcomes that no part of the system wants or intends (Meadows, 2008). The complex civilian/military/government system is no exception.

Change comes first from stepping outside of the limited information that can be seen from any single place in the system and getting an overview. From a wider perspective it can become more apparent how the system is producing unintended outcomes. Military to civilian life transition is known to be a challenging time for military personnel and yet our understanding of this population’s needs or the normative trajectory of this transition is incomplete. It is hoped that this program evaluation will contribute both to a better understanding of the effectiveness and relevance of the Shaping Purpose program, and also to a better understanding of the needs of this population in general to contribute to better service and support design, delivery and accessibility.



References

- Adler AM, Zamorksi M, Britt TW, (2011). The psychology of transition: Adapting to home after deployment. Book chapter in: *Deployment Psychology: Evidence-Based Strategies to Promote Mental Health in the Military*. Adler AM, Bliese PD, Castro CA (editors). American Psychology Association.
- Bergman, B. P., Burdett, H. J., & Greenberg, N. (2014). Service Life and Beyond – Institution or Culture? *The RUSI Journal*, 159(5), 60-68. doi:10.1080/03071847.2014.969946
- Betancourt JR, Green AR, Carrillo JE, Ananeh-Firempong O, (2003). Defining cultural competence: a practical framework for addressing racial/ethnic disparities in health and health care. *Public Health Rep.* 118(4):293-302.
- Brooks, GR, (2010). *Beyond the Crisis of Masculinity: A Trans theoretical Model for Male-Friendly Therapy*. Washington, DC: American Psychological Association.
- Castro CA, Kintzle S, (2014). Suicides in the military: the post-modern combat veteran and the Hemingway effect. *Curr. Psychiatry Rep.* 16(8):1-9.
- Cooper L, Caddick N, Godier L, Cooper A, Fossey M, (2016). Transition from the Military into Civilian Life: An Exploration of Cultural Competence. *Armed Forces & Society*. December.
- Corbin, J., & Strauss, A, (2015). *Basics of Qualitative Research*. Thousand Oaks, CA: Sage.
- Dallaire, R. A., & Wells, D. M. (2014). *The Transition to Civilian Life of Veterans*. Subcommittee on Veterans Affairs. Retrieved from www.senate-senat.ca/veac.asp
- Demers A.L, (2011). When veterans return: The role of community in reintegration. *Journal of Loss and Trauma.* 16(2):160-179.
- Donaldson, F. (2017). Resilience programs in emergency responder and military agencies. Winston Churchill Memorial Trust of Australia. https://www.churchilltrust.com.au/media/fellows/Donaldson_F_2016_Resilience_and_prevention_programs_for_use_in_emergency_services_1.pdf
- Forces in Mind Trust (2013). *The Transition Mapping Study UK: Understanding the transition process for Service personnel returning to civilian life*.
- Fox, J., & Pease, B. (2012). Military deployment, masculinity and trauma: Reviewing the connections. *The Journal of Men's Studies*, 20, 16–31.



- Goetz JP, LeCompte MD, (1984). *Ethnography and Qualitative Design in Educational Research*. New York, NY: Academic Press.
- Haslam SA, Jetten J, Postmes T, Haslam C. (2009). Social identity, health and well-being : an emerging agenda for applied psychology. *Applied Psychology*. 58(1):1-23.
- Hauptmann, S (2007). Structuring Audio Data with a "C-TOC". An Example for Analyzing Raw Data. *Forum Qualitative Sozialforschung / Forum: Qualitative Social Research*, 6(1), Art. 33, <http://nbn-resolving.de/urn:nbn:de:0114-fqs0501331>.
- Kintzle S, Rasheed JM, Castro CA (2016). *The state of the American Veteran: The Chicagoland Veterans Study*. Los Angeles, CA: Center for Innovation and Research on Veterans and Military Families. University of California School of Social Work..
- Kühn, T, Witzel, A (2000). Using a text databank in the evaluation of problem-centered. *Forum Qualitative Sozialforschung/Forum Qualitative Social Research*, 1(3), Art. 18, <http://www.qualitative-research.net/fqs-texte/3-00/3-00kuehnwitzel-e.htm> [Date of Access: 15.12.2004].
- Levitt, HM, Motulsky SL, Wertz FJ, Morrow S L, Ponterotto JG (2017). Recommendations for Designing and Reviewing Qualitative. *Qualitative Psychology*, 4(1), 2–22.
- Mathison, S. (1988). Why Triangulate. *Educational Researcher*, March. 13-17.
- Meadows, D (2008). *Thinking in Systems*. White River, VT: Chelsea Green
- Namey, E, Guest, G, Thairu, L, Johnson, L (2008). *Data Reduction Techniques for Large Qualitative Data Sets*.
- Nauta, MM. (2010). The Development, Evolution, and Status of Holland’s Theory of Vocational Personalities: Reflections and Future Directions for Counseling Psychology. *Journal of Counseling Psychology*, 57(1), 11-22.
- Office of the Veterans Ombudsman (OVO) (2017). *Transitioning Successfully: A Qualitative Study* <http://www.ombudsman-veterans.gc.ca/eng/reports/reports-reviews/transition>
- Polkinghorne, D. E. (1988). *Narrative knowing and the human sciences*. Albany, NY: SUNY Press.
- Rogers CR. Psychological adjustments of discharged service personnel. *Psychological Bulletin*. 1944;41(10):690-693.
- Ryan, G.W., & Bernard, H. R. (2003). Techniques to identify themes. *Field Methods*, 15(1). 85-109.
- Seligman, M. E. P. (2012). *Flourish: A Visionary New Understanding of Happiness and Well-being*. Simon and Schuster, New York: NY



- Simmonds Goulbourne, JD. (2009). Preparedness for civilian roles and retirement: Successful anticipatory socialization through the Jamaican military's Human Resource and Organization Development programs. (Ph.D. Dissertation), Fielding Graduate University, Ann Arbor, MI. Available from EBSCOhost psych database. (3351795)
- Shields, DM. (2016). Military Masculinity, Movies, and the DSM: Narratives of Institutionally (En)Gendered Trauma. *Psychology of Men & Masculinity*. 17(1), 64-73.
- Shields D, Kuhl D, Lutz K, Frender J, Baumann N, Lopretsi P. (2016). Mental Health and Well-Being of Military Veterans during Military to Civilian Transition: Review and Analysis of the Recent Literature. Vancouver, BC: Prepared for the Canadian Institute for Military and Veteran Health Research and Veterans Affairs Canada. 2016. <https://www.cimvhr.ca/resource-reports>
- Shields, D., Kuhl, D., & Westwood, M. (2017). Abject Masculinity and the Military: Articulating a Fulcrum of Struggle and Change. *Health Implications of Masculinity and Expressions of Male Gender Norms within Military Populations- Psychology of Men and Masculinity Special Issue*. Vol 18(3), 215-225.
- Stake, RE. (1995). *The Art of Case Study Research*. Thousand Oaks: Sage.
- Stufflebeam, D L, Shinkfield, AJ (2007). *Evaluation theory, models, and applications*. (Chapter 19). San Francisco: Jossey-Bass.
- Thompson JM, Lockhart, W, (2015). *Backgrounder for the Road to Civilian Life (R2CL) Program of Research*. Charlottetown PE: Research Directorate, Veterans Affairs Canada. Research Directorate Technical Report. Charlottetown.
- Thompson JM, VanTil L, Sweet J, Poirier A, McKinnon K, Dursun S, Sudom K, Zamorski M, Sareen J, Ross D, Hoskins C, Pedlar D. (2015). *Canadian Armed Forces Veterans: Mental Health Findings from the 2013 Life After Service Survey*. Charlottetown PE: Research Directorate, Veterans Affairs Canada. Research Directorate Technical Report. Charlottetown.
- Thompson JM, MacLean MB, Van Til L, Sudom K, Sweet J, Poirier A, Adams J, Horton V, Campbell C, Pedlar D. (2011). *Survey on Transition to Civilian Life: Report on Regular Force Veterans*. Research Directorate, Veterans Affairs Canada, Charlottetown, and Director General Military Personnel Research and Analysis, Department of National Defence, Ottawa.
- Thompson JM, Van Til L, Poirier A, Sweet J, McKinnon K, Sudom K, Dursun S, Pedlar D. (2014). *Health and WellBeing of Canadian Armed Forces Veterans: Findings from the 2013 Life After Service Survey*. Charlottetown PE: Research Directorate, Veterans Affairs Canada. Research Directorate Technical Report.



- Thompson JM, VanTil L, Zamorski MA, Garber B, Dursun S, Fikretoglu D, Ross D, Richardson JD, Sareen J, Sudom K, Courchesne C, Pedlar D. (2015). Mental health of Canadian Armed Forces Veterans – Review of Population Studies. *JMVHR*. 2(1):70-86.
- Thompson JM, Lockhart W, Roach MB, Atuel H, Bélanger S, Black T, Cox D, Cooper A, de Boer C, Dentry S, Hamner K, Shields D, Truusa, TT. (2017). Veterans’ Identities and Well-being in Transition to Civilian Life – A Resource for Policy Analysts, Program Designers, Service Providers and Researchers. Report of the Veterans’ Identities Research Theme Working Group, Canadian Institute for Military and Veteran Health Research Forum 2016. Charlottetown PE: Research Directorate, Veterans Affairs Canada. Research Directorate Technical Report.
- Van Til LD, Sweet J, Poirier A, McKinnon K, Sudom K, Dursun S, Pedlar D. (2017). Well-Being of Canadian Regular Force Veterans, Findings from LASS 2016 Survey. Charlottetown PE: Veterans Affairs Canada. Research Directorate Technical Report.
- Yuzda ES, Khan S, Punamiya A, Goodwin D, (2015). Shaping Purpose® Program on Military and Youth. Conference Poster Presentation. CIMVHR Forum Quebec City 2015



Appendix A - Questions for Referral Stakeholders

Semi-Structured Interview Sample Questions for Referral Stakeholders

1. Can you describe your role in members transition out of the military?
2. In your opinion, what are the key challenges or barriers that military personnel face as they transition out of their military careers and into civilian life?
3. What resources can military personnel access to assist in their adjustment to life and work after their military careers?
4. What resources do you think would be of benefit to Veterans in transition that are currently missing?
5. Do you perceive any gaps in members' preparation, knowledge, skills or abilities? What would make it easier for you to do your job?
6. Is there a stereotype or "typical" description of a person who will struggle or a person who will adjust easily to the transition?
7. Are you aware of the Shaping Purpose program? How do you see this program fitting into the full suite of transition programming offered by the CAF and VAC and SISIP?
8. Have you referred anybody to the program in the past? Without revealing any of the personal or identifying details of the cases, what do you think the participants you referred got out of the Shaping Purpose program?
9. Would you refer other personnel to the program? Why or why not?
10. What do you hope for as a main outcome of the program? Do you have any concerns?
11. What services and supports are the biggest success stories or the most important for transitioning Veterans?
12. Is there anything else that we should know that we haven't asked about or anything that you would like to add?



Appendix B - Questions for Program Participants

Semi-Structured Interview Sample Questions for Program Participants - First Interview

1. How did you come to be a member of the military? What prepared you for this career through your childhood, adolescence and early adulthood?
2. Was there a moment that you recall when you first felt like you had really “arrived” or identified as a member of the military?
3. What have been your best moments as a member of the military? Your proudest moment?
4. Much of the work is difficult, physically and/or emotionally. What was the roughest part to adjust to, working as a soldier/sailor/member of the airforce?
5. Who or what experiences were most influential in how you learned to cope with the demands of being in the military?
6. When did you decide that it was time to leave the military? What factors most influenced your decision? Is this a voluntary release?
7. How was the decision received by those you worked with? Or, if the release is not voluntary, how did you find out you were going to be released?
8. What services or supports were you offered to help you with the transition?
9. If anything, what worries you most about this transition?
10. As you contemplate leaving the military, is there anything you wish you had known, earlier in your career, that would have made this transition easier?
11. Have there been any surprises pertaining to your work, your family, your friendships, your free time during your transition?
12. How did you hear about the Shaping Purpose program?
13. What aspect of the program most interested you/seemed possibly useful or relevant to you?
14. What do you hope to gain from participating in the program?
15. What has been your biggest frustration during you transition? Biggest relief?
16. Is there anything else that we should know that we haven’t asked about or anything that you would like to add?



Appendix C - Follow-up Questions for Program Participants

Semi-Structured Interview Sample Questions for Program Participants – Follow-up Interview

1. What was your opinion of the program immediately after it ended?
2. What is your opinion of the program now, a week/ six-months later?
3. Would you refer a friend or peer?
4. What do you think are the strengths of the program?
5. What do you think are the weaknesses of the program?
6. Was the content relevant to you?
7. Is there anything missing?
8. Was the timing of your participation in the program right for you?
9. How did your participation in the program affect you after the program was completed?
10. What changes have you made or noticed since your participation in the program?
11. Is there anything you would do differently to prepare yourself to take the program?
12. Are you using material or skills from the course? What parts of the material do you still use?
13. Have your family or friends commented on any changes that you have made?
14. Is there anything else that we should know that I haven't asked about or anything that you would like to add?



Appendix D - Questions for Program Facilitators

Semi-Structured Interview Sample Questions for Program Facilitators

1. Can you describe your role as a Program Facilitator and how long you have been in this role?
2. In your opinion, what are the key challenges or barriers that military personnel face as they transition out of their military careers and into civilian life?
3. What resources do military personnel have access to, that you are aware of, to assist in their adjustment to life and work after their military careers? What are the most important services and supports for transitioning Veterans?
4. What resources do you think would be of benefit to Veterans in transition that are currently missing?
5. How does this program fit within those services?
6. What are the main objectives of this program?
7. Do you perceive any gaps in members' preparation, knowledge, skills or abilities relevant to their successful transition that the program assists in addressing?
8. Without revealing any of the personal or identifying details of the past or present participants, what do you think participants get out of the Shaping Purpose program?
9. What do you hope for as a main outcome of the program?
10. Can you describe the ideal participant?
11. Who is this program not suitable for?
12. How does the program make a difference – what is the theory of change?

