

5-25-2024

Barriers to Housing for Female Veterans who Have Been Homeless After Transitioning from the Military

Angelika Johnson
Walden University

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Walden University

College of Psychology and Community Services

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Angelika A. Johnson

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the review committee have been made.

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Walden University

2024

Abstract

Barriers to Housing for Female Veterans who Have Been Homeless After Transitioning

from the Military

by

Angelika A. Johnson

MS, Walden University, 2016

BS, University of Maryland University College, 2013

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Human and Social Services

Walden University

May 2024

Abstract

Homelessness among the female veteran population has increased in the United States, and it is a national concern. Precipitating complexities such as posttraumatic stress disorder, substance abuse, and health-related issues are variables that contribute to female veterans becoming homeless after transitioning from the military. In this generic qualitative study, the aim was to explore the barriers to housing for female veterans who have experienced homelessness after transitioning from the military. Bronfenbrenner's ecological systems theory was the framework that guided this study, as it is designed to be able to explore the different levels of systems that significantly impact an individual throughout their lives. Purposeful and snowball sampling was used to recruit six female veterans who served in any military branch. Data was collected by conducting semistructured interviews, which provided the information needed to address the gap in research. Key findings from this study were that the participants faced many barriers and challenges when they transitioned out of the military with securing employability, adequate housing, and accessible resources. Lastly, the findings from the study may bring social change and promote the increase of housing resources for female veterans who are in danger of becoming homeless.

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Dedication

First, I would like to give honor to my God. He pushed me to the limits, and I passed the test. Thank you! To my dear, sweet children, my parents, and special friends. I cannot thank you enough for the immense support you all have provided me throughout my PhD journey. Most importantly, I would like to thank the love of my life, my husband, Desi. Thank you for your continued support and for caring for our home, where I lacked. You are much appreciated, and I will forever be indebted to you. I know I could not have done this without you all being a part of my team and encouraging me. As a female veteran, I want to truly thank the female veterans who shared their experiences with me so that I could produce a study that can assist them and others in the near future. Lastly, thank you to all my known and unknown prayer warriors. Your prayers took part in carrying me to the end. I am proud to say that I had every doubt in my mind, but I continued to conquer a goal I have been aiming to achieve my entire life.

Acknowledgments

This is a special place to recognize the outstanding faculty that guided me. I want to thank Dr. Nicole V. Hamilton, my chair, for all your support, guidance, words of advice, and, most of all, that hard push in the back. I could not have asked for a better chair. Although Dr. Hamilton was not my original Chair, we made things work for us. Even though this journey was long and adventurous, I appreciate every moment.

To my committee member and long-time professor, Dr. Gregory Hickman (my Snoopy connoisseur) I could not have had a better professor throughout my dissertation shell. You have provided me with so much wisdom and encouragement you could not begin to understand. Your sternness was pivotal in my working diligently to complete my Prospectus. I had to have you as a part of my committee and travel with me to the finish line. A special acknowledgment goes to a young lady who was a mini version of my chair and committee member. She made sure I sent her drafts so that she could look over my Prospectus before it got approved and assured me that everything would work out with my hard work and dedication. Thank you very much, Dr. Dorothy Seabrook, for your support, motivation, guidance, and positivity throughout this journey. I am forever grateful for you. With the support of my special friend Dr. Vetter, you challenged me more than you know as my personal mentor. Love you! Also, a special thanks to several doctoral students (Tifini and Tejanae) who supported me, provided me with encouragement and gave me the extra push I needed. You guys' rock! Lastly, WOCWAG, the best writing accountability group in the land!!!!!!!!!!!!

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Chapter 1: Introduction to the Study

Female veteran homelessness has been recognized as a major concern in the United States (Felder & Delany, 2020). Because of the rapid increase in female veteran homelessness, the Veterans Administration (VA) had an idea based on reports (VA National Center on Homelessness Among Veterans, 2016). I identified the barriers to housing which female veterans encountered once they transitioned out of the military. Felder and Delany (2020) discussed the need for research addressing the increased homelessness rate among women veterans. According to reports from the United States Department of Housing and Urban Development (HUD, 2021), female veterans made up 12% of the homeless rate compared to their male counterparts at 1% because female veterans have children under the age of 18 and are considered unsheltered and faced difficulties with being housed.

Furthermore, female veterans who identified as homeless had a significant influx in percentages compared to their male counterparts and their nonveteran counterparts due to multiple barriers (Hassan et al., 2023). The female veteran population increased between the years 2015 through 2025 (Sheahan et al., 2022). Because of the needs of female veterans and female veterans with children, options are limited or unavailable compared to their male counterparts (Adams et al., 2021). There were still challenges with female veteran homelessness, and the VA was aware of the limited housing options for female veterans and their families (Richman, 2018). Gender-specific housing has been a constant struggle for female veterans seeking suitable living arrangements (Kim et al., 2019).

Additionally, the female homeless population has grown (Kim et al., 2023). Female veterans still face challenges when obtaining suitable housing. Developing safer housing options for female veterans could decrease homelessness and motivate them to seek social services. The information gained from this study brought awareness to the barriers that prevent female veterans from seeking services to obtain housing after veterans have separated from the military to avoid homelessness.

Studies on the nation's homeless population outlined several barriers and risk factors causing homelessness (Peng et al., 2020; Watts, 2021). Projected housing programs provided aid to homeless male and female veterans and their housing needs (Ijadi-Maghsoodi et al., 2021; National Center on Homelessness among Veterans, 2016). Multiple factors played a role in the veteran homeless population that serve as barriers to their care, including socioeconomic status, substance misuse, mental health disorders, and access to services (Felder & Delaney, 2020). Homelessness among the veteran population has been a national concern for quite some time.

According to the HUD (Henry et al., 2020), there was an estimated 49,933 veterans who were homeless. Kenny and Yoder (2019) reported that more female veterans suffer from homelessness than males. Additionally, the National Center for Homelessness indicated that the female veteran population would continue to increase because of the influx of women who are in the military. Felder and Delany (2020) reported from the Annual Homeless Assessment Report (AHAR) that female veteran homelessness rates increased substantially between 2009 and 2019. The distinction between female and male veterans highlighted the lack of resources for suitable housing

based on female veterans' needs (e.g., military sexually traumatized victims). Seeking additional services has been challenging for female veterans because they get questioned and antagonized when attending the VA for medical appointments by other patrons and staff (National Academies of Sciences, 2018). Also, there was very little research on how female veterans differed from male veterans transitioning from the military (Fletcher et al., 2022). As more females transition out of the military, Pooler et al., (2021) suggested that more services and community resources, such as financial classes, childcare, and peer support groups, would be helpful. Therefore, having access to this information was vitally important. Thus, with this study I aimed to fill the gap in the literature by providing some insight into female veterans' lived experiences.

Female veterans face many challenges that prevent them from receiving available housing (Bond et al., 2022). Researchers identified military sexual trauma, unemployment, disability, declining health issues, anxiety, and posttraumatic stress disorder (PTSD) as some of the homeless veterans' prominent characteristics that led them to homelessness (McInnes et al., 2022). Moreover, Hitch et al. (2023) conducted a qualitative study to determine the barriers that may have led female veterans to homelessness after transitioning out of the military. Hitch et al. concluded that the lack of information regarding availability, limited access to services, and lack of coordination across services were the three main barriers women veterans experienced. The importance of my study was to identify the need for gender-specific housing for female veterans who have transitioned out of the military. Lastly, Kline et al. (2021) indicated that many veterans commonly underutilized mental health services because of perceived

barriers (. As a result, veterans postponed receiving mental health treatment or did not seek mental health services.

Consequently, veterans have difficulties with social connections with the rest of society, which can become debilitating and cause the veteran to experience loneliness (Wilson et al., 2018). Taylor et al. (2020) found that some veterans felt disconnected socially and mentally from the civilian population after deployment. Veterans' presumptions about the lack of available resources (e.g., housing and healthcare) may discourage them from seeking available care (Fried et al., 2018). Additionally, veterans felt they would not be afforded employment opportunities when seeking treatment based on their healthcare needs when transitioning from the military. According to Fried et al. (2018), male and female veterans may be concerned about being judged and may not seek healthcare services when transitioning to civilian life. Information from the present study can clarify female veterans' challenges, and the information may be used to enhance access to services.

Although the VA has improved its medical services for female veterans, there was still a significant concern with accessibility to other adequate social services, including safe housing options for the veteran female population (Marshall et al., 2021). Unfortunately, gender-specific supportive housing is scarce, and the lack of separation and safety measures could cause more mental anguish for female veterans (Kim et al., 2023). Gathering information from female veterans who have been homeless on the barriers to housing after transitioning out of the military can clarify and identify other

needs that will address the gaps in limited resources, including the lack of transitional housing for female veterans and their families.

Background

There have been studies conducted on the nation's homeless population. The approximate population comprises male and female veterans (Felder & Delany, 2020). Multiple factors play a role in the veteran homeless population that serve as barriers to their care, including socioeconomic status, substance misuse, mental health disorders, and access to services. (Creech et al., 2015). Homelessness among the veteran population has been a national concern for quite some time.

According to Montgomery et al. (2020), female veterans lack housing stability more than their male counterparts. The National Center of Homelessness (2016) reported that female veterans suffer from homelessness more than males and that the female veteran population would continue to increase because of the influx of women that are in the military. Felder and Delany (2020) found that female veteran homelessness rates increased substantially between 2009 - 2019. The distinction between female and male veterans is the lack of resources for suitable housing based on female veterans' needs (e.g., military sexual traumatized victims). Seeking additional services has been challenging for female veterans because they get questioned and antagonized when attending the VA for medical appointments by other patrons and staff (National Academies of Sciences, 2018). Also, there is very little research on how female veterans differ from male veterans transitioning from the military (Fletcher et al., 2022). As more females are transitioning out of the military Schultz et al., (2023) suggested more services

and community resources such as financial classes, childcare, and peer support groups would be helpful. Therefore, having access to this information is vitally important. Thus, I aimed to fill the gap in the literature by providing some insight into female veterans' lived experiences.

Female veterans faced many challenges that prevented them from receiving available housing (Strong et al., 2018). Researchers identified military sexual trauma, unemployment, disability, declining health issues, anxiety, and PTSD as some of the homeless veterans' prominent characteristics that led them to homelessness (Nitcher et al., 2023). Moreover, Felder et al. (2020) conducted a qualitative study to determine the barriers that may have led female veterans to homelessness after transitioning out of the military. Felder et al. concluded that the lack of information regarding the availability, limited access to services, and lack of coordination across services were the three main barriers women veterans experienced. The researchers indicated that many veterans commonly underutilized mental health services because of perceived barriers. As a result, veterans postpone receiving mental health treatment or do not use mental health services.

Consequently, veterans have difficulties with social connections with the rest of society, which can become debilitating and cause the veteran to experience loneliness (Wilson et al., 2018). Kintzle et al. (2018) found that some veterans felt disconnected socially and mentally from the civilian population after deployment. Veterans' presumptions about the lack of available resources (e.g., housing and healthcare) may discourage them from seeking available care (Murphy et al., 2018). Additionally, veterans felt they would not be afforded the employment opportunity when seeking

treatment based on their healthcare needs when transitioning from the military. Based on Campbell et al. (2021) findings, male and female veterans may be concerned about being judged and may not seek the healthcare services needed when transitioning to civilian life. Information from the present study can clarify the challenges female veterans face, and the information may be used to enhance access to services.

Problem Statement

Homelessness in the United States slightly increased between 2007 and 2017 (Willison et al., 2023). Among the homeless population, the bulk of the increase between 2016–2017 and 2017–2018 was in the West Coast states (Henry et al., 2020). To clarify, homelessness in the United States in January 2019 was 567,715 people, compared to 553,742 people in January 2017 (Henry et al., 2017, 2020). Consequently, the homeless veteran population improved slightly in the last decade leading up to the COVID-19 pandemic, which increased homelessness again (Shane, 2021). Henry et al. (2020) discussed the lack of adequate housing to accommodate homelessness as a reason for the rise in homelessness.

Moranda (2020) explained why female veterans were more likely to be homeless than nonveteran women. Female veterans have experienced trauma at higher rates than the general population, which was a primary component of becoming homeless, as opposed to non-veteran women (VA, 2020b). Moranda revealed that challenges such as PTSD, substance misuse, and health-related issues contribute to female veterans becoming homeless after transitioning out of the military. Female veterans transitioning out of the military usually face many challenges, such as high rates of trauma that include

sexual trauma and mental health issues (Bond et al., 2022). Researchers found that homeless female veterans who were at risk for homelessness experienced military sexual trauma, which increased by 57%, and 49% increased PTSD diagnosis to include substance use disorders (Mulcahy et al., 2021). These experiences have led female veterans to feel uncertain about housing options that might be suitable and safe (Ritchie, 2019).

Disabilities, unemployment, and marital status are considered some proponents of female veterans' homelessness (Kenny & Yoder, 2019) and serve as deterrents for female veterans. Mental health issues are concerning to veterans because they have led them to become isolated or depressed. Barriers such as affordability and the inability to take time away from work discourage veterans from seeking further treatment (National Academies Press, 2018). Also, female veterans are more likely to experience trauma, financial instability, and a lack of resources (gender-specific housing; Kim et al., 2023).

Furthermore, the creation of barriers can make individuals feel devalued and not welcome, especially due to a mental illness (Smith & Applegate, 2018). Therefore, veterans did not desire to seek assistance. Challenges in seeking care or assistance were significant in leading to homelessness among veterans in the United States (Nichter et al., 2020). Although there has been previous research on the lived experiences of the barriers to housing for female veterans transitioning from the military illuminate vital findings, I have found no research that has examined female veterans transiting from the military, obtaining gender-specific housing options, and the barriers to housing. Given this, further research is warranted that could examine gender-specific housing to address the

documented lack of resources that may act as barriers that prevent female veterans from using services to obtain housing after transitioning from the military. In this qualitative study, I aimed to better understand the barriers that prevent female veterans transitioning from the military who have experienced homelessness from using services to secure housing.

Purpose of the Study

In this generic qualitative study, I aimed to explore the barriers to housing for female veterans who have experienced homelessness after transitioning from the military. There is very little research on gender-specific housing accommodating female veterans and their children. Female veterans who have experienced homelessness after separating from the military served as participants in this study. Researchers identified that the veteran female population has experienced several challenges after transitioning out of the military (Rattray et al., 2023). Those challenges included biological, psychological, and social factors within their homes and communities (Strong et al., 2018). This study can promote social change by collecting data and examining female veterans' lived experiences of the barriers to using social services. I aimed to better understand what female veterans needed before transitioning out of the military to help assist with the appropriate services to maintain stable housing. The findings from this study provided more insight into why female veterans are hesitant to use social services and the risk factors that lead to homelessness.

Research Question

What are the barriers to housing for female veterans who have experienced homelessness after transitioning from the military?

Theoretical Framework

Using Bronfenbrenner's (1976) ecological systems theory, I examined the psychological impact of several levels of homelessness on individuals. An individual's experience with homelessness can be classified within the context of Bronfenbrenner's five interdependent ecological system levels (i.e., *microsystem*, *mesosystem*, *exosystem*, *macrosystem*, and *chronosystem*). Bronfenbrenner (1977; 1994) described the microsystem as the patterns generated by the activities, social roles, and interpersonal relationships of persons in their environment (e.g., family, peer groups, and institutions). According to the American Occupational Therapy Association (2020), experiences inside the microsystem progressively and persistently affect the behavior of individuals and groups.

Some veterans at risk for homelessness struggled to properly complete tasks needed to acquire resources or participate in programs, thus negatively impacting them through restricted family and social networks (HUD, 2021). Mental and physical health difficulties can also, at times, be challenging when navigating resources such as housing applications and the procedures to gain access to resources. According to Gabrielian et al. (2018), a lack of social support contributed to the decline of those who received assistance. Additionally, Gadermann et al. (2021) discovered that a lack of social support

also contributed to an adverse perception of one's self-efficacy when struggling with finances and gaining access to resources.

Bronfenbrenner (1977) defined the mesosystem as the interrelationships between two or more microsystems with which an individual interacts. According to Bronfenbrenner (1977, 1994), the microlevel system, such as living in a shelter, may affect another system. A study conducted by Shadmi et al. (2020) found that many homeless individuals lacked access to reliable and accurate information about the resources available to them. The perceived bureaucracy discouraged them from requesting and obtaining assistance from public organizations.

The exosystem level consists of interactions between two or more environments, none of which touch the human directly (Bronfenbrenner, 1977,1994). Yet, the occurrence of the event indirectly affects processes inside the individual's immediate environment (Bronfenbrenner, 1994). For example, exosystem elements include economic situations that may impact programs that help people experiencing homelessness.

The macrosystem level is a cultural "blueprint" that can influence the social structures and activities of the immediate system levels (Bronfenbrenner, 1977, 1994). This level included organizational, social, cultural, and political contexts, which may affect interactions within other systems. It also consisted of the overarching patterns found in the microsystem, mesosystem-, and exosystem-level characteristics of a given culture or subculture, with specific reference to the belief system, bodies of knowledge, material resources, customs, lifestyles, opportunity structures, hazards, and life course

that are embedded in each of these system levels (Bronfenbrenner, 1994). For example, homeless individuals may be subjected to a variety of forms of discrimination daily.

Bronfenbrenner's (1994) ecological systems theory's final level is that the chronosystem involved continuity or change (e.g., historical events) of the individual and the environment over the life span. For example, some people who are homeless may have made poor choices in their lives, or they may have been destined to be without a home due to underprivileged beginnings or life challenges.

My research question, “what are the barriers to housing for female veterans who have experienced homelessness after transitioning out of the military?”, is directly related to the ecological system theory due to environmental and socioeconomic factors that can contribute to homelessness. The ecological systems theory supported my study because it specified the different systems that can impact the environment and the growth of individuals. Bronfenbrenner (1977, 1994) suggested that the environment in which a person grows up could impact their development.

Felder and Delaney (2020) explored traumatic events that female veterans experienced before military service, during military service, and after military service. However, Bronfenbrenner's (1997, 1994) ecological systems theory indicated that some connections with individuals' life events, decisions, and actions could have shared correlations with individuals experiencing homelessness; the theory does not determine if an individual will experience homelessness. Lastly, throughout my study, the barriers faced by female veterans could have been directly reflected in one environment. Examining the lived experiences of barriers to housing for female veterans after

transitioning from the military can provide other factors that impact female veterans' housing options.

Homelessness alone can impact an individual at any point in life and cause significant distress. Female veterans have struggled with societal and environmental challenges before their military enlistment. Incorporating this theory into my study identifies the many facets that impacted female veterans before their enlistment (see Campbell et al., 2021). Most importantly, the ecological systems theory was helpful in my study because it highlights other barriers that may have impacted or increased the risk of female veterans becoming homeless.

Nature of the Study

In this study, I examined the barriers to housing for female veterans who have experienced homelessness after transitioning from the military. A generic qualitative research design was appropriate because it allowed me to explore barriers through conversation and interviews. Moreover, a generic qualitative approach also provided female veterans with an opportunity to describe how barriers may have affected their willingness to seek assistance in obtaining transitional housing after military separation.

According to Robinson (2013), qualitative studies are appropriate for smaller samples because recruiting a larger sample can be time consuming and offer little more information than expected. Qualitative studies focus on in-depth interviews and smaller studies to gain a detailed understanding of the phenomenon (Dworkin, 2012). I used purposeful and snowball sampling to recruit 6 participants to gather information about how barriers affected the participants' decisions regarding seeking social services for

housing after they transitioned from the military. Also, Guest et al. (2016) suggested that researchers use eight to 12 participant interviews for sampling to reach saturation. The criteria to be eligible for this study include participants who are (a) female, (b) veterans, and (c) currently or formerly experiencing homelessness.

Purposeful sampling is used in qualitative research because it involved identifying and selecting participants who are knowledgeable of or have experienced the phenomenon of interest (Palinkas et al., 2015). Snowball sampling was used to attract a marginalized audience when it can become challenging to locate others who are a part of their group (see Crossman, 2019). This method could also gain additional participants because of the reluctance of others throughout the study (Tyrrer & Heyman, 2016). Purposive and snowball sampling were appropriate for this study because female veterans were selected based on their knowledge and experience and provide unique and different perspectives on the phenomenon as they have lived it.

Participants for this study were recruited from a nonprofit organization that has homeless veteran programs. Confirmation was received from the administrative offices requesting to post flyers in the facility. Once I received approval from the institutional review board (IRB), I forwarded the flyers (see Appendix A) to the nonprofit organization.

All participants interested in participating in the study met all the criteria to be selected for an interview. The female veteran must have been homeless after military separation. There was no age requirement because people separate at different ages. Lastly, female veterans must have separated from the military and have been identified as

homeless (couch surfing, shelters). Individuals who did not meet the inclusion criteria were excluded. Those who met the criteria were asked if they wanted to participate in the study. Interviews occurred at the VA shelters, library conference rooms, or outside using a digital recording device. Semistructured interviews were comprised of open-ended questions and met Walden University's standards. Each question was based on specifics about the research question. The interview questions were subtle and explored the research question by gathering as much useful information as possible.

I used MS Excel to load and transcribe the data from the tape recordings of the participants to investigate how female veterans describe their lived experiences associated with homelessness and the barriers they have faced seeking services for available housing. MS Excel allowed me to code the collected data to create a systematic meaning of the information provided during the interview by creating themes and subthemes. Lastly, recoding any data was addressed to create codes, subthemes, and themes based on the interview findings (see Tesch, 2013).

Definitions

DD 214 (Department of Defense form): Documentation that certifies an individual's release from active duty, reserve, or national guard component whether a service member retires, separates, or is discharged from military service (U.S. Department of Defense, 2022).

Deployment: A deployment is the movement of military members outside the United States and its territories (U.S. Department of Veterans Affairs, 2019).

Female/women veterans: Females/women who once served in the military as an active duty, reservist, or national guard component (Ritchie, 2019).

Military Sexual Trauma (MST): The VA uses the term military sexual trauma to describe instances of sexual assault or repeated, threatening sexual harassment that a veteran endured while in military service (Department of Justice, 2017).

Military transition: A military transition is a change from a military member to a civilian after serving in the military (Cox et al., 2018).

Military Transition Postactive Duty: A change in oneself and the surrounding environment that necessitates a shift in one's behavior and interactions with others. The changes are associated with anticipated, unplanned, and non-event occurrences (Wilson, 2015).

Posttraumatic Stress Disorder (PTSD): This mental disease is triggered by either experiencing or witnessing a traumatic event. Symptoms can include flashbacks, nightmares, extreme anxiety, and uncontrollable thoughts about the traumatic experience. Anyone threatened with death, serious injury, or sexual assault (Mayo Clinic, 2017; American Psychiatric Association [APA], 2013).

Transitional housing: A program developed to provide supportive housing options for homeless veterans to increase their chances of attaining stable housing (Veteran Affairs, 2024).

United States Military: The United States military, also known as the United States Armed Forces, comprises of six branches (Our Forces, 2024 May).

Assumptions

There were several assumptions in the study that could leave an individual wondering if the information is true or credible. The first assumption was that the participants are female veterans who have experienced homelessness and have faced barriers when seeking housing services. My second general assumption of the study was that participants would respond to the best of their ability. In addition, I assumed that participants understood the importance of this study. I also assumed that my interview guide was valid. The participants understood the instrument and responded objectively and honestly. Lastly, I assumed that my interpretation of the data reflected what participants intended to share.

Scope and Delimitations

I examined the barriers faced by female veterans who have experienced homelessness and have transitioned out of the military. One of my main focuses for this study is understanding the barriers that female veterans face when seeking transitional housing after they have separated from the military. Although male veterans experienced homelessness too, the homeless female veteran population is significantly larger, so I conducted my study on female veterans because of the increase in homelessness by 2025 (Felder & Delany, 2020). I interviewed female veterans who have transitioned out of the military who have faced challenges that discouraged them from seeking housing services.

Transferability was based on the outcomes of the study. Shenton (2004) classified transferability as providing rich, adequate details so that the reader can place themselves in the situation presented to them. Providing loaded paragraphs with as much information

as possible and ensuring the details are descriptive can also increase the chances of transferability.

In a qualitative study, delimitations are elements that can be controlled and generalized (Simon, 2011). Throughout the process, it is evident that the female veterans meet the criteria of a veteran. Female veterans knew the exclusion criteria. I specified the definition of female veteran in the hopes that the participants would understand if they could participate in the study. This is important so that the data collected will be captured from individuals who meet the inclusion criteria.

Limitations

Several limitations may affect the findings of my study. A limitation is an issue that may be beyond the researcher's control (Simon, 2011). Therefore, it is necessary to consider those limitations when researching and recruiting current or past homeless female veterans. The study had a small sample size of female veterans who provided limited information identifying them as veterans, potentially resulting in saturation (see Vasileiou et al., 2018). Dworkin (2012) mentioned that a small sample for qualitative studies is sufficient to conduct in-depth interviews and is dependent on the phenomena. Also, the findings of my study may not be generalized because of the small sample size, but they could still produce quality information (see Maxwell, 2021). I focused only on females who identify as veterans and who have been homeless. To assist with recruiting female veterans, I recruited from a nonprofit organization group by contacting the administrative offices via email and requesting to post flyers in their facility.

Another limitation was the potential for confusion over the definition of homeless veteran. To combat this, I prepared a detailed definition of a homeless veteran. All participants' veteran status were self-verified before starting the interview. Most importantly, female veterans must have been separated from the military with an indicator stating so. To prevent any biases that I may have, I conducted member checking for participants, allowing them to review their responses before completing the study. I was careful that the interpretation of the data was not encapsulated by my personal biases, as I am also a female veteran. To manage any biases, I have consulted with the participants and asked them to review the results based on their beliefs.

Significance

The importance of this study was to address the gap as it relates to examining the lived experiences of the barriers to housing for female veterans after transitioning out of the military. Military programs, such as soldier for life-transition assistance program (SFL-TAP) that assisted service members when they prepared to transition out of the military, can benefit from the data retrieved from this study and the VA. Homeless shelters, battered women facilities, Easter Seals, community outreach programs, and other nonprofit organizations would benefit from the results of this study to raise awareness for gender-specific housing. The VA currently has programs established to assist veterans with housing options, but they are currently focused on something other than gender-specific housing. The information gathered from this study may result in an understanding of the multiple barriers that play an integral role in female veterans seeking available services that may affect their housing stability.

Several other studies have been conducted that focus more on mental health concerns, military sexual trauma, and financial instability as barriers (McLean et al., 2022). Homeless female veterans have unique situations that have been overlooked, but some compelling progress has been made in addressing their necessities (Kim et al., 2023). Researchers have focused on the barriers female veterans describe that hinder them from using social services. However, very few focus on housing options once female veterans transition out of the military (Cheney et al., 2018; Hamilton et al., 2012).

The results from this study could inform providers of how multiple barriers affect female veterans' use of social services. Human services professionals could use the information from the study to advocate for or develop cultural awareness seminars that address the challenges faced by female veterans. The seminars could focus on dismantling challenges and promoting social change by breaking down barriers that may prevent female veterans from seeking appropriate social services. Dedicating time and receiving financial support can provide the opportunity to build more gender-specific transitional housing for female veterans who are currently homeless or who are facing displacement from their homes.

Summary

In this chapter, I have provided details on the background, problem statement, purpose of the study, research question, nature of the study, definitions, assumptions, scope, delimitations, limitations, and significance of the lived experiences of the barriers to housing for female veterans transitioning out of the military. In Chapter 2, I provide a detailed review of Bronfenbrenner's ecological systems theory as it relates to my topic,

the areas of homeless female veterans, and the barriers female veterans have faced when accessing social services, including gender-specific housing.

Chapter 2: Literature Review

In this qualitative study, I aimed to examine the lived experiences of barriers to housing for female veterans after transitioning from the military. The VA (2017) reported that the probability of female veteran homelessness is two to four times more likely to occur than their male counterparts because of income, age, location, and, most importantly, the lack of resources provided by the VA. Most of the research conducted from 1994-2010 focused on the risks that led female veterans to become homeless (Tsai & Rosenheck, 2015). What were found to be the most indicating factors of homelessness among female veterans were unemployment, disabilities, or being single (Kenny & Yoder, 2019). Although the VA provides housing options for female veterans, barriers still limit them from adequate housing.

Literature Search Strategy

The literature to support the present study stemmed from searches through several databases, including ProQuest Central, PsycArticles, PsychInfo, ScienceDirect, Social Work Abstracts, SocINDEX with Full Text, Google Scholar, VA information, and resources available through Walden University databases. The combination of these terms included topics that focused on labeling, stereotyping, challenges, and barriers. The identified key terms used for the literature search were *deployment*, *female/women veterans*, *lived experiences*, *homelessness*, *mental health*, *limited access to resources*, *military transition*, *military sexual trauma*, *transitional housing*, *United States military*, and *post-active duty*.

Theoretical Foundation

The ecological model of development, created by Bronfenbrenner (1977), illustrates that the environment consists of systems that influence a person's life throughout and over time. Thus, it was appropriate to explore the lived experiences of barriers to housing for female veterans after transitioning from the military and examine their lived experiences using this theory. This theory is divided into five subcategories that capture each component of the ecological system and how it relates to female veterans after transitioning from the military. Bronfenbrenner concluded that risk factors (i.e., environment, economic status) play an important role in how a person could become homeless. The ecological theory can be used to interpret how homeless female veterans are affected by social class and background. Nonetheless, this theory's five subcategories define how each system has impacted female veterans and their individual experiences with homelessness.

Microsystem

The microsystem, according to Bronfenbrenner (1979), is a pattern of activities, roles, interpersonal relations, and experiences that develop when a person is in a given setting. Approaching the study using this framework is appropriate due to the design and influence of the different structures and the description of the influence of different environmental systems. The ecological theory can be used to address the phases of life and environments female veterans may encounter as soldiers seeking assistance during social encounters.

Mesosystem

The mesosystem consists of extended family members and broader social networks (Bronfenbrenner, 1979). This system is closely tied to the microsystem (Bronfenbrenner, 2000). Typically, the mesosystem consists of interactions between family, school, and peers; for some children, it may also include church, camp, or the workplace. In this study, the workplace, military, and social services fall into the mesosystem category.

Exosystem

The next system, the exosystem, refers to the influence of an individual on external circumstances that extend beyond their direct environment (Bronfenbrenner, 1979). Every resource supplied by the exosystem will either improve or degrade the quality of interactions inside the microsystem and mesosystems). Bronfenbrenner (1974) argued that employment, local characteristics, health, welfare services, government agencies, school-community interaction, and informal social networks are all components of this system.

Macrosystem

The fourth layer is the macrosystem, which consists of larger contexts, and the outer layer serves as the basis for human relationships (Bronfenbrenner, 1979). The macrosystem consists of cultural beliefs that are influenced by the other layers of the ecological system. Ultimately, the macrosystem affects the microsystem, which is the layer that affects the child directly. This layer includes the governance, rules, laws, and practices of an individual's culture, subculture, or social class and broad and social

philosophies, values, and belief systems. This layer covers a large spectrum of experiences.

Chronosystem

Bronfenbrenner's (1979) model is the chronosystem's final level model.

According to Bronfenbrenner (1977), the chronosystem encompasses the social and historical conditions, transitions, and adaptations of humans and their surroundings over time. Bronfenbrenner (1979) contended that the chronosystem captures the dynamic environmental transitions, including the child's entries, exits, milestones, and turning points over time.

The significance of the ecological theory is that it focuses on several environments and cultural backgrounds (Bronfenbrenner, 1979). Each component of the ecological theory identifies how female veterans' personal experiences of homelessness are connected. According to Bronfenbrenner, risk factors can be a result of homelessness, which could have stemmed from environmental circumstances, socioeconomic statuses, and limited housing options. Literature is steadily increasing about female veteran homelessness. Research is lacking on the perception of female veterans becoming homeless because of the underutilization of social services available to them. Exploring this topic will increase awareness for female veterans of social services available to them and could inform the VA on what perceptions female veterans have regarding underutilizing services.

Bronfenbrenner's (1977) ecological theory identifies factors that can lead to female veteran homelessness. Because the ecological theory defines how individuals'

environments and socioeconomic factors can contribute to homelessness, this model can examine the risk factors and indicators of what led to homelessness based on individual experiences after transitioning out of the military. Risk factors range from the lack of resources, unemployment, underutilization of social services, and mental health issues. This model can preview conditions that female veterans may have experienced (National Coalition for the Homeless, 2016).

Literature Review

Risk Factors and Prevention of Homelessness

The HUD 2020 Annual Homeless Assessment Report (AHAR) reported roughly 580,000 homeless people in the United States in 2020. The largest homeless populations were generally in large cities. Thirty percent of the homeless population was comprised of families with at least one adult and one child under the age of 18, and many of these families had access to some form of housing (HUD, 2020). While 27% of homeless shelter residents were young adults, about 90% percent of the unsheltered population comprised individuals 24 years old and older. The statistics make ending homelessness a priority in the United States.

Veteran homelessness has been a significant societal concern for decades (Annual Homeless Assessment Report, 2021). The impact and risks of homelessness vary; however, some risks among veterans have been reported as more prevalent than others (Wood et al., 2022). Edwards et al. (2021) conducted a study that presented risk factors and protective factors of veteran homelessness. The authors reported that younger veterans were more susceptible to war deployment, which posed the risk of

homelessness. After returning from Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND), these veterans drew a more significant amount of exposure to risk factors than other veterans. The study highlighted that risk factors were suicide, homelessness, and legal issues. These identified factors presented barriers for veterans transitioning from military to civilian and workforce (Shepherd et al., 2020).

Consequently, these veterans were found more susceptible to homelessness due to their greater exposure to combat-related trauma and geographic relocation for military deployment (Taylor et al., 2020). Further, Tsai et al. (2020) argued that the presence of veterans among the homeless population in the United States is considered a source of public concern. Tsai et al. explained that the health and welfare of veterans are considerable and should continue to be addressed. As a result, the Department of Veterans Affairs vowed to eradicate veteran homelessness. Billions of dollars have been used to establish and expand VA services for homeless veterans, although it is still unclear if the problems will change as of 2009 (Tsai et al., 2018).

There are significant gender disparities in homelessness experiences (Milaney et al., 2020). In the United States, women are underrepresented in the homeless community. However, among veterans, the percentage of women and men suffering from homelessness is indicative of the greater population (HUD, 2018b). HUD(2019) reported that about 40,000 veterans were experiencing homelessness in the United States. Of those homeless veterans, 91% were men, and 9% were women between 2009 and 2017. The VA was able to reduce the number of homeless veterans in half between 2009 and 2019,

as documented by the agency's AHAR (2018). However, Felder and Delany (2020) noted that the number of female veterans facing homelessness in the United States climbed by 135% during the same period. Female veterans are four times as likely to become homeless than male veterans, and their population is expanding at double the rate of other homeless people (Richman, 2018). Although the veteran population continues to grow, little research has been conducted on homeless female veterans.

However, Felder and Delaney (2020) noted that female veterans make up a rapidly growing percentage of the homeless veteran population in the United States. There was a 7% rise in the number of homeless female veterans from 2016 to 2017, compared to a 1% increase among male veterans (Richman, 2018). It was found that female veterans are more concentrated in California, Texas, and Florida than male veterans, but males and females are significantly represented in these states. The former HUD secretary and the VA secretary have stressed the importance of implementing a preventative strategy (HUD, 2019). According to the 2019 AHAR, out of a total of about 560,000 homeless people, 38,000 were veterans. Gaps in male and female homelessness rates and the availability of services to help those experiencing homelessness are a matter of widespread concern (Montgomery et al., 2020). According to Montgomery et al. (2019), a higher number of female veterans, compared to males, suffer from housing insecurity. However, women veterans may have a different homeless experience than male veterans, and additional factors may play a role. Montgomery et al. (2020) noted that women veterans, for instance, are younger, more racially and ethnically diverse, and have different sociodemographic characteristics than male veterans. Their diversity

includes different levels of education and lower wages, all of which may contribute to housing instability in various ways.

However, women continue to join the military in ever-increasing numbers, resulting in a rise in the number of female veterans (Schaeffer, 2021). Women are the sector of the United States military with the highest growth rate (Henry et al., 2019). In addition to the increases, research indicates that homeless female veterans' needs differ from those of their male counterparts (Schultz et al., 2022). For example, Felder and Delaney (2020) reported that male veterans were more likely to have drug use problems. However, female veterans were more likely to have mental diagnoses, including mood and anxiety disorders. Female veterans have special requirements for housing as well as healthcare. Although the VA is aware of homelessness, Ritchie (2019) argued that the regulations neglect to consider female veterans' specific requirements and needs. For example, VA typically sponsors conventional temporary housing structures designed for unaccompanied males, resulting in restricted housing possibilities for female veterans, especially those with children (Felder & Delany, 2020).

On the other hand, different variables have been connected to the occurrence of homelessness in both the general population and veterans. Henry et al. (2019) explained that numerous causes of homelessness had been recognized, including a shortage of inexpensive housing, a weak economy, discrimination based on race, a lack of affordable housing, issues with mental health, drug abuse, and health, and the effects of illness. The U. S. Department of Veteran Affairs (2018) reported that the estimated number of American women who have served in the armed forces ranges from 1.9 million to 2

million. About 46% of these women are aged 25 to 49, while 33% are aged 50 to 64. Within these two age groups, the largest subgroup of female veterans is 50–54 years old, which accounts for around 13% of the entire female veteran population (Felder & Delaney, 2020). These female veterans likely served throughout Desert Storm and the Iraq/Afghanistan battles. However, these two conflicts were vastly different due to the combat's unpredictable and extensive nature. Kenny and Yoder (2019) posited that many of the best indicators of homelessness in women, such as unemployment, disability, and singleness, were the strongest predictors of homelessness in women veterans, and their rates of homelessness were significantly higher than those of the general population.

Health concerns such as military sexual trauma (MST) and combat-related trauma are additional obstacles confronted by female veterans that may contribute to homelessness following active duty (Felder & Delany, 2020). Additional variables explored in this study compared the health of housed female veterans and homeless female veterans. Kenny and Yoder (2019) reported that 57% of homeless women reported being in poor health, compared to 29% of housed veterans. Additionally, homelessness was associated with higher rates of PTSD and anxiety. The United States Department of Veterans Affairs (2020) reported that premilitary trauma, MST, and combat-related trauma are additional factors female veterans face that may lead to homelessness following active duty. The VA National Center on Homelessness Among Veterans (2016) forecasts that the number of female veterans experiencing homelessness will rise to nearly 40,000 by fiscal year (FY) 2025. The VA continues to struggle to

create preventative methods for reducing homelessness among female veterans due to the increasing numbers and distinct requirements of female veterans.

Barriers to Housing for Female Veterans

Taylor et al. (2020) argued there are barriers throughout the life of veterans that may emphasize vulnerabilities that arise before enlisting, during military service, and after separating from the military. These potential barriers may also influence their housing stability. Therefore, researchers continue to explore the issue (Cusack et al., 2019; Metraux & Culhane, 2018).

According to the National Center for Veterans Analysis and Statistics (2019), in the coming decades, the population of female, minority, and younger veterans is expected to increase, while the population of male veterans is expected to decrease as more veterans transition out of the military. Also, women veterans experiencing homelessness are vulnerable and have considerable mental health requirements; it is crucial that their housing incorporate gender-specific safety measures (Kim et al., 2023). Kim reported that more than half of all homeless female veterans experienced sexual assault during military service. As a result, many have PTSD and other mental health issues (Moranda, 2020).

Posttraumatic Stress Disorder

Transitioning out of the military is challenging for some veterans who have been identified as vulnerable and susceptible to mental illnesses (Sokol et al., 2021). Consequently, Cusack and Montgomery (2019) suggested that families of veterans returning home from combat with mental health difficulties are urged to receive additional care. The authors also suggest that additional accommodations for women and

veterans with a history of trauma often have a greater sensitivity to problems and disproportionately affect minority veterans (Adams et al., 2021).

PTSD is another barrier common to veterans in the United States (Inoue et al., 2022). Kieran (2019) mentioned that PTSD is also known as a "signature wound." PTSD, a mental health illness that can develop following exposure to trauma or a life-threatening incident, has severe health effects, including decreased physical health, increased mental health comorbidities, reduced quality of life, and early mortality (Lehavot et al., 2018). Lehavot et al. (2018) found that among adult Americans, the lifetime prevalence of PTSD has varied between 4-6% for men and 8-13% for women. More women than men reported being abused as a child in the military and civilian world (Kwan et al., 2020; Lehavot et al., 2018). Women were more likely than males to indicate that childhood abuse was their most traumatic experience. Women veterans were the most likely to report suffering interpersonal violence, notably adult sexual assault, and abuse by a partner (Lehavot et al., 2021). Female veterans were also the most likely among those suffering and reported that sexual assault and domestic abuse were the most painful experiences, according to Kwan et al. (2020).

Lawrence et al. (2021) have conducted substantial research on the mental health issues of female veterans, focusing mostly on PTSD. Regarding gender differences and veterans with PTSD, Gran-Ruaz et al. (2022) and Lehavot et al. (2018) reported that men and women veterans were more likely than their civilian counterparts to report at least one traumatic experience. Sixty-six percent of veteran men and 60% of women reported experiencing at least one traumatic experience, and 48% of civilian men and 50% of

women civilians. Additionally, Lehavot et al. noted that men and women veterans were most likely to report a life-threatening illness or injury, and male civilians were more inclined to describe a life-threatening environment as their worst event.

According to Cheney (2018), traumatic experiences significantly increased women veterans' susceptibility to homelessness, exacerbated by situational factors such as social isolation and lack of resources. Previous research was conducted on how female veterans obtaining healthcare will have higher rates of PTSD and other mental health issues than male veterans (Adams et al., 2021). Similarly, Mulcahy et al. (2021) argued that women's military experiences and responses are frequently distinct from those of men, putting them at a greater risk for psychological issues. Women were substantially more likely to face sexual harassment and sexual assault before and during military service, which makes female veterans more susceptible to mental health illnesses and trauma (Montgomery et al., 2018; Moreau et al., 2022).

Depression

Depression was the leading mental health condition in the military and veterans (Inoue et al., 2022). In addition to sexual harassment, mental health issues, such as depression, have increased among female veterans (Adams et al., 2021). Depression was one of the most prevalent health issues among female veterans, who endured higher rates of depression than their male colleagues. Sairsingh et al. (2017) found that female veterans with depression are twice as likely as their male counterparts to be hospitalized for a psychological condition. Yu et al. 2020 conducted a study and found that an

increased risk of depression among female veterans who had transitioned into an unstable housing environment was prevalent.

Although women made up a smaller proportion of the veteran community, female veterans were far more likely than males to use federal healthcare services (Schaeffer, 2021). Lawrence et al. (2021) reported over fifty percent of female veterans receiving care at Department of Veterans Affairs (VA) facilities have a mental health diagnosis and receive mental health treatment at VA facilities, a main diagnosis of depression.

Researchers have also observed higher correlations between battle exposure and depression in women than in men as the rate of combat exposure among female deployed military members increases (Iverson et al., 2022; Roche et al., 2020). Bryant (2019) suggested that although women are as resilient to battle-related stress as males, female veterans exposed to combat in Iraq or Afghanistan are more likely than men to develop PTSD, depression, alcohol abuse, and sexual harassment and assault (Bryant, 2019). Moreover, Iverson et al. (2022) argued why women may be affected differently by combat exposure is unknown based on the studies because the topic is still in its infancy. Factors unique to female veterans deployed to conflict zones, included inadequate support, limited access to gynecologic care facilities, gender harassment, and limited social support from female peers, contributed to the increase in depression (Lawrence et al., 2021).

Unfortunately, the problem was multilayered and complex for female veterans because before enlistment, during service, and after discharge, women veterans experienced trauma in a variety of ways and at different stages of their lives. It was

essential to understand the stages of transition, the impact on female veterans, and the outcome of their transition.

Military Sexual Trauma

Women made up about 17% of the active-duty US military force and approximately 11% of current veterans (Schaeffer, 2021). The National Guard and Reserves were expanding even more rapidly. According to Adams et al. (2021), women were projected to make up over 16% of the veteran population in the United States by 2042. Although the population of women in the military was expected to grow exponentially compared to men, women were at a greater risk of developing psychological issues as a result of their military service (Thibaut & van Wijngaarden-Cremers, 2020). Women, for instance, were disproportionately affected by sexual assault and harassment in civilian life and the military.

Female veterans identified mental health difficulties related to military sexual trauma (MST) as one of their most common transitional challenges (Browne-Bradwisch, 2022). The Department of Veterans Affairs (n.d.) classified MST as sexual assault or recurrent, threatening sexual harassment that occurred during military service. Nationally, raising awareness about the pervasiveness of MST was a top priority (Wilson, 2018). The heightened concern came as a result of the climate and culture of the military. Harassment was pervasive and had been linked to increased incidence of sexual assault in the military, which Clarke (2020) argued has been characterized as having a "tolerant" organizational climate and culture. According to the Annual Warrior Survey [WWP] (2020), 44% of female warriors reported suffering from MST while serving in the

military. This survey also revealed that more female veterans had experienced MST, with approximately 73% of women reporting sexual assault or harassment during their time in the military.

Although many military members were adaptive, Frey-Ho Fung et al. (2021) noted that the experience of MST is connected with PTSD as well as several emotional, physical, and functional problems. Concerns surrounding complaints such as sexual harassment, sexual assault, psychological abuse, and others have prompted the Department of Defense to develop policies to protect veterans better. In the past decade, the Department of Defense (DoD) has worked diligently to implement practices and regulations to prevent MST incidences and enhance care accessibility.

Kim et al. (2019) explained that numerous programs and services had been developed to address the needs of veterans who have been sexually assaulted; however, the needs of homeless female veterans who have been sexually assaulted are commonly disregarded or excluded from these programs. Organizations that provided supportive housing for women veterans recognized that many homeless women have suffered MST.

Factors Leading to Housing Instability

The integration of veterans into civilian life was a vital and important societal issue; however, the transition came with challenges (Shepherd et al., 2020). According to Davis et al. (2022), some businesses were concerned about the costs associated with PTSD in the workplace. Mental health issues were unaddressed and affected employment status if an individual struggled with integrating into the workplace environment.

However, Gonzalez and Simpson (2021) argued employment is an essential aspect of

transition for veterans, not only for financial gains but also for acquiring additional advantages. Cheney et al. (2018) suggested that when veterans integrate into a civilian livelihood by pursuing employment, the likelihood of psychological issues decreases.

According to the Pew Research Center's Social and Demographic Trends (2020), at least 44% of veterans who served in the military have had trouble adapting to civilian life. There were numerous plausible causes for these difficulties, including socioeconomic and educational obstacles before enlistment, the substantial drop in supervision and structure, and the loss of camaraderie and connections acquired in the military. In addition, some veterans separated from the military did not have work plans for civilian life, and others lacked definite housing arrangements, indicating the possibility of homelessness following separation. Taylor et al., (2020) noted that a considerable proportion of veterans who separate from the military endure psychological illnesses related to their service, regardless of whether they were deployed or involved in combat operations. According to research, 47% of veterans have experienced frequent anger problems after separation, 48% percent report damaged family connections, and nearly a third had suicidal thoughts (Dillon et al., 2020).

Veterans struggling with psychological struggles were more susceptible to housing troubles, although statistics suggested that most veterans eventually found jobs in the civilian workforce (Keeling et al., 2018). Veterans were a tremendous resource for human capital. However, Gonzalez and Simpson (2021) argued that some veterans struggled with the adjustment to civilian life and employment. Davis et al. (2022) suggested that some organizations hesitate to hire veterans, and veterans frequently

encounter bias during job screenings. Davis et al. also suggested that veterans who can secure employment typically experienced discrimination, unfavorable preconceptions, stigma, underemployment, identity strain, marginalization, and a lack of adaptability. As a result, there was still a significant number of unemployed veterans. Some veterans continued to struggle with unemployment. On the other hand, some veterans initially successfully found employment but later struggled to keep their jobs due to unforeseeable physical and mental challenges (Cusack et al., 2022). The consequences of employment issues impacted housing stability for veterans.

As a result of the potential housing barriers, veterans experienced when transitioning, the lack of services to help homeless veterans and their families find and sustain permanent housing remained a national priority. According to HUD (2020), the U.S. Department of Housing and Urban Development (HUD) and Veterans Affairs (VA) Supportive Housing (HUD-VASH) Program is the largest and possibly longest-operating supportive housing program for any group of homeless persons globally. Bennett (2020) reported that HUD-VASH has helped over 146,000 veterans since its establishment in 1992, and today, it provides services to over 80,000 veterans around the country. The vast majority of these individuals have been able to leave homelessness as a result of these services.

One of the purposes and goals of the HUD-VASH program was to create sustainable housing for veterans; therefore, understanding the cause of veteran exits from the program became a concern (HUD, 2019). According to O'Connell et al. (2018), the most effective method of reducing homelessness for veterans with mental and addiction

disorders is supported housing, which provided financial housing subsidies and case management assistance. Cheney et al. (2018) revealed that several factors, included justice involvement, medical issues, mental health conditions, poor adherence to outpatient care, mental health, and substance abuse, contributed to unfortunate program exits and possible returns to homelessness. According to Sandel et al. (2018), the rental market also hindered successful housing results, as well as a lack of funds for move-in fees, a need to find a balance between housing activities and therapeutic interventions, and a lack of coordination between service providers such as the VA, HUD, and community providers (HUD, 2019). Although programs were in place to help minimize homelessness, the desperate need for housing suitable for all veterans was still a challenge.

Transitioning From the Military as Female Veterans

According to Derefinko et al. (2018), there were significant transitional moments in the life of an active-duty military member that was crucial for the quality of life for an individual after separating from the military. The military began a transition period with limited support, included brief screenings for significant psychological distress or problematic substance use and referrals to outside vocational or health services, as the term of service nears completion (Bog et al., 2018; Derefinko et al., 2018). Although the military rendered separation services, many transferring to civilian life reported ongoing or increased challenges, such as angry outbursts, PTSD, continued substance abuse, and troubled family connections. Derefinko et al. (2018) interviewed and surveyed 90 veterans transitioning from active duty in the military to civilian life. The researchers

objectives were to investigate the perceived needs of these veterans, evaluate the barriers preventing these individuals from participating in VA health care upon separation, and elicit veteran recommendations to improve existing reintegration services before and after the veteran makes the transition to civilian life. Derefinko et al. (2018) reported that veterans in the study expressed various concerns, including a desire for better services in areas such as mental health and substance abuse treatment, as well as a desire for greater assistance in adjusting to civilian life and coping financially.

Mental health, physical health, housing, and employment were a part of the military-to-civilian transitioning process. From a mental health perspective, population-based studies have revealed a significant incidence of post-traumatic stress disorder (PTSD), major depression, and other mental health issues following war zone duty (Evans et al., 2018). Inoue et al. (2022) pointed out that the United States has recently spent more than a decade involved in the largest conflicts in its history, and the number of veterans struggling with mental health issues has climbed dramatically.

Evans et al. (2018) comprehensively analyzed the characteristics that influence substance addiction, mental health, and related quality of life among female veterans who used non-VA community-based health and social services. This study included semi-structured, face-to-face interviews with 22 female veterans from Los Angeles. Indicators of substance abuse, along with a few other factors, included history of trauma during childhood and military service) impacted the current health of these women veterans and the quality of their livelihood. Additionally, some veterans found discrimination, mental health conditions, post-military socioeconomic stressors, and shifting social roles

challenging during their transition. Evans et al. (2018) reported adverse social support and a loss of personal identity after service shaped the health of these female veterans. Considering the interconnected nature of psychological and social issues, Marshall et al. (2021) agreed there is clear room for improvement in providing health and social services to female veterans who received care outside of VA facilities.

Evans et al. (2018) argued that the following was necessary to successfully assist and improve female veterans transitioning from military to civilian: a) disseminate, implement, and maintain evidence-based gender-sensitive substance abuse treatment; (b) deal with traumas that contribute to poor health; (c) acknowledge that stress proliferation processes impede women's ability to access healthcare or cope healthfully with stressors; (d) celebrate women veterans who were role models of resilience and inspired others to develop empowered personal identities of health and wellness.

Women made up a disproportionately large share of the military and veteran population. As a result, Chenoweth and Marks (2022) noted that women are making significant strides toward parity in leadership positions, which benefited the nation's defense. However, although women were breaking down barriers, female veterans faced unique difficulties during the transition and lack support at every stage of their military careers (Fletcher et al., 2022). For example, previous studies found female veterans experienced military sexual trauma (MST) more often than male veterans. The participants were female veterans who shared their transition experiences, including their struggles with isolation, loneliness, and the inability to find common ground with their civilian female counterparts (Keeling, 2018).

Cultural differences between civilians and the military have also been recognized as important and challenging during the time of transition. Transitioning back to civilian life was difficult for many returning soldiers from OIF/OEF, and cultural difference was often cited as a major contributing factor to these difficulties (Morgan et al., 2020). To respect the fundamental values and beliefs of veterans in the delivery of healthcare services, it was essential to develop a thorough grasp of military culture. For instance, the Department of Veterans Affairs (2018) and the Center for Deployment Psychology (2018) developed training programs to promote competence regarding military culture and motivated healthcare providers to evaluate military and cultural factors that impacted responsiveness to and interaction with healthcare providers.

Furthermore, McCormick et al. (2019) documented that changes in veterans transitioning from military to civilian culture were reflected through qualitative themes. After leaving the US Armed Forces, the veterans in the current study provided several examples of their hardships, personal growth, and the continuity of military culture. The participants' descriptions of progress offered a valuable understanding of post-military changes, such as improved interpersonal interactions and a greater appreciation for life following military duty, but some reported challenges. For example, several veterans mentioned a perceived difference between themselves and civilian culture and interpersonal issues after leaving the military. These difficulties have been identified as obstacles to successful reintegration and transitioning following military service. McCormick et al. (2019) argued that it is important for healthcare professionals to assist

veterans in navigating perceivable cultural conflict and developing positive interpersonal relationships that facilitated their transition to civilian life.

Transitioning from the military to civilian life came with a multitude of challenges for veterans. However, Stark (2021) argued that female veterans faced unique challenges compared to male veterans. Female veterans identified the three most common difficulties encountered after transitioning to civilian life from the military in a survey conducted by the Wounded Warrior Project. Data was collected through a survey in early 2020 from 4,871 participant responses (Wounded Warrior Project, 2021). Mental health concerns, such as post-traumatic stress disorder (PTSD), anxiety, depression, financial stress, and mental health disorders associated with military sexual trauma (MST), were recognized as the most common obstacles faced during the transition from military to civilian life. Additionally, female veterans shared that finding employment, feeling isolated, and coping with physical injuries were common experiences that were challenging during the transition (Fletcher et al., 2022; Schultz et al., 2022). Lastly, with the known challenges female veterans faced when transitioning out of the military, it is an adjustment phase that can take a toll on their identity and sense of accomplishment.

Resource Availability

Lack of Gender-Specific Resources

An additional barrier focused on the lack of gender-specific resources and assistance available to female veterans transitioning out of the military. Most housing facilities for veterans did not provide appropriate gender-particular accommodations (Gabrielian et al., 2018). Therefore, it was crucial that their housing incorporated gender-

specific options for safety measures. Because many supportive housing services supported men and women, homeless female veterans were more vulnerable (Harris et al., 2018). The lack of gender-specific accommodations was sometimes a deterrent and barrier for female veterans needing assistance. Harris et al. further noted that gender-specific accommodations were necessary for a mental healthcare plan but must be implemented. For example, Kim et al. (2019) noted that the California legislature amended the veteran housing law to provide separate housing for homeless women veterans with a history of sexual assault or domestic violence.

As a result, resources and support systems were intended to help veterans avoid stressors that could exacerbate related disorders such as PTSD (Bryant, 2019). For example, Godier-McBard et al. (2022) looked at veterans' challenges while trying to get VA mental healthcare involved with their care. Curtis et al. (2019) argued that when considering healthcare or interacting with healthcare institutions, life experiences, histories, and cultural perspectives were significant and determined how individuals responded. Veterans' combat experience substantially impacted their perception of the mental healthcare system, and their perception of the treatment veterans received. Negative experiences or poor assumptions about receiving medical care was a barrier to employment and housing for male and female veterans. There were several obstacles that Veterans Affairs (VA) patients, especially those in need of mental healthcare, experienced when trying to access VA services (Cheney et al., 2018).

Veterans' health care programs originally catered primarily to men. As shown by empirical studies, Calhoun et al. (2018) found that female veterans' health outcomes were

negatively affected due to gender differences in access and quality of care. According to Evans et al. 2024 a few women veterans were utilizing VA services; thus, the VA launched a concentrated effort to recognize and notify these women of their benefits and rights. Efforts were made to raise awareness of the availability of resources for women veterans.

The Veterans Health Administration (VA) made efforts to ensure that its healthcare system is gender-inclusive and responsive to female veterans' unique healthcare requirements (Chrystal et al., 2022). However, Sheahan et al. (2022) suggested that a lack of awareness has contributed to the underuse of services designed to meet the needs of female veterans. As the Department of Veterans Affairs improves services aimed at disseminating information about resources available to female veterans, specifically promptly, their health, housing, and employment experiences will likely improve. Mattocks et al. (2020) posit that female veterans seeking non-veteran treatments, elected to use private services, or go untreated due to negative beliefs or misconceptions have improved access to information since gender-specific care remains a VA priority.

Resources Available for Homeless Veterans

There are 2.6 million post-September 11 veterans in the United States (Aronson et al., 2020). Most veterans did not encounter persistent adaptation or reintegration issues and successfully returned to their communities (Morgan et al., 2020). However, some veterans struggled with transitioning into civilian life. According to Shepherd et al. (2020), the difficulties some veterans faced during transitioning and integrating into

civilian life imposed significant stress on veterans, their families, communities, and healthcare systems. Several ecological factors impacted the transition period as a civilian for veterans on an individual, interpersonal, community, and societal level.

Some veterans struggled with challenges in multiple ways and different areas of life during their transition phase out of the military. Some of the most frequently reported difficulties veterans encountered pertained to their health and overall well-being (VA, 2021). According to Vogt et al. (2020), the most common challenges reported were social interaction, employment and education, financial issues, and housing concerns. Regarding social interactions, marital tension, role ambiguity, and difficulty re-connecting with children, veterans also experienced difficulty forming and maintaining family relationships. Hentze (2018) also noted that veterans were typically unemployed when they left the military and struggled to find a career that allowed them to transfer the skills used in the military. As a result, some veterans experienced financial difficulties that led to housing instability.

There was a significant decline in veteran homelessness since the expansion of services for homeless veterans in 2010 (Health, 2021). Engaging homeless veterans in existing programs was vital to ensure this trend continued. In 2009, the National Center on Homelessness among Veterans was formed, and in 2016, it was approved by federal legislation. The center was created to conduct research, evaluate the effectiveness of initiatives within the VA, emphasize the techniques to address the unique needs of veterans who are facing homelessness, integrate best practices and implement programs

with community partners, and lastly, serve as a central source for all research and training for efforts about veteran homelessness (US Department of Veteran Affairs, 2022).

The Department of Veterans Affairs (VA) (2022) expanded its programs for homeless veterans in 2009. The number of homeless veterans decreased by 47% between 2010 and 2016. Moreover, as the population of veterans grew, building engaging relationships with veterans transitioning sooner rather than later after returning to civilian life was essential for continued progress.

Underutilization of Social Services Among Veterans

Veterans have experienced difficulty understanding and accessing GI Bill benefits (Morgan et al., 2020). There were some apparent obstacles to getting these resources. Although the well-documented needs of veterans and the abundance of programs were accessible to them, a significant number of veterans did not seek out or use veteran programs or services. According to Cheney et al. (2018), there were four key reasons new veterans did not participate in programs during the initial phase of the transition from military to civilian life. The four reasons that were identified were veterans needing assistance, not finding a program or service that fits their needs, understanding the programs for which they are eligible, and lastly, needing to know whom to seek support and assistance from.

Veterans who served after September 11 were the first to be surveyed in an exploratory study about the VA and non-VA programs and services, they used in the first three months after leaving the military (Cheney et al., 2018). The researchers identified programs and services veterans used to assist them during their transition to civilian life

within three months of exiting the military for active duty. Additionally, Cheney et al. investigated the characteristics of the program that veterans most often use. The veterans' participation in four different types of transition programs and services meant to facilitate their transition back into civilian life was identified by researchers. Economical, housing, health, employment, and social were the primary areas reported of use to veterans in the study and shared whether the programs were helpful or not. For example, veterans in the study were asked if the program or service they used offered them access to an online job database, a career fair, help with resume building, job placement, career counseling or mentorship, or the chance to get a certification or license in the field of work.

Transitioning out of the military entailed a variety of obstacles; one of the most common was financial instability (Perkins et al., 2020). Cheney et al. (2020) found that 53% of veterans reported having at least three months' worth of salary saved in case of an emergency. The financial challenges typically led to housing concerns and instabilities. Most service members rented an apartment (forty-one percent) or were paying a home mortgage (forty percent). On the other hand, about 15% of the population reported they did not pay rent but lived with a relative or friend. Three percent of the participants in the study did not have a mortgage payment and owned their homes. Nineteen veterans (0.2%) reported living in a camper, while 19 (0.2%) reported living in a car or a homeless shelter. Over one-third of veteran respondents (38%) indicated they had used the VA Home Loan Program.

Homelessness harmed the health of veterans (Serrato et al., 2019). According to Crone et al. (2021), veterans who were homeless were more prone to face chronic stress

and be exposed to environmental illnesses. Cheney et al. (2018) reported that fifty-seven veterans in transition reported having a continuing physical health condition, sickness, or disability. For example, one-third of returning service members reported living with a mental or emotional health issue or disability. However, researchers indicated that some veteran services continue to be underutilized. About 84% of the veterans reported having health insurance; however, Morgan et al. (2020) reported that about 62% of veterans had accessed some healthcare service or program since transitioning from the military at the time of the study.

The number of veterans who did not use the health resources available to assist veterans transitioning from the military to civilian life indicates additional work to be done. Although several health programs were available to reduce the likelihood of illnesses, some veterans did not use the services. For example, 39% of veterans did not use healthcare services (Cheney et al., 2018). Additionally, 27% of veterans used one healthcare service, 12% used two, 8% used three, and 15% used four or more healthcare services. For instance, 6% of veterans reported using the Veterans Choice Program (VCP). According to Taylor et al. (2020), several factors influenced whether veterans sought aid and used their benefits; nonetheless, Taylor et al. emphasized the necessity of properly conveying how to access the services. Even though it seemed difficult, and there were many challenges when veterans were seeking services, programs were being developed that met the needs of all veterans.

Summary and Conclusions

This chapter discussed the many challenges and barriers that female veterans have experienced and caused the underutilization of social services once they have transitioned out of the military. Simultaneously, there was inadequacy in the planning for appropriate services and a lack of gender-specific housing programs for female veterans and their children. Mental health issues, such as depression and PTSD, were causing significant challenges for female veterans, limiting their access to available services. By gathering this information, it was helpful for the VA to develop more programs and initiatives that supported the female veteran population.

Regarding social change, it is understanding how the personal experiences of facing challenges and homelessness among female veterans were affected after transitioning out of the military. Although female veterans could use the social services available, the challenges they faced made it rather difficult to initiate the process. In Chapter 3, I presented an overview of the research methods and procedures that were used to conduct the study.

Chapter 3: Research Method

The purpose of this generic qualitative study was to address the gap in the research by examining the lived experiences of barriers to housing for female veterans after transitioning from the military. Throughout this chapter, I focus on the research design and the study's rationale, the researcher's role, the methodology, and the researcher's responsibilities. Lastly, I describe the ethical aspects that are employed to ensure participants' privacy and confidentiality as it pertains to trustworthiness.

Research Design and Rationale

To guide this study, the following research question was formulated: What are the barriers to housing for female veterans who have experienced homelessness after transitioning out of the military? In this study, I examined the phenomenon of female veterans who experienced homelessness and gained insight into gender-specific housing options for female veterans. I used a generic qualitative design to answer the research question. The advantage of a generic qualitative study is for the reader to view and understand female veterans' experiences, perceptions, thoughts, memories, imagination, and emotions (Islam et al., 2021). Female veterans encountered homelessness because of the many barriers firsthand (Vasileiou et al., 2018).

Some researchers used qualitative studies to get the "how" and "why," which generated quality information (Tenny et al., 2018). Woods et al. (2016) focused on gathering valuable information about the participants to gather rich data. Interview questions that I prepared drew forth information regarding the phenomenon being studied using a generic design. Despite other qualitative methods, I conclusively focused on

appropriately using this method to capture the participants' lived experiences. A generic qualitative approach provided me with a complete understanding of individuals' experiences and barriers that led to homelessness.

Role of the Researcher

The purpose of this qualitative generic design study provided a deeper understanding of people's thoughts and feelings, which allowed the researcher to better understand what they mean by their experiences (Sutton & Austin, 2015). Giesler and Juarez (2019) expressed that, as an active researcher conducting qualitative designs and methods, the researcher's main responsibility is to understand the phenomenon. As the researcher, I ensured the participants were comfortable with me proceeding with the study. I observed the participants' gestures and body language during the interview to interpret the meanings they attached to them.

As a licensed professional counselor and a veteran, I understood some of the barriers that homeless female veterans experienced. Although my duties consisted of providing therapeutic services to veterans and others, my role did not interfere during this process. To ensure the overall research process is successful, I addressed biases and concerns (see Schembri & Jahić Jašić, 2022). Personal biases were addressed during this process, and to detain my biases, I did not place any judgments on the participants, kept an open mind, and ensured objectivity throughout the process. By bracketing, I protected myself from any emotional challenges while conducting my study (see Tufford et al., 2012). Lastly, participants reviewed their responses before completing the study to minimize any biases in my research.

In my role as the researcher, I did not have any supervisory responsibilities related to my participants. To put the participants at ease, there was no power indicated.

Although I am a female veteran, I did not let this interfere with my research overall or place any judgments during this process. As a result of revealing my professional role early in the interview process, participants felt more comfortable during the interview.

Furthermore, participants were recruited from a nonprofit organization that had programs for homeless veterans. There was a small incentive (\$25 gift card) for participants who met the criteria for the study once the study was completed to show my appreciation for participating. Female veterans were briefed on the purpose of the study, the process to obtain their information, a tentative timetable, and the option to decline to be a part of the study at any time. Ensuring that the participants were safe and at low risk of causing any further harm, I consulted with an additional mental health professional who could provide services if the participants needed them (see Amundsen & Msoroka, 2021). Participants were provided with detailed information in the informed consent agreement.

Methodology

In this study, I used a generic qualitative study approach to examine the lived experiences of barriers to housing for female veterans after transitioning from the military. A generic qualitative approach is preferred in order for the researcher to be able to explore and understand the experiences of female veterans who were impacted by the lack of housing resources that were suitable for them and their families. Lastly, by using

a generic qualitative study, researchers can monitor the flow of data by conducting semistructured interviews (Kahlke, 2014).

Participant Selection Logic

Population

Homeless and previously homeless female veterans were the targeted population for this study. A generic qualitative study design was used to examine the barriers to housing for female veterans who have experienced homelessness after transitioning out of the military. Participants must have been veterans who have experienced homelessness and served in the military to be considered for this study.

Sampling Strategy

Although purposive sampling produced rich content and was convenient for the researcher, I also used snowball sampling to gain additional individuals who were suited for this study. Snowball sampling allowed me to attract the primary group of participants, which eventually led to more samples, which caused the participant pool to grow (see Emerson, 2015). As stated earlier, qualitative studies consist of a small sample because they can become too time consuming and offer a little more information than expected. I used snowball sampling because it served as a referral tool to gain more participants if needed because of the lack of individuals who needed to meet the initial criteria that qualified for the study (see Robinson, 2013). In order for female veterans to be considered participants in this study, they must have served in any branch of the military and have been considered homeless. The purposeful and snowball sampling methods consisted of 6 female veterans. Using both purposive sampling and snowball sampling, I

gathered rich data and gained potential participants who are suitable for the study based on specific criteria.

The administrator of the nonprofit organization agreed to post the flyers throughout the nonprofit organization after he received the flyers via email. To ensure that the participant is aware of the study, I provided a short description of the study and my contact information on the flyer to schedule the interview. I ensured that the participants understood the requirements to meet the criteria to become an interviewee.

Inclusion Criteria of Participants

Female veterans had access to the flyers once the nonprofit organization administration posted them throughout the facility. All participants who were interested in being a part of the study met all the criteria to be selected for an interview. There was no age requirement because people separated from the military at different ages. The criteria to be eligible to participate in this study included participants who are (a) female, (b) veterans, and (c) or formerly experienced homelessness.

Individuals who may responded but did not meet the inclusion criteria were excluded. Those who met the criteria were asked if they wanted to participate in the study. First, the participants contacted me using the phone number or email provided on the flyer. Then, I emailed the participants the informed consent form with all the details, including all the information about the study. As soon as the participants agreed to participate in the study, they sent an email acknowledging their agreement with the phrase, "I consent." A second email correspondence I asked the participants to choose a date and time for an interview.

Reaching saturation is expected in a qualitative study because of such a small sample; it is up to the researcher to know when there is no new information being gathered (Hennink et al., 2017). In order to learn more about personal experiences with homelessness after transitioning out of the military, I interviewed 6 participants. Boddy (2016) stated that it is practical when selecting a sample of 12 participants among a comparably homogeneous population. Therefore, when a sample is evidently reaching saturation at 12, anything over that would require justification. Samples in qualitative research tend to be small to support deep analysis and to gain a complete understanding of the phenomenon of each participant (Vasileiou et al., 2018). Also, researchers will gather rich, detailed information using small sample sizes, resulting in saturation of the data (Forsyth et al., 2019; Josilowski, 2019).

Instrumentation

Instead of using pre-established questionnaires or any other instrumentation tool, Chenail (2011) noted that the qualitative researcher becomes the instrument because the researcher collects and analyzes the data. Qu and Dunmay (2011) suggested that semistructured interviews are suitable ways of understanding their experiences and building a foundation where the participant is comfortable disclosing more information.

A semistructured interview comprised of open-ended questions that met Walden University's standards was included (see Appendix B). Each question was based on specifics pertaining to my research question and demographical questions. It was important that my questions were subtle and aligned with the research question in hopes of not causing any harm to the participants, and I gathered as much useful information as

possible. The questions were piloted with a qualitative expert, a public health educator/researcher, and a college professor. The educator (a Ph.D. qualitative expert) suggested that I add my research question and that I ask the participant to elaborate more on the “probing” questions. Then, the public health educator suggested that I reorder some of my questions and move some of my interview questions up to serve as warm-up questions. Lastly, the college professor stated that the questions were reasonable and were aligned with the RQ.

. As part of the interview, I asked probing questions to gather as much information as possible to identify themes. Throughout the study, I ensured that all instruments are used ethically in order to avoid harming participants. A \$25 gift card was given to each participant who participated in the interview as a way of showing appreciation for participating in the study. Researchers will propose incentives for recruitment and retention for research studies to increase recruitment and retention (Parkinson et al., 2019). Participants did receive a gift or token as a thank you from me in accordance with Walden University's IRB policy.

Procedures for Recruitment, Participation, and Data Collection

Prior to recruiting participants for my study, I must receive approval from Walden University's IRB (11-10-23-0362543). I recruited the participants via flyers that were emailed to the administrator at the organization, who posted the flyers within the organization. Individuals interested in participating in the study had my contact information so they could contact me to discuss any questions they may have had in reference to the study. Once they contacted me, I emailed them the informed consent

(which they can respond to with 'I consent'), and then a day and time was set for the interview. To protect all participants, they had code names linked to their contact information. I collected the data based on the responses I received from participants who met the criteria set by the nonprofit organization.

Data Collection

For my generic qualitative study, I recruited my participants by forwarding an email to the administrator, as previously discussed, with a flyer attached to post throughout the nonprofit organizations. The flyer detailed all the specifics in reference to the study (see Appendix A). The participants had my contact information if there were any questions or concerns about my study. Participants responded via email or by telephone to state that they would like to participate in the study. Once the participants contacted me, I forwarded them the informed consent, and they responded with 'I consent.' Once participants consented to participate in the study, I scheduled interviews with female veterans who met the criteria to participate in the study. I offered several dates and times to conduct Zoom interviews. I conducted a 30- to 60-minute semi-structured interview based on my research question. I was in a secure home office conducting the interviews. The participants had access to the nonprofit organization's conference room with computer access. The data that I collected came from semistructured interviews that explored the lived experiences of homelessness among the female veteran population after military separation. I have focused on questions that entail the research question and are aligned with the participants' perspectives (see Baskarada, 2014).

As a reminder, I forwarded emails to participants 72 hours prior to the interview to confirm the appointment date and time with a copy of the approved interview questions (see Appendix B). Also, I discussed with the participants that the sessions would be audio-recorded and that their identities would be protected. I ensured that the confidentiality of the participants' information and responses were maintained throughout the process, specifically for research purposes and not for personal gain. The participants were informed that at any point in time if they feel that they want to discontinue or withdraw completely from this study, they may do so because it is voluntary. I met with the participants only once unless I had to conduct a follow-up to answer any questions or discuss any concerns the participants may have had after the interview.

I personally thanked each participant for their service and willingness to participate in my study. I also corresponded with the participants about the information that is to follow to ensure the accuracy of their responses. Member checking, also known as respondent or participant validation, involves obtaining feedback from participants or stakeholders about one's data or interpretations (Motulsky, 2021). I transcribed and coded the participants' data in the first coding cycle. Once I completed the first coding cycle, I sent the participants the transcribed data and the codes and asked if they were accurate. Next, I asked the participants to confirm accuracy if their data is correct, and if it is not, to please email me back with any incorrect information that may need to be revised. Once I completed the interview, all participants (whether they withdrew or not) received a \$25 gift card to show my gratitude and appreciation. Female veterans were provided a debriefing period where they could ask questions and ensure that the information, I

transcribed is accurate. There is an abundance of research about the effectiveness of debriefing, focusing on one function: its ethical purpose to reduce participant and societal harm (Greenspan & Lotus, 2021). The participant was asked if they had any questions after the interview was completed. Participants were ensured that their information was kept confidential and secure. The participant was asked to leave the meeting on Zoom and exit the meeting room safely.

Data Analysis Plan

As part of my generic qualitative research, I completed transcriptions of audio recordings and categorize topics and patterns based on the themes (Castleberry & Nolen, 2018). Throughout the interviewing process, I documented all notes in MS Excel based on my audio recording and transcribe the information based on the lived experiences of female veterans who faced barriers to housing after transitioning out of the military. When I completed the interview, I transcribed what each female veteran stated verbatim, resulting in a permanent record of the actual audio recording.

Once I collected the data and reviewed each participant's response, I started this process. I used MS Excel to load, organize, and transcribe the data from the recordings and feedback of the participants. MS Excel is a spreadsheet program that enables researchers to import, organize, explore, connect, and collaborate on qualitative data to gain more significant insights. MS Excel was used as a tool to code the collected data to create a systematic meaning of the information provided during the interview process. I repeated this process to note any discrepancies and ensure accuracy. Although I gathered

identifying patterns, I also created any sub-themes that derived from the participants' responses.

Although thematic analyses were not tied to any specific research design, they are heavily used in qualitative approaches (Braun & Clarke, 2006). The analysis of the participant's responses is then clarified for the reader so that they can understand it (Heldring et al., 2021). Most importantly, I developed a theme that captured vital data relative to the research question. I developed my themes based on the consistency of responses and any commonalities that are evident in each participant.

Qualitative data analysis consisted of five steps: compiling, disassembling, reassembling, interpreting, and concluding (Castleberry & Nolen, 2018). A complete interpretation of the data was the first step in a thematic analysis (TA). Identifying patterns among the participants' responses was noted in MS Excel as the next step in TA. Compiling data from my participants provided rich and meaningful data based on my research question. The next step in analyzing my data was to disassemble and group the data I retrieved, which is considered coding. Coding identified themes in raw data. In order to separate my themes, I color coded my themes for organizational purposes. This allowed me to review the responses carefully and create the appropriate sub-themes as needed. If there were any discrepancies, I decided on whether to discard the information or use it based on the context.

Using a deductive analytical approach, I explored the responses used by the participants relating to their personal experiences describing homelessness after transitioning out of the military. It is important for readers to see how the interpretations

are drawn from the beginning to the end. Castleberry and Nolen (2018) also stated that it is important that interpretations are fair in the sense that other researchers will be able to reach the same conclusions if given the same data. The raw data was accurate and representative of the interpretations. Overall, good studies will enhance the understanding of the topic viewed in the current literature. Lastly, Castleberry and Nolen (2018) reported that data methods and interpretations should be credible and highly respected among colleagues.

Issues of Trustworthiness

Identifying trustworthiness encompassed four vital components in qualitative research: credibility, transferability, dependability, and confirmability (Elo et al., 2014). Once I completed the interviews, trustworthiness ideally ensures that the information received from the participants is as factual as possible by conducting a member check. As a result, the reader gained a deeper understanding of the research results. Transparency and the actual value of the research were demonstrated through the development of these protocols. As Adler (2022) points out, how transparent a study is impacting its effectiveness and integrity. In addition, qualitative researchers-maintained rigor in order to be credible.

There were several components to collecting data in qualitative research. Fusch and Ness (2015) stated that one important component of qualitative research is collecting as much data as possible until saturation has been reached. Even though the resources have been debilitated, data saturation may occur. Previously, in the study, the role of the researcher was extremely important and could present some challenges when addressing

data saturation. As a veteran, I have minimized bias by not making any judgments during the collection and analysis of the data.

Credibility

Maxell (2013) stated that implementing a member check and focusing on saturation can establish credibility. In place of internal validity, credibility emphasized the true value of the researcher, determining whether they have developed and demonstrated a certain level of confidence in the findings based on the phenomenon being explored (Lemon & Hayes, 2020). As stated by Adler (2022), the credibility of a research study is essential for its trustworthiness. To ensure credibility, I examined and analyzed the data and reviewed it with content experts. As a result of using content experts, the study was more credible (Guetterman et al.,2020)

Transferability

Validity in qualitative research required quality, rigor, and trustworthiness (Braun & Clarke, 2021). Shenton (2004) classified transferability as the practice of providing rich, adequate details so that the reader can place themselves in the presented situation. Providing loaded paragraphs with as much information as possible and ensuring the details are descriptive can also increase transferability. As a result of data interpretation, the reader was able to relate to the participants and communicate about their lived experiences (Levitt, 2021). My goal was to be able to maintain a level of objectivity throughout this study. As I mentioned earlier, I implemented checks and balances to ensure that I did not present any biases. Lastly, I am committed to accurately portraying

the participants' stories. I also maintained rapport with participants by representing their personal narratives honestly.

Dependability

The importance of remaining consistent throughout a study means that there was very little room for questionable information. Addressing dependability allowed future researchers to repeat the work (Shenton, 2004). Dependability can be documented by including coding schemes that present a step-by-step guide to identifying commonalities (Attride-Stirling, 2001). Lastly, to ensure dependability, documentation of all notes was demonstrated.

Confirmability

Convincing the reader that the information was based on the findings of the participants instead of the words of the researcher indicated accuracy (Stenfors et al., 2020). Shenton (2004) stated that researchers mentioned that the key to ensuring confirmability is to try and predispose any biases as the researcher by following up with them and audio recording the interview, requesting follow-ups, and member checking (Shenton, 2004). Lastly, confirmability was the practice of confirming or corroborating information provided to the researcher by others.

Ethical Procedures

Agreements to Gain Access to Participants

I have received email confirmation from the nonprofit organization that the selected participants can use a quiet workspace dedicated to them during the interviewing process. I emailed the flyer (see Appendix A) to the administrator of the nonprofit

organization to post throughout all their facilities. I am not affiliated with this organization by any means, and I did not foresee any concerns for the participants that may pose any harm or professional ties.

Treatment of Human Participants

Prior to reaching out to participants, I submitted an IRB application seeking approval to collect data. According to the institution's requirements, Walden University IRB 11-10-23-0362543 was required to begin my study. Once I received approval from Walden's IRB office, I began my recruitment process. As mentioned previously in the study, informed consent forms were forwarded and completed by each participant. Each female veteran willing to participate in the study emailed "I consent" and forwarded it back to the email provided on the flyer. My duty was to protect the participants as best as possible and avoid causing any harm (MacLean et al., 2019). To ensure that the participants were safe and at minimal risk of causing any further harm, I provided the national hotline number (988) on the informed consent form so that the participant can consult with a mental health professional if needed. Ensuring the participant's safety and treatment of everyone was vital to my study. According to the Belmont Report (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979), the treatment of human participants in research was based upon three principles: respect for a person, beneficence, and justice. Participants were provided contact information included on the flyer so that they could contact the researcher directly and allow for anonymity by creating unique identifiers. To protect the identity of each participant, I placed their information in a secure file that remained confidential and

private. The interviews took place in a quiet, secure, and undisturbed location of their choosing during the interviewing process via Zoom. I asked thought-provoking questions so that I can gather an ample amount of rich data to identify themes during the interview. Interviews were only audio-recorded for data collection purposes.

In addition, it is also the researcher's responsibility not to pressure the participant to proceed with the interview if they felt uncomfortable at any time. Female veterans were briefed on the purpose of the study, the process to obtain their information, a tentative timetable, and the option to decline to be a part of the study at any time. Once the interview was completed, each participant was debriefed and asked if they had any questions or concerns that may not have been addressed to ensure that all the information that I have retrieved is accurate. At the end of the research process, debriefing provided participants with a thorough explanation of the relevant background of the study. I reiterated my commitment to confidentiality in this debriefing statement.

Data Treatment

According to ethical procedures, I created a pseudonym to identify each female veteran to ensure the confidentiality of their information. Pseudonyms were used instead of the participants' names to protect their identities. According to Lahman et al. (2023), it is ethically acceptable and expected that qualitative research be conducted using pseudonyms to safeguard participants' privacy. Information gathered during the interview will only be shared with two of my committee members without any identifying information. The participant's information was stored in an encrypted file and secured for five years based on Walden University's IRB requirements. Once the five years are up,

any information that has been saved, stored, and encrypted will be deleted from all devices.

Other Ethical Issues

As a token of gratitude and appreciation, female veterans were offered a \$25 Visa card as a thank-you for volunteering to participate in my study. This was not to convince or persuade the participants to volunteer, as they may not have met the inclusion criteria. I shared with each participant that I am a veteran in hopes of developing trust with the participant for the interview. Even though being a veteran means possible biases due to the nature of the study, I set aside my personal thoughts and feelings to focus on the purpose of my study and prevent misinterpreting any information that I have gathered from the data collected. I maintained professionalism and avoided any judgments to establish rapport with each participant.

Summary

In Chapter 3, the study's purpose and a brief description was included. This chapter included the research design and justification for the study, the researcher's role, the methodology, instrumentation, recruiting, participation, data collection processes, and the data analysis strategy. The trustworthiness difficulties were thoroughly explained to assure credibility, transferability, dependability, and conformability in general qualitative research. In order to guarantee that the IRB process was followed and to describe the ethical procedures of human participants, ethical protocols were discussed. In Chapter 4, I discussed the findings of barriers that affected female veterans securing housing after transitioning out of the military. Chapter 4 contained the participants' in-depth interview

responses and their backgrounds, experiences, and perspectives on the challenges they have faced in homelessness.

Chapter 4: Results

In this study, I aimed to examine the lived experiences of the barriers to housing for female veterans transitioning out of the military. Gender-specific housing was also important to my study and to how female veteran homelessness is steadily growing in the United States (see VA National Center on Homelessness Among Veterans, 2016). Along with providing a clear path for data collecting and analysis, the research question is in line with the study's objectives. The following is the research question: What are the barriers to housing for female veterans who have experienced homelessness after transitioning from the military?

The study results are presented in an orderly and informative manner in Chapter 4, which is divided into seven components. The first section includes demographic information about the study to better understand the experiences of the participants. Moreover, the geographical and secular characteristics of the research context are important for understanding the participants' experiences. Next, the demographics detail the characteristics of the participants' branch of service and who identify as women who described homelessness as a part of their challenging transitional experience. In addition to the data collection methods and procedures, the recruitment process and ethical considerations are also discussed. As a fourth step, the analysis of the data is explained, along with a description of how data were coded, and any thematic patterns identified. To demonstrate trustworthiness, strategies and techniques should be defined to ensure credibility, dependability, confirmability, and transferability. The results are based on each participant and are presented and supported by direct quotations. Lastly, the

concluding section summarizes the key findings, emphasizing key themes and significant insights gained from the study.

Setting

This study's research setting included a particular group of female veterans who became homeless after leaving the service. Because of the obstacles each person has encountered when trying to obtain resources to help them following their transition, these female veterans have confronted situations and difficulties. Their experiences after the military transition were impacted by their lack of resources and limited availability of them. Various contextual elements in the study setting should be considered.

The study consisted of six women who all served in the military at one point in time in their lives. The lack of permanent housing affected each female veteran, which resulted in some of them “couch surfing,” living in their cars, or going in and out of shelters. Although some participants used housing resources that were available to them, they still did not have a place to call their own.

Originally, participants were recruited by posting flyers in a facility that assisted all veterans with many services. Unfortunately, it was a challenge to gain any participants using this method. Once I saw this was an issue, I submitted a change form to be able to recruit participants via Facebook, LinkedIn, and Instagram using purposeful and snowball sampling. There was an influx of interviewees who were interested in the purpose of the study. Informed consents were forwarded to each participant, and each individual agreed to the terms of the interviewing process. Zoom was used to schedule and conduct

interviews, and audio recordings were also used to record the participants' individual experiences.

Each participant was encouraged to set up in a location where they would have privacy and not be interrupted during the interview. I also found myself a private place to conduct the interviews. Participants also were provided sample interview questions on the consent form before the interview. Also, as mentioned on the consent form, participants were provided the suicide crisis line information in the event they were traumatically impacted during this interview. Interviews were scheduled with each participant who met the criteria and consented. Before the interview, each participant was provided information before the call was audio-recorded. Each female veteran was reminded that their name would not be disclosed during this interview, that their participation was strictly voluntary, and that at any time they feel uncomfortable, they can decline to participate in this study.

Demographics

Participants' information was available to me once they emailed me back with their consent. I collected data from six female veterans who have experienced homelessness from different branches of the military (see Table 1). Each participant's identity remained confidential and was identified only by their branch of service and a number throughout the study. Participants served in different branches of the armed forces and separated from the service at various times. This information served as a snapshot of the participants' historical information and how they were impacted based on barriers that prevented them from receiving housing assistance after military separation.

Each participant was very vocal about the challenges they each faced regardless of their geographical location and services that were available but were not accessible.

Participant 1

Participant 1 served in the military for about 8 years. Participant 1 transitioned out of the military and faced many challenges immediately after military separation.

Participant 1 shared that, “she was homeless from 2009-2013 and that there was one facility that was very helpful and provided her with shelter for a little while.”

Participant 2

Participant 2 served in the military for 3 years, 9 months, and 11 days. Participant 2 was discharged from the military for failure to adapt. Participant 2 immediately faced challenges after transitioning out of the military. Participant 2 shared that “she did not have access to VA healthcare, G.I. Bill, or her VA home loan.” Participant 2 shared that “she had a friend that offered her and her children a place to live for a while.”

Participant 3

Participant 3 served in the military for a total of 26 years. Participant 3 had a unique situation. She served from 1992-1995 and then rejoined in 1998 and retired in 2018. Participant 3 stated that “her geographical location, in the beginning, proposed a lot of challenges.” Participant 3 shared that “in 1995, the system was not set up, and resources were not readily available like it was in 2018.” Participant 3 shared that, “in 1995 housing was an issue for her, and ended up living with her mother until she rejoined the military in 1998.”

Participant 4

Participant 4 served in the military for 6 years. Participant 4 immediately experienced some challenges when transitioning out of the military. Participant 4 shared that “it was challenging finding suitable housing and a stable job.” Participant 4 also shared that “not only was finding a home and a job challenging but was riddled with health challenges.” Participant 4 discussed that “organizations and programs were available for housing but were not accessible or available unless you were d*** near evicted.” Participant 4 did have shelter for a short time but could not afford to maintain it, which led to her becoming homeless.

Participant 5

Participant 5 served in the military from 2003-2007 and faced challenges immediately after transitioning out of the military. Participant 5 shared that “she had employment, but she had difficulty connecting with others that could not relate to her.” Participant 5 also shared that “her geographic location made it challenging to have access to housing resources.”

Participant 6

Participant 6 served in the military for 8 years. Participant 6 immediately faced challenges when she transitioned out of the military. Participant 6 shared that “she faced mental health challenges, health challenges, and financial struggles.” Participant 6 mentioned that “she lived with someone for a little while and gained access to resources.”

Table 1*Summary of Participants' Demographics*

Participant	Location	Time served
Participant 1	Texas	8 years
Participant 2	Georgia	3 years
Participant 3	Texas	26 years
Participant 4	South Carolina	6 years
Participant 5	New Mexico	4 years
Participant 6	International	8 years

Data Collection

In this stage of this study, recruiting my participants was well thought out and planned. Initially, I reached out to an administrator of a very lucrative nonprofit organization to post my flyer in their facility in hopes of gaining participants. Unfortunately, that was unsuccessful. I then submitted a change form to the IRB to request to post my flyers on social media outlets: Facebook (FB), Instagram (IG), and LinkedIn. Access was granted to post my flyer on social media outlets. The information on the flyer, which included my Walden email, was available to each participant.

A total of six participants were interested in participating in my study. Three participants reached out to me via FB messenger, two participants reached out to me on IG, and one reached out to me after hearing about my study from someone else. There were no listed time constraints for participants who wanted to schedule an interview because of the time it took in the beginning to gain participants. Participants who reached out to me and met the criteria were forwarded a copy of the informed consent form, which also provided detailed instructions on whether the participant wanted to move forward and schedule an interview. Participants were offered three dates and times to

schedule their interviews to be respectful of everyone's time. Each interview was scheduled for 30-60 minutes on Zoom once the consent was verified. Participants were aware of my location and that they would only be audio-recorded. Female veterans were also asked to be mindful of where they were located and be in a private location as well while they participated in the interview. Building rapport with each participant was a part of my data collection process, and I also ensured each participant that their data would only be collected by me and protected with special identifiers.

I used the dictation tool on MS Word to transcribe data and I also wrote some notes to review for accuracy. Each MS Word transcription was password protected and stored individually to prevent any information from being accessible outside of my committee members. All female veterans were emailed their transcriptions to verify accuracy and notified that their information was labeled "interviewee" for easier identification. Participants responded that they had received the transcripts and were asked to respond no later than a week. If the participants had any corrections, then instructions were to reach out via email to schedule a follow-up interview. Participants reached out and did not have any changes to their transcripts. Any changes that were different from Chapter 3 have been addressed and did not change the nature of the study. Lastly, at the end of each interview, participants were reminded that if they needed crisis intervention, they were provided the crisis hotline on the informed consent. Lastly, after the recording, participants were thanked for their service, offered a \$25 Visa gift card, and their willingness to provide resources for other female veterans.

Data Analysis

Data can be coded and analyzed in a variety of ways, and there is no one right way to do so (Braun & Clarke, 2006). Data from the interviews were collected and transcribed from audio recordings using the MS Word dictation tool. The recordings were listened to multiple times to ensure the data was accurate and to become familiar with each participant's responses. After each interview was completed, I reviewed the audio recording again to familiarize myself with the data, which is considered the first phase. I also had handwritten notes to review alongside the recorded transcripts. Next, I transcribed the data and input the data on an MS Excel spreadsheet to begin the analysis process. I corrected any misspelled words and any other grammatical errors prior to developing additional notes and commonalities in the data. Lastly, each code was assigned a pseudonym and secured with a double password file on my computer.

According to Braun and Clark (2006), once the data is reviewed and transcribed, the next part of the process is to develop codes, subthemes, and themes. Braun and Clark's (2006) six steps to TA, as I have outlined in Chapter 3, was a guide to defining the data analysis process. The second phase in this process is to start developing the initial codes. I also used the notes to compare the recorded transcripts to identify any differences or mistakes based on participants' feedback. Participants' responses were highlighted based on common themes and documented in a separate column. After I coded and transcribed the data, I emailed each participant and asked them to review it for accuracy. There were no changes to the original codes.

Phase 3 consisted of searching (Braun & Clark, 2006). I categorized the data and created subthemes when I was certain that the first-cycle codes had been properly assigned. I added another tab on the MS Excel spreadsheet to continue the sorting process. I also color-coded each theme and category to identify each code throughout the process. I added notes along the side of the themes to ensure the subthemes would align. Finally, I created tables based on the many codes into themes and subthemes.

Phase 4 consisted of reviewing and confirming the themes (Braun & Clark, 2006). Re-reading the themes and arranging codes where necessary is completed to ensure alignment. In order to verify that the themes accurately reflected the statements that the study participants were trying to get across, I looked through the transcripts' raw data. Additionally, I went over my research question again and made sure the themes encompassed my theoretical framework.

In Phase 5, I created clear definitions and names for each theme (see Braun & Clark, 2006). Each theme was named based on the raw data retrieved from the interviews. Themes were defined and depicted each participant's personal experiences. Phase 6 is the results or findings of each theme. As I continued to review the themes, it was very evident that the data was composed clearly and illustrated the lives of the participants. A report was generated to conclude the study's results using direct quotes from the participants. Moreover, using thematic analysis, it is imperative to identify any discrepant cases. Further exploration of the data, I determined there were not any discrepant cases. I hand coded all the data and forwarded the transcripts to each participant to ensure accuracy.

The coding was completed and there were seven themes, 24 subthemes, and 201 codes: supportive familial and peer relationships, organizational support, psychological and mental health growth and challenges, lack of knowledge of resources, awareness of the usefulness of resources, environmental and economic changes, and transitioning difficulties. Each theme, subtheme, and category are outlined in tables for a clearer presentation of the data in this section and in the results.

Supportive Familial and Peer Relationships

Theme 1: Supportive Familial and Peer Relationships is divided into four categories and 23 codes that detail information about the participants' support during a challenging moment in their lives after they transitioned out of the military (see Table 2). The first subtheme, "Supportive Families," describes how important it is to have supportive family members throughout the military transition and consists of 11 codes. The second subtheme, "Interaction Between Peers Was Very Helpful Within the Microsystem," is made up of four codes that represent how vital peer support is and how it is a part of creating a supportive foundation. The third subtheme, "Lack of Support from Family Members and Peers," explains the degree of lack of support between the participants and their family members and is made up of five codes. In the fourth subtheme, "Female Support Groups," like-minded individuals formed female support groups that were solely organized for female veterans and included three codes.

Table 2*Theme 1: Supportive Familial and Peer Relationships*

Subtheme	Subtheme description	Number of codes	Code
Supportive families	This subtheme describes How important it is to have supportive family members	16	Supportive families (7) Being supportive the best way they know how (1) Financial support was provided (1) Emotional support was evident (1) friend support during homeless (1)
Interaction between peers was very helpful	This subtheme describes how peer interaction is important based on developing and nurturing friendships (microsystem)	4	Peer support (4)
Lack of support from family members and peers	This subtheme indicates how some family members are supportive and some are not		family members not knowing what was truly going on to be able to assist (1) difficult to share with family but had a friend that was helpful (1) lack of support due to personal circumstances (1) had assistance but protecting pride was a factor (1) existed in survival mode; and currently today (1) lack of family support (2) no familial support (1) needed support (1)
Female support groups	This subtheme describes how female support groups are helpful	3	Support groups for female veterans (2) Female support groups (1)

Organizational Support

Theme 2, “Organizational Support,” is divided into two subthemes and highlights intrapersonal support that was available or had access to the right people. It consists of 24 codes as a part of the exosystem (see Table 3). The first subtheme, “Connections with Prior Military Members,” describes how veterans are helpful to one another and is comprised of 13 codes. The second subtheme, “community support,” indicated how community support is essential for veterans to get their needs met and consisted of 11 codes.

Table 3*Theme 2: Organizational Support*

Subtheme	Subtheme description	Number of codes	Code
Connections with prior military members	This subtheme describes how veterans are helpful to one another. (exosystem)	13	knowing the right people (4) being in the right place at the right time (5) reaching out to individuals who could potentially assist with services (1) comradery: likeminded individuals made it easier to transition (1) word of mouth was helpful (1) accessible resources based on who you know (1)
Community Support	This subtheme indicates how community support is essential for veterans to get their needs met.	11	organizations are helpful once you are linked with them (1) organizations and assistance that are applicable to each veteran (1) partnerships within the community or VA affiliations (1) organizational support (2) community organizations and government networks were helpful (2) used the library for their WIFI to submit applications (1) ability to navigate the VA system (1) provide services regardless of specifics of the veteran (physical limitations) (1) community resources (1)

Psychological and Mental Health Growth and Challenges

Theme 3, “Psychological and Mental Health Growth and Challenges,” is divided into four subthemes and 21 codes, and the results that were concluded are based on receiving mental health support and how there are challenges and growth throughout, which outlines the macrosystem (see Table 4). The first subtheme, “ Psychological Growth and Motivation,” encompasses eight codes and focused on individuals displaying motivation and resilience. The second subtheme, “ Mental Health Support,” comprises four codes and how mental health is pivotal. The third subtheme, “Mental Health Challenges,” is made up of six codes that highlight the challenges that one faces during difficult times. The fourth subtheme, “Fear of Being Unsafe,” describes the impact that unsafe feelings can affect their mental health and is made up of three codes.

Table 4*Theme 3: Psychological and Mental Health Growth and Challenges*

Subtheme	Subtheme description	Number of codes	Code
Psychological Growth and motivation	This subtheme describes how individuals displayed motivation and resilience	8	felt motivated (1) expressed that she was a hard worker (1) resilience (1) willingness and drive to do things on your own (1) self-efficacy is important (2) self-aware and pure intentions (1) did not feel worthy of certain assistance (1) feelings of shame and embarrassment (1)
Mental Health Support	This subtheme describes how female veterans benefited from mental health support	4	mental health resources (1) mental health support (1) sought counseling services (1) mental health support; community organizations (1)
Mental Health Challenges	This subtheme captures how female veterans' challenges are due to mental health concerns	6	mental health challenges made it difficult for others to be around (1) difficult topics that made the situation more stressful (1) focused on mental health concerns (2) mental health challenges (1) healthcare challenges (1) lack of empathy (1)
Fear of Being Unsafe	This subtheme focuses on how female veterans felt unsafe after military transition (macrosystem)	3	fear and thoughts of being unsafe (1) felt uneasy about asking for help from others (1) thoughts of being unsafe (1)

Lack of Knowledge of Available Resources

Theme 4, “Lack of Knowledge of Available Resources,” is comprised of four subthemes and 29 codes (see Table 5). The first subtheme, “Lack of Knowledge of Government Resources,” details how there is a lack of knowledge about government resources after military transition and is made up of ten codes. The second subtheme, “Lack of Resources Prior to Military Separation and Based on Disability Rating,” describes how important resources are for veterans and how the exosystem impacts veterans based on their lack of knowledge about available resources. It is made up of nine codes. The third subtheme, “Lack of Knowledge of Resources,” and how it can impact veterans when transitioning out of the military is made up of four codes. The fourth subtheme, “Challenge with Resources,” details how it is difficult without having access to available resources and encompasses six codes.

Table 5*Theme 4: Lack of Knowledge of Available Resources*

Subtheme	Subtheme description	Number of codes	Code
Lack of Knowledge of government resources	This subtheme describes how there was a lack of knowledge of government resources after military transition	10	focused on a particular group of veterans to provide services (1) housing was dependent on individual needs (1) lack of governmental support (1) limited knowledge on government policies (1) was not conducive to the needs of the veteran/individual (1) having knowledge or access to resources in general (1) reach out for assistance because resources are available (1) more information needs to be provided for all veterans (1) knowledge of some resources (1) lack of knowledge (1)
Lack of Resources Prior to Military Separation and Based on Disability Rating	This subtheme focuses on how the lack of resources after military separation impacts female veterans and how resources are dependent upon disability ratings	9	resources based on disability rating (1) resources dependent on the limitations of a veteran (1) resources not available to all homeless veterans (1) resources available but not suitable to all veterans (1) resources not available to all veterans (1) knowledge of programs, resources, or programs prior to military separation (1) benefits based on when you served in the military (1) being knowledgeable or having access to programs that inform veterans of the many services that are available (1) knowledge of resources prior to military separation (1)
Lack of Knowledge of Resources	This subtheme describes how female veterans faced challenges when available resources were unknown or were not accessible (exosystem)	4	more information available to all veterans (1) not advertised enough/ lack of knowledge (1) challenging with knowing when and where appointments are (1) difficulty accessing the resources (1)
Challenges with Resources	This subtheme indicates how female veterans face challenges when assessing resources	6	challenges with receiving assistance (1) challenges with receiving appropriate services (1) lack of knowledge about resources (2) food bank was available but was disappointing (1) unwillingness of others to seek resources (1)

Awareness of the Usefulness of Resources

Theme 5, “Awareness of the Usefulness of Resources,” is divided into five subthemes and 30 codes (see Table 6). The first subtheme, “Basic Needs and Resources,” focuses on how basic needs are important and consists of three codes. The second subtheme is “Having Access to Resources Based on Support System” and is made up of three codes. The third subtheme, “Useful Resources,” is comprised of the responses of the participants having access to available resources and consists of ten codes. The fourth subtheme, “Awareness of Resources,” captures the participant's personal experiences

based on having accessible resources and is made up of ten codes. The sixth subtheme, “Available Medical Care,” detailed how participants felt about available medical care and consisted of four codes. All subthemes and responses were a part of the exosystem.

Table 6*Theme 5: Awareness of Usefulness of Resources*

Subtheme	Subtheme description	Number of codes	Code
Basic Needs and Resources	This subtheme indicates how female veterans discussed how their basic needs were met	3	provide useful information to others (1) provided the basic needs (1) basic needs were met (1)
Having access to resources based on support system	This subtheme describes how resources were available based on support systems (exosystem)	3	services available based on support system (1) accessible resources for housing and other resources if you made a connection with someone (2)
Useful Resources	This subtheme indicates resources that was helpful for female veterans	10	useful resources (2) resources are helpful (1) use resources that are available (1) available resources (1) resources that are useable and available legal services (1) available resources or telephone number (1) resources are more accessible now (1) available resources for job searching (1) having a cell phone was crucial (1)
Awareness of Resources	This subtheme focuses on having more access to resources	10	aware of accessible resources (2) access to available resources (1) located resources individually for the most part (1) knowledge of resources (1) more access to resources (2) resources are available more today than in the past (1) easier access to resources via web-based programs; make resources attainable for all veterans (1) being able to provide others with the resources that may be available (1)
Available Medical Care	This subtheme focuses on available medical care for female veterans	4	had medical care through the VA (1) medical care was available (1) ensure medical staff are accessible and supportive (1) women's health services (1)

Environmental and Economical Changes

Theme 6, “Environmental and Economical Changes,” is supported by three subthemes and 38 codes (see Table 7). The first subtheme, “Environmental Challenges,” focuses on how female veterans' lack of resources impacted and challenged them based on their geographical location and consisted of 17 codes. The second subtheme, “Economic Changes,” describes how the differences with economical challenges has caused some stressors based on the participants’ responses and consisted of 12 codes. The third subtheme, “Cultural Differences and Challenges,” detailed how the participants faced several cultural challenges based on the participants’ responses and consisted of nine codes. Each of these themes and codes was supported within the chronosystem.

Table 7*Theme 6: Environmental and Economical Changes*

Subtheme	Subtheme description	Number of codes	Code
Environmental Changes	This subtheme focuses on how environmental changes impacted female veterans based on their geographic location	17	<p>services based on location (1)</p> <p>location of services; convenience (1)</p> <p>services only available if an individual meets the criteria (1)</p> <p>geographic location (1)</p> <p>organizations to assist with your disability ratings (1)</p> <p>supportive organizational assistance (1)</p> <p>organizations based on geographic location (1)</p> <p>geographic locations are vital (2)</p> <p>workshops and resources based on location (1)</p> <p>organizational support; community resources (1)</p> <p>felt that others benefited from services due to racial background and geographical locations (1)</p> <p>services accessible based on location (1)</p> <p>community support/organizations based on geographic location (1)</p> <p>geographic location is important to resources and services (1)</p> <p>geographic location is important to access resources (1)</p> <p>available resources in the state of Georgia (1)</p>
Economic Changes	This subtheme indicates how economic changes developed challenges for female veterans (chronosystem)	12	<p>unstable; changes in societal economic changes (1)</p> <p>societal economic changes: environment changes, intrapersonal relationships are important (2)</p> <p>financial struggles; instability (1)</p> <p>limited funding (1)</p> <p>marital discord (1)</p> <p>financial/economical challenges (1)</p> <p>financial struggles; marital stressors (1)</p> <p>financial instability (1)</p> <p>loss of financial stability and support (1)</p> <p>personal challenges that limit the veteran (1)</p>
Cultural Differences and Challenges	This subtheme describes how different cultural backgrounds created challenges for female veterans	8	<p>cultural differences and challenges (2)</p> <p>did not meet the cultural standards of others (1)</p> <p>benefits based on racial/ethnic background (1)</p> <p>cultural embarrassment or a letdown (1)</p> <p>based on racial/ethnicity background (1)</p> <p>belief system played an intricate role in my experiences (1)</p> <p>beliefs and culture were not affected but resiliency was present during these times (1)</p>

Transitioning Difficulties

Theme 7, “Transitioning Difficulties,” is divided into two subthemes and 13 codes (see Table 8). The first subtheme, “Employment Transitions from the Military,” highlights how ineffectively transitioning out of the military without employment is challenging and is made up of three codes. The second theme, “Instability with Housing Programs,” described the impact of the instability of housing programs that caused limited access consisted of ten codes. The chronosystem supported this theme and its subthemes.

This comprehensive code system facilitates the organization and analysis of the interview data. Through thorough data examination, the researcher was able to identify important themes from the interviews. The first codes linked with each subtheme offer significant insights into the experiences of the participants, elucidating the complex effects of how female veterans faced many challenges after transitioning out of the military.

Table 8*Theme 7: Transitioning Difficulties*

Subtheme	Subtheme description	Number of codes	Code
Employment transitions from the military	This subtheme indicates how female veterans were having difficulties with becoming employed	3	challenges with transitioning out of the military (1) being educated prior to separating out of the military; being able to have employment (1) military jobs not transitional to civilian jobs (1)
Instability with housing programs	This subtheme details how housing options were based on geographical locations.	10	available housing based on geographic location (1) limited support based on location (1) community resources are based on geographic location (1) difficulty finding housing resources due to geographic location (3) housing resources were available and helpful (2) unknown programs or organizations after military transition (1) unaware of any housing programs (1)

Evidence of Trustworthiness**Credibility**

I applied the techniques that were previously described in Chapter 3 in order to guarantee the validity of the study's findings. Member checking was the main objective used to determine the accuracy of the data. In order to get feedback from the participants, I emailed each participant a copy of their transcribed interviews to offer them an opportunity to review and confirm their responses. As a last step, I used data collection

and analysis methods through previous research to strengthen the study's credibility, as suggested by Shenton (2004).

Transferability

I used the techniques outlined in Chapter 3 to broaden the application of the study's findings. Bronfenbrenner's ecological systems theory (1977) was used to filter the results of the study to ensure that the findings were aligned. Additionally, I provided a detailed description of the research methodology, including the sampling process, interview guide, and data collection procedures were supplied. Lastly, I included the results of the study to improve the results' transferability; I provided a thorough explanation of the study's findings that considered the participants' experiences, actions, and surroundings (Shenton, 2004).

Dependability

According to Attride-Sterling (2001), it is important to get significant and practical outcomes to yield useful results. In qualitative research, dependability refers to the ability to replicate the study regardless of whether the results differ (Stenfors et al., 2020). Initially, I gave a clear explanation of the research concept and methodology that guided this investigation. In an effort to make my study even more reliable, I regularly assessed the research design and methodology for performance. By adhering to the methods previously outlined in Chapter 3, I was able to guarantee dependability by documenting as much as I could to leave little room for questions (Shenton, 2004).

Confirmability

In qualitative research, confirmability enables a researcher to make sure that the findings truly represent the experiences of the participants rather than their own beliefs or viewpoints (Shenton, 2004). Writing hand notes was crucial for recording the researcher's ideas, reflections, and possible influences on the analysis. To prevent any biases throughout the data collection and data analysis process I consistently wrote notes throughout this process.

Results

This section included the findings that were captured from the interviews of the female veterans who once experienced homelessness after military transition. The findings provided information that contributed to the research question: What are the barriers to housing for female veterans that have experienced homelessness after transitioning from the military? The results of this investigation were categorized into codes, subthemes, and themes using MS Excel Spreadsheet (Braun & Clark, 2006). The results of the study were grouped into seven themes. To emphasize their unique perspectives and experiences, participants were directly quoted in every section. Examining participant replies and conducting a methodical analysis, interpretation, and structuring of the data highlights the barriers that female veterans were faced with when transitioning out of the military.

Theme 1: Supportive Familial and Peer Relationship (Microsystem)

This theme describes the different forms of support that female veterans benefited from throughout their military transition. Each participant expressed their personal

experiences with the support they received from their families and their peer group (see Table 9). The participants' responses were described in detail using their quotes.

Subtheme 1: Supportive Families

It is tough being away from your family while serving in the military, but what can make that experience better would be to have a supportive family. Participant 3 stated

ohh, I would tell you I'm a very prideful person who won't really ask for too much, but if my kids needed anything, one time my kids needed a bed, my aunt let me get the bed, but I had to pay her back, you know, over a period of time. When I could afford, um, I've had an uncle who lent me money, and I paid him back over, you know, a period of time until my debt was paid. So, nothing was ever per se given if that makes sense, they provided you what you what you needed but you had to pay back, and I always made sure I paid them back because you never know when you might need help again.

Participant 5 expressed:

I would have put it in my kids, but I needed the help because I lost the house from the hurricane and had to go into the military so I could make the money to take care of us so we could, at some point, all be together again. But you know, throughout all that, it got to a point where I was like, either I'm going to have to move out, or she's going to have to move out.

Participant 6 described:

And those who were capable or aware they were. They were able to put me in the right space. Those who couldn't, couldn't. More importantly, the participants

shared their experiences with familial and peer support after they transitioned out of the military, which describes how their relationships with their families developed as children within the microsystem.

Table 9

Subtheme 1: Supportive Families

Code	Keyword/phrase
Supportive families	Support was provided by family members Supported financially in some aspects
Being supportive the best way they know how	Have a large family Very supportive family and friends
Financial support was provided	
Emotional support was evident	

Subtheme 2: Interaction Between Peers Was Very Helpful

Although these female veterans have a few things in common, only three out of six of the participants had the support of peers after they transitioned out of the military (see Table 10). Although Participant 2 did not necessarily state that she had a supportive family. Participant 2 mentioned some support:

I particularly can't help you myself, but I can put you in touch with somebody and so and she did that. You don't have to but appreciated that because she didn't have to do that, she like the same thing she couldn't back then being quiet, and you know not saying anything, but she did offer to help you know. And offer you know her assistance the best she could, so I do appreciate that.

Participant 2 also stated that peer support and knowing the right people in the right people was helpful. Each participant described having peer support as helpful.

Participant 4 shared “when I needed support, I it got from my siblings and my military family.” Participant 4 also shared they have opened their doors:

when I needed support the most support I got was from my sibling and my comrade, my military colleagues. When I was living out my car, I knew I could stop at certain cities and like stay for a week or two with a military sister you know if I could make it to the East Coast then I could you know if I could make it to where family was, I'd be okay. I think I used my last or asked for help to like to get a train ticket so that I could find my way back to where family was, so they've been supportive when they knew about the situation.

Participant 6 expressed “being in the right place at the right time and having supportive friends and peers.” The other half of the participants did not report any support from their peers after military transition.

Table 10

Subtheme 2: Interaction Between Peers Was Very Helpful

Code	Keyword/phrase
Peer support	Friend support during homeless Very supportive family and friends Supportive friends/peers

Subtheme 3: Lack of Support From Family Members and Peers

This section describes participants' personal experiences with not having familial and peer support after their military transition. The keywords and phrases are outlined in (Table 11) below. Female veterans shared their experiences based on their journey and how it impacted their lives.

Participant 1 described her experience for the lack of family members and peers: “I barely spoke to my friends which... you know I totally isolated myself while I was going through that time”. Participant 1 also stated, “Oh no there, there was no family, there was no family interaction I... I was doing everything. I hadn't even had a cell phone or anything like that, so I was doing everything you know through finding Wi-F.” Participant 6 expressed, “And those who were capable are aware they were. They were able to put me in the right spaces. Those who couldn't, couldn't.” Participant 2 had a family but stated, “family members not knowing what was truly going on to be able to assist”, after military transition.

Table 11

Subtheme 3: Lack of Support From Family Members and Peers

Code	Keyword/phrase
Family members not knowing what was truly going on to be able to assist	lack of familial support No family interaction Family was not very supportive but critical
Difficult to share with family but had a friend that was helpful	
Lack of support due to personal circumstances	
Lack of family support	
No familial support	
Needed support	

Subtheme 4: Female Support Groups

Only one of the participants shared that they benefited from the support of female groups when they transitioned out of the military compared to the rest of the female participants (see Table 12). Even though some of the participants mentioned other

support groups they were not clear on the groups being female veteran's groups. Participants 1, 2, 3, 4, and 6 did not report any female support groups that they used or were a part of. Participant 5 stated, "So the ladies at the women's veteran group that I go to gave me a list of places you could go." Participant 5 went on to say that "If you don't know about the workshops and I told you about the El Paso women veterans' group from Texas I needed a food bank." Unfortunately, female support groups were not as accessible or available to the other participants.

Table 12

Subtheme 4: Female Support Groups

Code	Keyword/phrase
Support groups for female veterans	Female support groups
Female support groups	

Theme 2: Organizational Support (Exosystem)

The second theme focuses on the support that veterans receive from other veterans and community organizations. Quotes from participants illustrate how they experienced their connections with other veterans. Although each participant's experience was different, their self-awareness was attributed to knowing the right people and being in the right places.

Subtheme 1: Connections With Prior Military Members

Four of the six participants were able to share how they knew the right people, indicating their veteran community. The participants indicated that knowing the right people was helpful after their military transition (see Table 13). Participant 1 stated,

“knowing the right people when she traveled to Florida when she did not have a place to call home.” Participant 2 shared that, “knowing the right people and well that's how I met the lady that worked at DVA through her you know just being at her house.” Participant 3 described, “Comradery and like-minded individuals made it easier to transition.”

Participant 6 described to the researcher, “a lot of my information came from people who I knew, who knew people. Umm, they were like in some type of Professional position, so that's how I was introduced to information so, as mentioned. At the time, the person I was living with.”

Table 13

Subtheme 1: Connections With Prior Military Members

Code	Keyword/phrase
Knowing the right people	Having access to individuals who knew of other resources
Being in the right place at the right time	
Reaching out to individuals who could potentially assist with services	Being able to make connections with people
Comradery: likeminded individuals made it easier to transition	
Word of mouth was helpful	
Accessible resources based on who you know	

Subtheme 2: Community Support

The second subtheme emerged and indicated that all participants were aware of or used community resources after military transition. Participant 3 mentioned, “Well, now we have the churches then and some community centers they give out food on a regular to better you just got to be there at a certain time show your ID whatever the case may be.” Which was quite different from the other participants such as Participant 1 stated that “**needs** were being met by living in stable housing provided for veterans.”

Information detailing the community resources that the participants indicated (see Table 14).

Table 14

Subtheme 2: Community Support

Code	Keyword/phrase
Organizations are helpful once you are linked with them	Community Resources
Organizations and assistance that are applicable to each veteran	Organizational Support and assistance
Partnerships within the community or VA affiliations	
Organizational support	
Community organizations and government networks were helpful	
Ability to navigate the VA system	
Provide services regardless of specifics of the veteran (physical limitations)	
Community resources	

Theme 3: Psychological and Mental Health Growth and Challenges

(Mesosystem/Macrosystem)

This theme detailed how the participants experienced some challenges and recognized growth after their military transition. Female veterans described what their experiences were like and indicated how this had a positive impact on them. Even though not all participants mentioned their growth or motivation, they acknowledged their shortcomings and what they did to initiate change.

Subtheme 1: Psychological Growth and Motivation

More than half of the participants discussed how each of them experienced psychological growth and motivation. Participant 1 stated that she “focused on her mental health” but did not describe experiencing any motivation or growth. Participant 2 mentioned that she “continued reaching out to individuals who could potentially assist with services.” Participant 3 stated that “self-efficacy is important.” Participant 3 went on

to say, “be willing to receive the assistance if it is offered.” Participant 4 shared a different perspective and stated that she “existed in survival mode and currently today.” Participants 5 and 6 did not indicate psychological growth or motivation, and it is not expected for all individuals to be able to share a positive experience. For further details, please (see Table 15).

Table 15

Subtheme 1: Psychological Growth and Motivation

Code	Keyword/phrase
Felt motivated	Focused on mental health concerns
Expressed that she was a hard worker	Focusing on ways to provide a better life for family
Resilience	Independence and resiliency
Willingness and drive to do things on your own	Existed in survival mode

Subtheme 2: Mental Health Support

One out of the six participants sought out mental health support or services. Although in (Table 15) participants shared with the researcher their experiences with growth and motivation, they did not mention receiving any mental health services. Participant 5 mentioned that she “sought counseling services” and also stated that “Papa found this counselor that would do like Zoom meetings like you and I are doing, but it was counseling so that I could have someone to talk to and air out my frustrations, so on and so forth and look for ways and try to be more positive because I, I was not in a positive place at that point.” Please (see Table 16) to gain more insight.

Table 16*Subtheme 2: Mental Health Support*

Code	Keyword/phrase
mental health resources mental health support sought counseling services mental health support; community organizations	Mental Health Support

Subtheme 3: Mental Health Challenges

Although a few of the participants did not outright mention having any mental health challenges, Participant 3 did report feeling that people displayed a “lack of empathy,” and Participant 4 stated that she experienced “feelings of shame and embarrassment.” Participant 1 and Participant 6 shared their personal experience as well (see Table 17). Participant 1 mentioned “being more aware of her mental health and coming from a more passionate place, and Participant 1 also stated that her mental health challenges made it difficult for others to be around”. “Participant 6 stated that she has “challenges with being self-aware of her mental health issues.” Participant 6 also shared with the researcher that, “We’re not and still not familiar with the signs of mental health behavior system, they're trying to give it a disorder. But you know, those who are not aware of those things, it can be really tough and so I literally had to like to separate myself from people.”

Table 17*Subtheme 3: Mental Health Challenges*

Code	Keyword/phrase
Mental health challenges made it difficult for others to be around	Mental health challenges
Mental health challenges	Difficulty navigating life with my mental health issues
Healthcare challenges	Focused on mental health concerns
Lack of empathy	Felt like my concerns were not important to them; did not feel supported or important
Difficult topics that made the situation more stressful	Felt uneasy about asking for help from others
Focused on mental health concerns	Being more aware of my mental health
Feelings of shame and embarrassment	Did not feel worthy of certain assistance

Subtheme 4: Fear of Being Unsafe

Participants were asked what was a life-changing experience for them. All participants responded as expected, but all of them had very different experiences. Participant 1 ensured that she was safe and stated that she was “just trying to navigate, you know, and be safe at the same time.” Participant 4 mentioned that she “felt uneasy about asking for help from others” and “had fears and thoughts of being unsafe due to trusting Uber or taking public transportation.” Both participants provided details on why they felt unsafe (see Table 18).

Table 18*Subtheme 4: Fear of Being Unsafe*

Code	Keyword/phrase
Fear and thoughts of being unsafe	Traveling from state to state
Felt uneasy about asking for help from others	Fear of riding in cars with strangers
Thoughts of being unsafe	Fear of being shelters because I have a daughter

Theme 4: Lack of Knowledge of Available Resources (Exosystem)

Participants felt that they did not have enough knowledge about resources after they transitioned out of the military and shared their thoughts (see Table 19). Participant 1 stated that there was a “lack of government resources” and went on to say that she was “unaware of any programs.” Participant 2 mentioned that there were “resources based on disability rating and resources were depended on the limitations of the veteran.” Participant 3 shared with the researcher that “resources are more available today than in the past.” Participant 3 served in the military from 1992-1995 and then rejoined the military in 1998 and retired in 2018. Participant 4 stated that resources were, “only available if an individual meets the criteria.” Participant 5 mentioned that “resources available but not suitable to all veterans.” Lastly, Participant 6 reported the opposite of the other participants and stated that, “government and community organizations were helpful.”

Table 19*Subtheme 1: Lack of Knowledge of Government Resources*

Code	Keyword/phrase
Focused on a particular group of veterans to provide services	Services dependent on veterans limitations (physically), sexual assault survivors
Lack of knowledge Lack of governmental support	Unaware of services
Knowledge of some resources	Word of mouth; looked them up on my own
More information needs to be provided for all veterans	Prior to military separation
Reach out for assistance because resources are available Limited knowledge on government policies	Dependent on location
Having knowledge or access to resources in general	Unaware of any programs or services that provide resources
Was not conducive to the needs of the veteran/individual Housing was dependent on individual needs	

*Subtheme 2: Lack of Resources Prior to Military Separation and Based on Disability****Rating***

Each participant shared their perspective on knowing about resources prior to military separation (see Table 20) for further details. Although their experiences were different, each participant described how the lack of resources impacted them prior to military separation. Participant 1 felt that “suitable staff for mental health services for female veterans was needed.” Participant 1 also stated that “improving and implementing avenues for accessibility” is needed. Even though Participant 2 had similar thoughts, she mentioned, “resources based on disability rating, focused on a particular group of veterans, and resources are not available to all homeless veterans.”

Despite the experiences that each participant shared, the main concern was having some information about resources prior to separating from the military. Participant 3 had a different perspective and shared that she “had access to resources today than she did in the past.” Participant 4 stated that “resources were available if an individual met the criteria.” Participant 5 stated the same sentiments as Participant 2 and mentioned that “resources are available but not suitable to all veterans.” Lastly, Participant 6 expressed that there are “challenges with individuals meeting criteria for certain programs or services.”

Table 20

Subtheme 2: Lack of Resources Prior to Military Separation and Based on Disability

Rating

Code	Keyword/phrase
Resources not available to all veterans	Not enough female veteran resources
Resources dependent on the limitations of a veteran	Physical limitations, homelessness, Substance abuser
Resources not available to all homeless veterans	Resources not available to all veterans
Resources available but not suitable to all veterans	Not available to all veterans
Knowledge of resources prior to military separation	Knowledge of programs, resources, or programs prior to military separation
Being knowledgeable or having access to programs that inform veterans of the many services that are available	Unsure of resources; lack of accessibility; lack of support from government agencies
Benefits based on when you served in the military	Post 9/11 there's a lot of organizations
Knowledge of programs, resources, or programs prior to military separation	Very little knowledge of resources; more information available to all veterans
Resources based on disability rating	Resources dependent on the limitations of a veteran

Subtheme 3: Lack of Knowledge of Resources

Being aware of resources would be helpful to anyone, but gathering information from all six participants focusing on the lack of resources overall was described as challenging. The majority of the participants stated that there was a lack of knowledge, limited access to resources, or resources were not accessible (see Table 21) for a further review of this information.

Participant 1 reported that she “was unsure about any resources.” Participant 3 and Participant 4 knew about available resources, but Participant 3 shared a different experience from the first time she separated from the military compared to the second time she transitioned out of the military. Participant 3 shared that “resources are more accessible today than they were in the past.” Participant 5 felt that “resources are available but not suitable for all veterans and resources are not advertised enough, which leads to not knowing about the resources.”

Table 21

Subtheme 3: Lack of Knowledge of Resources

Code	Keyword/phrase
more information available to all veterans	Having access to individuals who knew of other resources was helpful
not advertised enough/ lack of knowledge	Lack of programs or services
difficulty accessing the resources/ challenging with knowing when and where appointments are	VA being more proactive with all services and resources; had limited access to VA resources

Subtheme 4: Challenges With Resources

Female veterans voiced their concerns about facing challenges with resources after military transition. To gain more perspective (see Table 22), it will show some of the challenges that the participant faced. Participant 3 reported that “resources are more accessible today than they were in the past.” Participant 5 also reported that “more information needs to be provided for veterans.” Participant 6 had a different perspective and mentioned that, yes, she was “resourceful independently” but had support from the VA.” Most of the participants mentioned having challenges with utilizing resources because of their locations or just not knowing about the resources.

Table 22

Subtheme 4: Challenges With Resources

Code	Keyword/phrase
Challenges with receiving assistance	uninformed of workshops or organizations unknown programs or organizations after military transition
Lack of knowledge about resources	lack of knowledge; resources that are useable
Unwillingness of others to seek resources	Located resources individually for the most part
Food bank was available but was disappointing	Was not conducive to the needs of the veteran/individual

Theme 5: Awareness of Usefulness of Resources (Exosystem)

The perspectives of the participants regarding the utility of resources as a component of the exosystem are described in the fifth theme to emerge from the data. The participants shared their thoughts on their basic needs being met, acknowledged how resources were helpful, and had access to medical care. Additionally, the few who had access to the resources made significant use of the resources (see Table 23).

Subtheme 1: Basic Needs and Resources

The study participants discussed how their basic needs were being met. Each participant indicated experiencing what it felt like to have their needs met and providing other useful information to other veterans. One of the participants shared that the resources she had a part of she shared with other veterans.

Participant 1 reported, “Having available housing was an option. Participant 2 shared: they gave me information on food pantries, and you know where to get different things if I need like I said they didn't have it, they couldn't help then they would point me in the right direction. Participant 2 also identified that “her basic needs were met.” As a part of the exosystem, receiving assistance from community organizations is valuable.

Participant 3 expressed: there are different workshops on how to manage your money. We have a group called Pathfinder. When you are better, you can come in and talk that way; you have that support group. We have groups for survivors of military sexual trauma. Found it helpful once you were linked with the organizations. Participant 3 also shared with the researcher that “community resources were helpful.”

As any resource can be helpful, Participant 4 stated that she “used the library for their Wi-Fi) to submit applications. Participant 5 mentioned that she “visited a food bank but was it was very disappointing.” Lastly, Participant 6 mentioned a great deal of community support, but she “located her resources independently.”

Table 23*Subtheme 1: Basic Needs and Resources*

Code	Keyword/Phrase
Provide useful information to others	Aware of resources
Provided the basic needs	Useful resources
Basic needs were met	Information on food pantries

Subtheme 2: Having Access to Resources Based on Support System

As mentioned earlier, among the themes, some participants shared with the researcher that they did not have a familial support system. Participants shared how having access to resources based on their support system was helpful (see Table 24). Less than half of the participants stated that having access to resources based on a support system was very helpful. The other half of the participants did not indicate that they had resources based on a support system.

Participant 1 expressed

I think it's just a hit and miss. I really believe that it's about who's what type of support you may have acquired or what type of support you may have fell upon or being at the right place at the right time at that time at those in those particular years. It was very difficult for me to navigate, and I and I like I said, I would hear other people complain about it too or get upset about it or whatever the case was, but in my particular case, I would just say that it was it was a difficult it was about trial and error and about who you have a support system to be able to help you navigate through the VA system when it comes to questions being answered

telephone numbers or different system different whatever you need to do it was more difficult so.

Participant 2 stated

I mean, I didn't have like those people, but they didn't really know what was going on like they really didn't know exactly what was going on. I never say you know oh I'd say you know like my mom my dad did not know until after that until I got an apartment that's when they come in again like I said that was on me. Telling anybody what I was going through, I mean, like I said, the one friend that you know that we could come and stay with her you know take care of it whatever well that's how I met the lady that worked at DVA through her you know just being at her house and talking about what I was dealing with and that's how I met her so and that was the only person but nobody else like really knew so they didn't know you know they couldn't be help or not because they didn't know what was going on.

Table 24

Subtheme 2: Having Access to Resources Based on Support System

Code	Keyword/Phrase
Services available based on support system	Peer support or mentors
Accessible resources for housing and other resources if you made a connection with someone	Knowing the right people was helpful

Subtheme 3: Useful Resources

All participants referenced that useful resources were helpful after their military transition. Each participant shared a different experience but stated that they had received

some form of assistance based on the usefulness of the resources (see Table 25). Two of the six participants stated that having access to a phone or having a telephone number for resources was very helpful for them, which allowed them to use Wi-Fi to locate resources independently. Participant 2 mentioned

The main goal is to be self-sufficient, so I mean you know if I; if I ever you know talk to somebody or whatever I tell them you know hey call this number; call that number. Participant 4 stated: that having her cell phone was crucial and that.

Yeah, I think with me having a phone and like being in the age of the Internet and like Wi-Fi I knew I could go to the library. I knew I could go to McDonald's and sit there and connect the Wi-Fi and use my laptop to, you know, try to apply for some places... um my access was a lot more digital than it was like walking into places. A lot of places you're not walking in and asking for help anymore, they want you to go on their website, they want you to make an account, they want you to fill out this application. It almost felt like filling out an employment application but it's for housing and trying to to get help so a lot of it was digital.

Table 25

Subtheme 3: Useful Resources

Code	Keyword/Phrase
Resources are more accessible now	Relocation
Useful resources that are available	Housing programs
Available resources	Awareness of Resources
Resources that are useable and available legal services	Housing and Food resources
Available resources for job searching	Resume writing
Having a cell phone was crucial	Able to use Wi-Fi
Available resources or telephone number	Able to connect more than one way

Subtheme 4: Awareness of Resources

Within this subtheme, each participant shared their personal experiences about the awareness of resources (see Table 26). Participants specified the importance of knowing about accessible resources when they transitioned out of the military. Unfortunately, all the participants were not aware of resources initially but eventually got connected with some resources whether it was from a peer, mentor, by happenstance, or individual efforts.

Participant 6 was the only individual who had available and accessible resources in the beginning. Participant 1 shared with the researcher that “she was unsure about any resources, and Participant 4 acknowledged, “having had access to resources, it was difficult receiving them.” In addition to what the other participants experienced, Participant 2 stated that she, “was aware of resources because of peer interactions” but Participant 5 described, “having access to resources but was not suitable to all veterans.” Lastly, Participant 3 had a different experience and did not have “accessible resources until she relocated.”

Table 26*Subtheme 4: Awareness of Resources*

Code	Keyword/Phrase
Aware of accessible resources	Knowing the right people
Access to a available resources	Based on geographical location
Located resources individually for the most part	Access to Wi-Fi and cell phones
Knowledge of resources	Knowing the right people
More access to resources	Community resources are more accessible now
Resources are a available more today than in the past	Community resources are more accessible now
Easier access to resources via web-based programs; make resources attainable for all veterans	Resources were a available
Being able to provide others with the resources that may be available	Provide useful information to others

Subtheme 5: Available Medical Care

This last subtheme in this section specifically focuses on the participants having available medical care. Only one participant shared that she received medical services after her transition out of the military. Participant 6 stated:

Umm, well, I have a veteran that had a reading like when I got out, and then I think when you first get out because I don't want discharge. I don't know what this is, but I had like access to medical for a while, like after I got out.

All other participants did not report any medical care after military transition. Even though the other participants did not use medical care, it did not necessarily mean they did not need it or have access to it.

Table 27*Subtheme 5: Available Medical Care*

Code	Keyword/Phrase
Had medical care through the VA	Medical care was available
Medical care was available	Access to medical benefits
Ensure medical staff are accessible and supportive	Medical services were available but were not empathetic
Women's health services	VA has a women's veteran program

Theme 6: Environmental and Economical Changes (Chronosystem)

This theme focuses on how participants experienced environmental and economical changes after their military transition. Quotes from the participants will illustrate their journey and how they used resources that they had access to. The location of the participants played a major role in what resources were accessible and available to them.

Subtheme 1: Environmental Changes

Most of the participants expressed to the researcher that their geographical location had a major impact on them getting a fair chance of utilizing VA services. A few of the participants acknowledged that they may not have qualified for particular services and did not have any other options at the time (see Table 28). Participant 1 shared

I think it's just a hit and miss. I really believe that it's about what type of support you may have acquired or what type of support you may have fell upon or being at the right place at the right time at that time at those in those particular years. It was very difficult for me to navigate, and I and, like I said I, would hear other people complain about it too or get upset about it or whatever the case was, but in my particular case, I would just say that it was it was difficult. It was about trial

and error and about who you have a support system to be able to help you navigate through the VA system when it comes to questions being answered, telephone numbers, or different systems different, whatever you need to do. It was more difficult so.

Participant 2 mentioned

I do recommend SBF because they really help me a lot, and they even particularly helped me with... they put me in touch.... they put me in touch. They had so many resources, and they put me in touch with, you know, somebody that could help.

Although each participant shared something different, they mainly focused on being in a location where services were accessible. Participant 3 mentioned, "Um, well, what I've learned now is especially being here in Texas because before, I was in Georgia, and being here in Texas now, Texas is about their veterans. Participant 4 shared her thoughts, "But it's not like there was one central hub for what you can do and where you can go." Participant 5 felt that it was difficult finding resources, "OK. I went to my sisters in Ohio with having to go with the civilians because there's no VA anything to Erie, PA where there's no female veteran anything. The Buffalo that only had ten units and it's one building, one little brick building. I have no clue if New Mexico has any female or anything. I've never had to look into it. Lastly, Participant 6 acknowledged that there were many resources based on her location and stated that, "But you have like organizations now that are popping up and like the offices are popping up in the city when you drive by, and you see a veteran organization. So, I think now more services are

easily available depending on where you are.” However, the participants felt that the resources were not accessible they did eventually get on their feet or use available resources.

Table 28

Subtheme 1: Environmental Changes

Code	Keyword/Phrase
Services based on location	Limited support and services based on location
Location of services; convenience	Location is important
Services only available if an individual meets the criteria	Veterans had to meet certain prerequisites or qualifications
Geographic location	More resources
Organizations to assist with your disability ratings	very limited resources based on disabilities or military service date
Supportive organizational assistance	Available and accessible resources regardless of geographical location
Geographic locations are vital	Geographical location was a challenge
Organizations based on geographic location	Difficult because assistance was not in one location
Workshops and resources based on location	Women’s groups and food closets
Organizational support; community resources	Supportive organizations and focus groups
Felt that others benefited from services due to racial background and geographical locations	Benefits based on racial/ethnicity background
Services accessible based on location	Access to a available resources
Community support/organizations based on geographic location	Local organizations/support groups
Geographic location is important to resources and services	Assistance based on location
Geographic location is important to access resources	Access to a available resources
Available resources in the state of Georgia	Location is vital

Subtheme 2: Economic Changes

All participants stated that they had financial struggles when they transitioned out of the military. Each individual had their challenges with financial instability. What would have been helpful, according to Participant 1, would have been to have employment, “but I wasn’t able to work, and if I did attempt to acquire employment, that

didn't last long." Participant 2 felt that "being educated prior to separating out of the military; being able to have employment." Another point that Participant 2 wanted to share was how "military jobs are not transitional to civilian." Participant 3 shared a different story and was "supported financially in some aspects by her family." Participant 4 shared with the researcher that she was actually working at the VA hospital and was making about less than \$700 every two weeks, and rent was like \$1100 or \$1200, so I wasn't making enough." Participant 5 voiced her concerns, "about her account being cleaned out." Lastly, Participant 6 did not necessarily state that she had financial struggles she did describe, "living in her car and the car had a lot of parking tickets; the car was not paid off at the time." Participant 6 also mentioned that "it was just easier to live out of my car at that point." After a careful review of the data collected in this session, it is evident that the lack of finances was a major concern for the participants.

Table 29

Subtheme 2: Economic Changes

Code	Keyword/Phrase
Unstable; changes in societal economic changes Societal economic changes: environment changes, intrapersonal relationships are important	Unemployment Received reimbursement for attending medical appointments;
Financial struggles; instability Limited funding	Fear of lack of income I was provided \$250; I could not even pay rent
Marital discord	Bank account was cleaned out
Financial/economical challenges	Being prepared financially when you transition out of the military
Financial struggles; marital stressors Financial instability	Once I divorced it was difficult financially Received reimbursement for attending medical appointments;
Loss of financial stability and support Personal challenges that limit the veteran	Lost job due to car being repossessed No familial support financially because they did not know what I was going through

Subtheme 3: Cultural Differences and Challenges

In this section, the researcher will incorporate quotations from the participants who felt that there were some cultural differences and challenges after the military transition. As we all have differences and come from diverse backgrounds some things may seem foreign that you may not be familiar with. To gain more insight about what some of the participants mentioned (see Table 30). More than half of the participants shared that they experienced cultural differences and challenges after they transitioned out of the military. Participant 2 explained: you know my belief system had a lot to do with just not giving up and not know trying to shield my kids from experiencing certain things or whatever. She also mentioned that she believed that a lot of things they're based on your race or your zip code. You have more access to better benefits that, and you know that there are programs that have more money or more funded also feel like a raise. It has a lot to do with it if you were you know if you're not African American veteran or minority veteran then there are more programs. I just feel like though that these things, you know, play a big role.

Participant 4 quoted: I'm here now so where do we like...how do I get help now for the most part my interactions were polite there were a few instances where it just felt one. I'm a Black woman, too. I've lived in, like, some of the cities were predominantly white or Caucasian, a lot of the resources were in areas that were Anglo-Saxon, and so you know, if you gotta go to a Catholic Church or nonprofit, but they're faith-based, and I'm not faith-based then it's almost like you like a dog and pony show kind of that's what I could if I could say that. Participant 5 proclaimed: For me, I lived in foster care all my

life, so I always knew nobody was going to take care of me. I have to take care of me, you know what I mean? I knew that from the get-go from like 7-8 years old. But not everybody has that experience to have that get go. As all of the other participants, Participant 6 shared: the relationship that Black America has with white, white America, the history that Black veterans before me. Their experience of, you know, even when we had the Civil War, everybody gets knocked off. You know, don't forget the things that they were promised. They didn't like me, you know, oh, you served in the white man's army and fell out all this stuff so. There was that as well, I recall.

Table 30

Subtheme 3: Cultural Differences and Challenges

Code	Keyword/Phrase
Cultural differences and challenges	Beliefs and culture were not affected but resiliency was present during these times
Didn't meet the cultural standards of others	If you gotta go to a Catholic church or nonprofit or faith based, and I am not faith based
Benefits based on racial/ethnic background	The experience of Black people and minorities in the VA healthcare system
Cultural embarrassment or a let down	I don't have anywhere to go; I can't go to grandma's house; the second generation says don't move back home
Based on racial/ethnicity background	
Belief system played an intricate role in my experiences	Resiliency and strength
Beliefs and culture were not affected but resiliency was present during these times	Self-aware with pure intentions

Theme 7: Transitioning Difficulties (Chronosystem)

Even though the participants shared some of the most challenging times in their lives throughout this interview, some experiences were simultaneously connected. Participants faced challenges with a lack of family support, mental health challenges,

finances, stable housing, and accessible resources based on their geographical location. This section will highlight the difficulties female veterans faced after military transition (see Table 31).

Subtheme 1: Employment Transitions From the Military

Participant 1 stated: it wasn't really it just felt like people really hated their jobs, or they didn't take people's situations serious enough and or their mental health seriously enough and understanding that impacts the people and being homeless and you know, or becoming homeless or displaced or whatever have you that the resources just was not available, so it wasn't easy. It... it wasn't, it wasn't it wasn't that easy trying to... trying to figure out how to navigate what you was going through , where you wanna be, how you gonna get healthcare, how you gonna figure out where you're going to live or make any type of income or be provided you know your income when it comes to any type of disability or anything like that it was it was a difficult time.

Participant 2 shared her experiences in a previous section and stated that the challenge for her was transitioning from military jobs to civilian jobs. Experience, but if you come out and you don't... you can't find a job, and you know what your MOS (military occupational specialty) was, then what do you do, and I just feel like you know education and training is big. I feel like that's a policy that should be implemented as far as veterans are concerned, you know when they're discharged.

Participant 3 had a unique military transition. Participant 3 joined the military twice and had different experiences each time. Participant 3 mentioned: the sensitivity is far greater today in 2024 than it was in 1995. What you went through transitioning out of

the military, you know, when you served X amount of years as such, it's hard trying to fit back into society, so those groups are needed so that way you are interacting with people who understand your struggle. To sum it all up, Participant 3 describes having a smoother transition after her second enlistment and it was mainly based on her geographical location.

Participant 4 shared with the researcher that: it was a difficult transition because even though I think it was just a series of unfortunate events. I mean, I was working; I just wasn't making enough money. I had a car or the truck but because I wasn't making enough money to even keep rent paid up the car got repossessed. Then, I didn't have a way to get to work. I was trying to pay for daycare, but I couldn't afford daycare, so daycare said that until I paid, she couldn't come back. If you don't have childcare, you can't go to work, if you can't go to work, you can't get paid if you can't get paid it's; cycle it's cyclical in nature, so I don't think there was any one event that happened that like led me to becoming homeless. I can't say oh, I lost my job, and that's what happened, or I was married, and my husband died, and I and that, like, I can't say it was one specific event in my mind. I was trying to do everything right, and it just wasn't enough.

Participant 5 stated that anytime I run across any type of information because of the situation I was in. I share it with everybody I possibly can. I share it on social media. One instance, in particular participant 5 stated that her accessibility to services was not good. She mentioned that she did a claim on her own and they she was homeless, and they were like here's \$250. On the other hand, Participant 6 reported: having many challenges before and after her military transition she stated that because of where she

was, she had more opportunities to receive services. Participant 6 indicated that she was introduced to information because she knew the right people. She also indicated that she was informed about a focus group for women veterans, which was a part of her healing journey.

Table 31

Subtheme 1: Employment Transitions From the Military

Code	Keyword/Phrase
Challenges with transitioning out of the military	Lack of income; not enough income to maintain
Being educated prior to separating out of the military; being able to have employment	An education is important to in order to become self-sufficient; education components that you need you don't get in the military
Military jobs not transitional to civilian jobs	Challenges with finding employment

Subtheme 2: Instability With Housing Programs

Participant 1 shared: I don't recall the program but what they had done at the time was introduce me to someone who had put me in a in almost like an assisted an assisted living type of situation for just veterans. And it was housing it was like an apartment housing where you had a roommate you shared common spaces and it was basically like a shelter but an apartment but. I don't recall what the program was, but I do know that particular state when I was there city and in the state of Florida was actually very helpful when I didn't have a place um to call home.

Participant 2 stated: I was at Fort MacPherson waiting on trying to apply for the housing that I can't think of the name of it, but they were; they actually had like if you were alcoholic, you push to the top of the list to get that house you could be single kids

no kids, but if you're an alcoholic you push to the top of this stable men were able to get housing before females with children.

Participant 3 mentioned: um well what I've learned now is especially being here in Texas before I was in Georgia and being here in Texas now Texas is about their veterans so I would say due to my location now gives me the upper hand. There are a lot of different resources out here now that if you were to engage them, they will put you in a hotel until they are able to work you through the system to get you into an apartment. It may not be what you want, but you have a roof over your head, and now you're able to pay your rent based on your income.

Participant 4 described preventative measures. Um, if there's a way to not have to wait until someone is on the verge of homelessness, that will prevent a lot of homelessness; it feels as though saying hey, I am about to be homeless, or I am on the verge of not having anywhere to live is not good enough and again you have to prove like you are in dire need and that might not be with everywhere but just with my experience so if there is a way to increase preventative measures or preventative resources that would be very helpful.

Participant 5 mentioned: Umm, I had a very hard time finding housing resources. They're just not out there. Buffalo was a fluke, so find one place. Ok. I went for my sisters in Ohio with having to go with the civilians because there's no VA anything to Erie, PA, where there's no female veteran anything. The Buffalo only had ten units, and it's one building, one little brick building. I have no clue if New Mexico has any female or anything. I've never had to look into it. Participant 6 indicated: I don't have anything

recent. Although this was previously mentioned in the study, Participant 6 did not share a housing resource she did state that, “she was living with someone, but it got really ugly. So that is like I couldn't go back there, you know like I can't. It was debilitating to go into the house. So that's pretty much what led to me being homeless to remember. I mentioned it was just easier to just live off my car at that point.

Table 32

Subtheme 2: Instability With Housing Programs

Code	Keyword/Phrase
Available housing based on geographic location	Had housing that was like an apartment with a roommate
Difficulty finding housing resources due to geographic location	Went to New York and it was a fluke; 10 units in one building but I lived in New Mexico; housing options but I did not qualify because I did not meet the criteria
Housing resources were available and helpful	Housing resources were available and helpful
Unknown programs or organizations after military transition	Unsure of any recent housing programs
Unaware of any housing programs	Unsure of any housing programs
Community resources are based on geographic location	Relocated from Georgia to Texas and received more resources
Limited support based on location	Limited housing resources

Summary

The purpose of Chapter 4 is to outline the data collection process used to gain results for my study on female veterans who experienced homelessness after military transition. A detailed explanation of the research setting, demographics relevant to the study, data collection, data analysis, evidence of trustworthiness, and the final results were all included in the process. Female veterans overcame their bouts with homelessness by maintaining their resiliency. They went through so many life transitions throughout their journeys. Each female veteran described their challenges and discussed

what options they had or did not have. As a result, they showed resilience and adaptability, as well as an appreciation for the uncertainty of life. Participants indicated to the researcher that they did what they had to do to survive.

I gave a summary of the goals and design of this study, as well as the main findings, in Chapter 5. To evaluate the results' significance, I examined how they add to, contradict, or broaden the body of knowledge currently available on the topic, as described in Chapter 2. Lastly, Chapter 5 offers a space of reflection about the experiences that female veterans faced after military transition: lack of support, lack of access to resources, employment challenges, and mental health challenges, to name a few of the challenges. The limitations of the study, suggestions, implications for social change, and a conclusion will be the main points of emphasis.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this generic qualitative study was to examine the barriers to housing for female veterans who have experienced homelessness after transitioning out of the military. My aim was to gain a deep understanding of the lived experiences of female veterans who faced many challenges with housing options once they separated from the military. By conducting semistructured and in-depth interviews, I was able to capture the perceptions of each participant who lacked the availability of resources. Everything considered, each veteran combated their homelessness by using resources that were available, knowing the right people in the right places, peer or family support, mental health care, or being able to gain employment.

By using the six-step thematic analysis by Braun and Clark (2006), I was able to divulge significant findings and analyze all the data that I collected. The participants initially described their military time in service, how their transition had impacted their livelihood, and their perception of the resources that were not accessible or available to them. Female veterans also expressed how they experienced grim times but still managed to persevere with the assistance of peer or family support, knowing the right people, or community organizations. Each participant shared their personal thoughts about how resources were available, whether they were not aware of them, or whether they were not suitable for all veterans. Additionally, each participant was asked what was their life-changing experience that led to homelessness, and each stated financial instability. Lastly, what was more evident is that each participant displayed resilience and did not give up.

Interpretation of the Findings

The findings of this study highlight the experiences that female veterans faced after their military transition. The participants, who struggled financially and could not afford to maintain stable housing, shared how they managed to make it through such challenging times. There were seven themes that emerged from this data that anchored my findings which will confirm, disconfirm, and expand on the information that had been described in Chapter 2. These themes are supportive familial and peer relationship (microsystem), organizational support (exosystem), psychological and mental health growth (mesosystem/macrosystem), lack of knowledge of available resources (exosystem), awareness of usefulness of resources, environmental and economical changes (chronosystem), and transitioning difficulties (chronosystem). The findings of each theme will be defined more in the next section.

Theme 1: Supportive Familial and Peer Relationships

Theme 1 emerged as participants shared the role familial and close relationships played in their lives. The results addressed how family support and close friendships are essential relationships that shaped their lives throughout the different phases of their life experiences. Bronfenbrenner defined this system by individuals developing their interpersonal relationships and when belief systems are developed (Crawford, 2020). This finding is consistent with the microsystem phase of the ecological model (Bronfenbrenner, 1979). Participants of this study also argued that these relationships influence how people see, experience, and respond to the world, but having support from

family and friends can impact their outcome. These results support Bronfenbrenner's (1977, 1994) findings.

Supportive Families

Participants were asked to discuss how familial relationships were helpful for them after their military transition. Only half of the participants stated that they received familial support, whether it was for emotional support, financial support, or a place to live until they secured stable housing. The other half of the participants had no familial support based on the family not knowing that the individual was homeless, or the family just could not afford to assist them. Ultimately, the basis of familial relationships was a part the microsystem and encompasses how interpersonal relationships begin to develop according to Bronfenbrenner's suggestion (Tong & An, 2024).

Interaction Between Peers Was Very Helpful

Bronfenbrenner's (1977) model suggests that an individual's environment can affect their development or their relationships as a part of the microsystem. Female veterans can benefit from having additional support outside of family (Evans et al., 2018). Half of the female veterans expressed how peers were helpful during such a tough time. Each participant had a unique experience but shared valuable insight on how knowing the right people was beneficial. The other half of the participants felt that they leaned more on family or just did not have that extended support at all. One of the participants stated that she was prideful and did not ask much of anyone. Even though some of the participants had that additional support, it did not move the process along any faster for them to secure stable housing.

Lack of Support from Family Members

Having a supportive family can be helpful through some of the most challenging times. Participants shared their thoughts on not having the support that they needed but still managed to make a difficult transition as seamless as they could. This finding supports the work and findings in Evans' et al. (2018) study. Half of the participants did not have familial support for several reasons. One participant stated that her family did not know what she was going through. Another participant stated that her family knew about her being homeless, and if they could have helped, they would have. The other participant stated overall she did not have any family support and did not provide a reason why. Even though the more people that could have been of assistance would have been helpful, some people just are not fortunate to have that additional support. According to Tong and An (2024), the microsystem is comprised of interpersonal experienced and is symbolic and over time an individual can view from here why their support system is not as developed as they would like.

Female Support Groups

Support groups could be helpful for anyone who is willing to engage and become a part of a group of people who could relate to them or even be able to provide some available resources. Having a social role or being involved with others is a part of the microsystem (Bronfenbrenner, 1977). As mentioned earlier, the microsystem is a system that embarks on how an individual is affected by their most inner circle inhibiting engagement with their peers (Bronfenbrenner, 1994). Half of the participants felt that the female support groups were very beneficial for them and provided them a chance to

develop relationships with individuals to whom they could relate. Participant responses in this study connected with the recommendations Vogt et al. (2020) shared in their study. One participant raved about how important it was for her to have comradery and have a connection with individuals who are like-minded individuals. The other half of the participants were either unaware of any female groups or were not in a location where female support groups were established that provided them with that support.

Theme 2: Organizational Support

Organizational support emerged as a theme when participants shared their experiences and need for support within their organization. This finding aligned with the work of Lawrence et al. (2021). Lawrence et al. pointed out that providing support within an organization that is personal and deeper than job duties and daily tasks completed can have a greater impact on an individual's quality of life. This support is critical during the transition phase within the organization (Derefinko et al., 2018). The results indicated veterans can connect with others on a human level, identify commonalities, and build networks of support. However, according to the Bronfenbrenner (1977), in the ecological systems theory, individuals can be influenced by outside components and not be directly involved but over time can change their behaviors based on their environments.

Connections with Prior Military Members

Having connections with individuals is important and having connections with individuals who relate can be comforting. Only one participant expressed that she wanted to be able to establish relationships with like-minded people. According to Galovski et al. (2022), being able to establish relationships with individuals who have things in common

can improve the quality of life. Transitioning from a military culture to a civilian culture can cause some pause for female veterans because of the differences of the two.

Nevertheless, the other participants developed connections with other individuals, but they did not report those relationships were with other female veterans. Additionally, Bronfenbrenner (1994) suggested that being able to form an interpersonal relationship with peers or immediate environment entails what the goal is in the exosystem.

Community Support

Being able to be a part of a group or an external influence can provide linkages and other opportunities that does not necessarily directly influence the development of a person (Bronfenbrenner, 1994). All participants reported some sense of community support. Each participant shared a different version of what was successful for them. Participant 1 stated that she had community support, but it was not until after she made a connection with some community resources. Participant 3 shared that she had an immense amount of support from community organizations once she left her home of record. Chenoweth and Marks (2022) stated that female veterans with support were likely to do better than those without support, which was also indicated in this study. Most importantly the support was there but some components of the community support was not accessible or available for the female veterans.

Theme 3: Psychological and Mental Health Growth and Challenges

The themes that commonly emerged during the interview were mental health and well-being. Sokol et al. (2021) findings support the findings of this study. According to Sokol et al., the challenges female veterans experience exceeds the barriers male veterans

encounter. Nevertheless, many participants reported developing resilience skills and remaining persistent and hopeful. Female veterans experienced a major transition when they joined the military and had their own beliefs. Creating spaces where new systems, cultures, and beliefs exist could cultivate healthy interactions based on Bronfenbrenner's theoretical framework (Bronfenbrenner, 1994; Crawford, 2020). In this study, I concluded that mental health is a part of a veteran's transitioning process from the military and being able to grow among the different layers of ecological systems theory can be beneficial. This conclusion is also shared among scholars and experts (Kwan et al., 2020; Lehavot et al., 2018).

Psychological Growth and Motivation

It may seem difficult or challenging for a person to have any type of psychological growth and motivation when they experience homelessness after military transition, but each participant shared what they lost and gained from their experience. They all expressed that their patience was tested, but they maintained resiliency and managed to make things work with what little they had. Several of the female veterans reported having some tough times but overcame adversity and received services that assisted them during that time. Bronfenbrenner (1977), in the mesosystem and macrosystem, defined how emotional and social support is a proponent of childhood development. The findings from this study are consistent with the importance of community as a child which then later in life can impact an individual's psychological growth and tarnish their motivation because of different experiences. Sokol et al. (2021)

found similar results in their study that also examined veterans transitioning out of the military and the connection to suicide.

Mental Health Support

Experiencing such a transition after separating from the military can look different for anyone. As an additional means of support, female veterans sought mental health treatment and addressed issues that accompanied them before, during, and after their military transition. Sairsingh et al. (2017) agreed but added that being able to reach out for mental health support and gain some skills that can help a person navigate through life can be helpful and make such a difficult time feel somewhat lighter because of the support they received. Furthermore, the more an individual has support within the microsystem, mesosystem, and the macrosystem it is beneficial. Also, outside influences can develop a person based on their experiences and challenge them to make more connections which is indicative of Bronfenbrenner's (1994) ecological systems theory.

Mental Health Challenges

Despite what the circumstances were when the female veterans transitioned out of the military, mental health support was needed, based on the reports of the participants. Mental health can be impacted due to many reasons. Felder and Delaney (2020) suggested that female veterans are more at risk of becoming homeless because of mental health challenges, among a host of other concerns. Within Bronfenbrenner's (1977) mesosystem and macrosystem he highlighted how interactions between family members and peers could be introduced in the microsystem and affect an individual mentally as they get older. However, in the macrosystem values and beliefs are different but once a

person has been exposed to specific environments it could impact their mental health.

Mental health is just as important as physical health and can impact an individual's way of life.

Fear of Being Unsafe

The thought of being unsafe because of being homeless can be an indescribable feeling. The female veterans who shared their thoughts about feeling unsafe were either sleeping in their cars or were to the point of living in a shelter. Participants found transition from having available housing to not knowing whether they would a home fearful. Participants' responses were echoed in Kim et al. (2023) findings that after unsuccessful attempts to find work, female veterans feel unprotected because of the lack of gender-specific resources. It leaves them vulnerable and at risk.

Theme 4: Lack of Knowledge of Available Resources

Theme 4 findings emerged as participants described their experiences and barriers to available resources. The findings in this study suggested that the consequences are significant when veterans need information to gain access to resources but are impeded by a need for more understanding of government. Cheney et al. (2018) pointed out that many veterans cannot afford food, housing, and medical treatment, which can have a domino effect on their general health. As a result, people feel alone and powerless due to a lack of knowledge of the available resources. Solving this problem and providing people with the tools they need to access help within the system is of the utmost importance. Most importantly, creating a space for individuals who are not fully involved

but can be impacted by those around them is important in a persons' development (Bronfenbrenner, 1994; Crawford, 2020).

Lack of Knowledge of Government Resources

The lack of knowledge about government resources made it difficult for the participants to establish a smooth posttransition. As much as it would have been helpful for these resources to be disseminated prior to the service members transitioning, some of the female veterans felt that it was still some hope. The stories that the participants shared played a very significant role in explaining why their quality of life was impacted and why they did not receive the services that were suitable for them. The stories participants of the study shared connected with the work and findings of Morgan et al. (2020). As described in the exosystem, just because an individual is in the center of a system causes an individual to be affected indirectly. Because the participants stated that they did not have knowledge of the resources, it impacted them indirectly which caused the female veterans to miss an opportunity for available resources. Having knowledge of the resources that are available and how to access them is critical to not only surviving but also thriving as a civilian.

Lack of Resources Prior to Military Separation and Based on Disability Rating

The participants shared their thoughts and mentioned that it would be helpful to have knowledge of these resources prior to military separation. Participants felt that this would have been one of the most helpful resources because it could have assisted them with the appropriate services or prevented them from becoming homeless. Perkins et al. (2020) asserted proper preparation before transitioning can make a difference in the

outcome and quality of life after transition. These results support the idea that those connections and exchanges before military separation may have protected female veterans from becoming unaware of resources based on the ecosystem within the framework of Bronfenbrenner's (1977) ecological systems theory. The participants' strength was illuminated because of how they managed to make do with what they did have. Also, based on whether an individual received a disability rating, they would potentially be eligible for resources or benefits compared to other veterans who were not.

Lack of Knowledge of Resources

Female veterans voiced their concerns that not all information is available to all veterans when it comes to specific resources. Also, when resources are not available or accessible it makes it difficult for transitioning individuals. A point that was made by the participants is that more information needs to be disseminated to all veterans.

Participant's responses aligned with Bryant (2019), who insisted early access to resources is very important. Having policies or social services that can assist female veterans once they transition out of the military impacts the exosystem and encapsulates the context of Bronfenbrenner's ecological theory system by focusing being indirectly affected.

Challenges With Resources

There are times when resources can be difficult to access overall, but when there is difficulty accessing resources, it can make moving in the right direction unreachable. It may seem like a dream come true when resources are right at your fingertips, only for them to not be what they seem to be. It can deter a person from wanting to pursue other resources. However, it is important to identify or discuss what impact it has made in their

lives. The exosystem embodies how it can be possible to have challenges. Within this system it includes the microsystem in which individuals are involved but not directly embedded (Bronfenbrenner, 1977).

Theme 5: Awareness of Usefulness of Resources

Providing resources is a great start, but understanding their purpose and how to use them best is essential when given access. However, theme five indicates a need for awareness of how to use resources for some veterans. Morgan et al. (2020) agreed but added that this skill may require additional support in the form of training. By doing this, veterans can be productive and allocate resources effectively. Building and nurturing relationships can indirectly influence development and can promote positive interaction (Bronfenbrenner, 1977; Crawford, 2020).

Basic Needs

Having your basic needs met is important. Perkins et al. (2020) asserted it is a part of functionality in life. Even though the participants did not have most of their basic needs met, they did not share this as the forefront of their experience. Basic needs encompass many things: food, water, shelter, and maybe even transportation. Participants were introduced to an environment when they were children within the microsystem. It focuses on how those experiences impact a child's development that could affect their interactions among the community (Bronfenbrenner, 1994). In response to not having their basic needs met, female veterans made connections with peers, community organizations, family, and military mentors to support them where and how they could.

Having Access to Resources Based on Support System

Participants viewed their lives based on how their relationships with their families and peers were not as solid as they would have hoped. In reviewing the exosystem within EST, it is evident that the interaction between home and their communities did not interconnect while they were in the military which caused a major disconnection (Bronfenbrenner & Ceci,1994). As discussed earlier in the study, female veterans described how their support system was helpful during their venture with homelessness (U.S. Department of Veteran Affairs, 2022). Some of the resources that the participants received were suitable for them at the time (e.g., job searching). Support systems were not available for some of the participants, but the female veterans managed to use what they had access to. Moreover, it was the availability of resources and the lack thereof that made things more challenging.

Useful Resources

It was evident that some of the female veterans did not have access to resources for many reasons. Even having access to cell phones and Wi-Fi was helpful for some of them to locate their own resources and keep them informed on available resources in their area. Based on a participants' response legal services to assist with any legal matters would be beneficial in some instances when the veteran cannot afford services on their own. Job placement or resumé services and how to interview were also mentioned during the interview. Being able to have the skills to land a job based on interviewing skills and resumé writing would be ideal. One of the biggest challenges veterans had was landing a career that aligned with their military skillset (Keeling et al., 2018). Bronfenbrenner

(1986) asserts that an exosystem occurs in external environments that still impact an individual indirectly but developed during their childhood. These findings align with how female veterans faced challenges when they were seeking resources that were useful for them after military transition.

Awareness of Resources

Being aware of resources was not something the participants had much luck with. Unfortunately, the lack of knowledge of resources is what the female veterans reported caused many challenges for them when they transitioned out of the military. Participants responses supported the Shepherd et al. (2020) findings. Shepherd et al. cautioned that a lack of access to resources or awareness of resources could lead to stress, health issues, and mental health issues. However, once the information is available to transitioning veterans, whether it was from people they connected with or was a part of a community organization that provides support and information for them, resources become more accessible. Furthermore, Crawford (2020) concludes by stating how a child's actions in their microsystems could have an indirect effect on situations in the exosystem where a person does not actively participate. Lastly, this could result in a person not cultivating interpersonal relationships that could provide them with vital information.

Available Medical Care

Not every veteran is granted medical care when they separate out of the military. A veteran must have a disability rating to receive medical healthcare from the VA. Although there are many programs available to veterans, they primarily searched for services focusing on employment and educational opportunities (Perkins et al., 2020).

Two participants had access to medical care and used the services when they needed to. Unfortunately, the other veterans did not have that same option. Because the exosystem is comprised of public policies, incorporating a specific length of time for a healthcare plan when a female veteran separates from the military would not only assist past female veterans but also the women who are currently serving.

Theme 6: Environmental and Economic Changes

Understanding the participants' experiences based on their environment the chronosystem is the last part of the ecological systems theory and focuses on the evolution of an individual. This is a theme that was relatable to a certain degree. As individuals get older and get more in tune with who they are as adults their beliefs or their experiences could affect their perception on life and their environment (Crawford, 2020). The participants described how difficult it was to know about resources based on their geographical locations (Cheney et al., 2018). Specific locations (e.g., larger cities) may offer more opportunities for individuals to seek out available resources or make connections with others.

Environmental Changes

Participants voiced their concerns when asked about the resources available to them based on their geographical location. As discussed in previous research by Bronfenbrenner, the environment is a part of an individual's development. In this subtheme the participants are affected by not having the resources that they need based on their location and the role that environmental changes can attribute to behavioral changes (Eriksson et al., 2018). Not all participants had access to certain resources

because they were not in a location that had many options or any options at all for veteran services (Hester, 2017). Resources were based on the state, and outreach services were not available.

Economic Changes

Transitioning from a career can make someone feel uneasy if they do not even have a job secured. As I interviewed the participants, they each shared their experiences about not being financially stable or supported. According to Davis et al. (2022), some businesses are concerned about the risks of hiring a person with PTSD in the workplace. Fortunately, there were a few participants who could get assistance with their children, but it was not enough support for them to stand alone and create financial stability. In addition to financial instability, participants did not feel that they had the support of their family, peers, or organizations and had to figure things out on their own. Bronfenbrenner (1994) does not particularly notate that socio-economical statuses impact an individual, however, the environment that an individual has been accustomed to throughout their developing years could affect their level of responsibility. The loss of relationships caused a strain on some of the participants financially and was difficult for them to maintain a job and support themselves.

Cultural Differences and Challenges

As a person gets older their environment changes and so do their perceptions of people and things. A shift in what social expectations is over a life span can have an influence on how you interact as an adult in different settings which align with the chronosystem (Crawford, 2020). Unfortunately, being able to establish a working

relationship with others can be difficult and exhausting. Experiences that the female veterans shared were not only heartbreaking but was crippling to say the least (Ward et al., 2020). Several participants felt that they could not receive benefits because they were different culturally or that they did not meet cultural standards in their geographical locations; therefore, they did not fit in.

Theme 7: Transitioning Difficulties

Theme seven emerged as participants described their transition from military to civilian. Female veterans experience what scholars call "double jeopardy" when transitioning from the military to civilian. Participant responses indicated that because the individuals are female and veterans, it can be challenging because of the intersection of gender and the stigma of mental health problems, and women are not a priority (Gabrielian et al., 2018). The intersection can sometimes be difficult for female veterans who are also mothers. Evans et al. (2018) agreed with the study's outcome but argued that there is more for female veterans to consider during their transition, and some of the options can seem like barriers due to the lack of support and assistance. Furthermore, as time goes on an individual can view situations differently and through another lens. The development of an individual can impact them and influence their decisions (Crawford, 2020). Bronfenbrenner (1977) extended his systems within his theory later to include chronosystem based on how life changes and experiences occur over a lifespan. Transitioning out of the military will not only challenge a person but they will experience different environments and inherit new experiences within this ecosystem.

Employment Transitions From the Military

Difficulty finding careers that aligned with the military MOS (military occupational specialty) was a concern for some of the participants. Also, being able to land a job that paid enough to maintain a place to live, afford childcare expenses, and pay all the other bills was also a struggle for some of the female veterans. Derefinko et al. (2018) surveyed 90 participants and found the majority struggled to find employment after leaving the military. A lack of education was also a topic of discussion that caused a wedge for the veterans wanting to work. Moreover, according to Bronfenbrenner (1986) external influences can affect the impact of a family. Participants were encountered with a change in their ecosystem that looked different from when they were children and had to adjust the best way that they knew how.

Instability With Housing Programs

Housing programs were available to some of the participants based on their locations. Kim et al. (2023) insisted access to housing was not a linear process. In fact, Kim et al. noted the complexity and confusion involved in gaining access to housing. Individuals who had nowhere to live would sleep in their cars, a family home, or the home of a friend or peer. The participants also stated that there were challenges with obtaining housing options if they were not actively abusing substances, facing eviction, or sexually assaulted. Individuals who met the criteria were pushed to the front of the line but there was still very little chance they would receive housing assistance. Those who had access to the resources made use of what they had access to and created a safe space for themselves. In closing, a person may accomplish different objectives throughout a

multitude of means depending upon a person's upbringing and how the linkage throughout the ecosystem is challenged based on the environment (Crawford, 2020).

Limitations of the Study

Due to the results of the study, I was able to provide detailed insight into the experiences of female veterans who were faced with homelessness after military transition; as with any other study, it has limitations. My participant group was a limitation within itself. Although I reached saturation with six participants, the sample size was small and limited because of veteran status. My participants served in different branches of the military and in different areas. Even though housing programs are available for female veterans, the findings did not specify housing for female veterans. Lastly, based on the results of the study, the researcher identified the lack of gender-specific housing for female veterans and the challenges that female veterans encountered. Furthermore, the data collected from this study was based on the participants' responses. With the findings from this data, more research can be beneficial based on a larger scale and explore the barriers that prevented female veterans from accessing or receiving available services.

Recommendations

As a part of this generic qualitative study, I examined the lived experiences of female veterans who experienced homelessness after military transition, focusing on Bronfenbrenner's ecological systems theory (1976) as the theoretical framework. Some of the key findings illustrated the importance of having access to and knowledge of resources for female veterans who experienced homelessness specifically grounded in the

microsystem, exosystem, and chronosystem. Further research opportunities were presented even though the study's results provide valuable insight into the experiences of female veterans who experienced homelessness after transitioning out of the military and faced challenges accessing available resources.

Comparative Studies

Comparative studies are used as a form of additional research that addresses the need for gender-specific housing for homeless female veterans. Comparative studies allow researchers to explore a phenomenon in different environments and detect differences or commonalities (Coccia & Benati, 2018). Researchers can also further expand their exploration of the experiences of female veterans who became homeless after transitioning out of the military and can employ comparative studies. Comparative studies also will allow researchers to compare and contrast the experiences of female veterans who have been homeless after their military commitment from different branches. Findings of a comparative study that uses gender-specific housing for homeless female veterans as a modifier may be able to provide some insight into how female veterans not only require gender-specific housing but also have access and knowledge to available resources to prevent homelessness. Lastly, comparative studies examining the experiences of female veterans who have experienced homelessness could provide insight into how accessible resources could be beneficial and potentially meet the needs of current and future veterans.

Qualitative Research

Furthermore, by expanding the qualitative research, a clearer understanding of how female veterans faced barriers when transitioning out of the military caused challenges. A qualitative research study is used to capture data based on lived experiences and individual perspectives (Busetto et al., 2020). For any other data collected using a generic qualitative study, the findings would be expanded, and the increase of participants would generate new information that could offer individuals more insight and views based on female veterans' perspectives.

Quantitative Research

Although the experiences of female veterans becoming homeless after transitioning out of the military were described in quantitative studies, it can assist the reader with understanding the impact of accessible resources (Mattocks et al., 2020). Researchers could conduct quantitative studies to measure the effect and the impact on female veterans who experienced homelessness. Moreover, quantitative methods can determine the difference between those who have access to resources and those who do not have access to the resources based on barriers that cause challenges. Lastly, quantitative research could be used to determine the impact of resources based on geographical location, knowledge of resources, disability ratings, and peer assistance.

Longitudinal Studies

Researchers could employ longitudinal studies to explore continuous measures over a lengthy period of time in order to understand the experiences of homeless female veterans (Caruana et al., 2015). A longitudinal study can be conducted over time to

determine how homelessness has impacted the female veteran population. Additional research on the available housing programs suitable for female veterans can increase the chances of more opportunities for them to secure stable housing.

More research into the lived experiences of female veterans needed to explore or implement additional housing programs could be beneficial based on findings from previous studies (Kim et al., 2023). Being able to determine the effectiveness and the importance of peer engagement and gender-specific accommodations over a period can affect the results.

Implications

The purpose of this generic qualitative study was to explore the barriers to housing for female veterans who have experienced homelessness after transitioning from the military. Based on the findings of this study, I will be able to determine what vital information will be beneficial for any current or future homeless female veterans who may not have access to resources. Social change is prevalent throughout this study based on how gender-specific housing programs would address the homeless female veteran population. In the next section, each level depicts how this study might affect things.

Individual Level

Within the chronosystem, there is an outline of how changes occur over time and how things change throughout a lifetime (Bronfenbrenner, 1979). Creating a community or interacting with others within the ecological systems theory was a large part of one's environment. Developing relationships based on a person's environment was pivotal in establishing those relationships. This study implicates social change for female veterans

and current women serving in the military. Highlighting the lived experiences of female veterans can improve any housing programs that are in place now for homeless female veterans. The information in this study can inspire other female veterans to advocate for more gender-specific services. Female veterans were encouraged to share their personal experiences and use community organizations specific to female veterans. However, due to the results from this study there is insight into the lives of female veterans who shared some of the same shortcomings but ended up on top and are no longer homeless.

Family

Although Bronfenbrenner (1977) explored how individuals can be impacted based on their environments and how one's upbringing can contribute to a person's outcome. The implications at this level have increased the awareness and the need for family support during this difficult time. Some female veterans did not notify their families about what was happening, and some just did not have the family to support them. Very few participants had help from their families and appreciated the value of this study to highlight the needs of the female veteran community. Lastly, the support of families, whether financially or emotionally, could serve as an extra layer of support.

Organizational Level

At this level, a key finding of this study illuminated how housing resources would benefit an individual going through the stages of military separation. VA could use the results of this study to establish gender-specific programs and housing resources for female veterans regardless of their location. As helpful as it could be, having support groups in rural areas or other cities for female veterans who are in danger of becoming

homeless can serve as a prevention tactic. Creating a community outside of the military could be very helpful for transitioning female service members and equip them with information and resources that could support them within their environment.

Bronfenbrenner (1977) provided a great explanation on how individuals connect to their environments in some cases and create community within the ecological systems theory that will provide the participants with what they need. Also, providing female veterans with accessible housing resources could potentially prevent them from becoming homeless. Moreover, organizations can respond to the need for gender-specific services based on the female veteran's location. Unfortunately, the geographical location of some female veterans does not necessarily offer or support the needs of the veteran.

Collaborating with the VA and providing any resources, specifically housing resources, could eventually decrease the homelessness rate of female veterans. Finally, the military does have a program for current service members transitioning out of the military.

Societal/Policy

There are many implications on the societal and policy levels that are significant to the female veteran community. As the female veteran population increases, the need for gender-specific resources will become ideal. Furthermore, focusing on the results of this study highlights the need for gender-specific housing and accessible resources for homeless female veterans which aligns with the macrosystem and focusing on going beyond to identify more specific social components that impacts a person's development personally and professionally. By reviewing the results of this study will provide insight for the policymakers who may not be aware of the lack of resources female veterans have

once they transition out of the military. Another goal highlighted in this study was to identify existing challenges female veterans face once they have separated from the military. Further exploring what policies and organizations can be helpful in providing services to female veterans who do not have the same access as some female veterans would bring about social change within the female veteran community. Lastly, the more support female veterans have at a political level, the more services become available locally, within the state, and nationally that they will use that are suitable for them which encompasses Bronfenbrenner's exosystem and macrosystem (1977).

Conclusion

Female veteran homelessness has been an ongoing national concern that has affected the livelihood of female veterans who have struggled mentally, physically, and economically after transitioning out of the military (Housing and Urban Development, 2021). Throughout this study, the prevalence and magnitude of female veteran homelessness were challenging due to the lack of gender-specific housing (Kim et al., 2023). Even though the VA has expanded its services for female veterans, the need for gender-specific housing has yet to make a breakthrough. Ultimately, the need for gender-specific housing will be important to implement to create accessible housing resources because of the influx of women currently serving in the military (HUD, 2019).

The purpose of this generic qualitative study was to explore the barriers to housing for female veterans who have experienced homelessness after transitioning from the military. Engaging with each participant during their 1:1 interviews increased my knowledge of how much gender-specific services are needed in the female veteran

community. Participants divulged their thoughts and feelings when asked about their military transition. Even though each female veteran shared their personal experiences, they all had something in common, which made the data intriguing and allowed others to view things from another perspective. Female veterans described how they faced many challenges mainly because they did not have access to resources or know the available resources. While it is important to assist all veterans who have encountered barriers after military transition, female veterans require different services because of reported MS and PTSD that stemmed from MST (Frey-Ho Fung et al., 2021; US Department of Veterans Affairs, 2020).

Female veterans who participated in this study had so much more to share and provide insight on. Despite the hurdles everyone described, they each won in the end. The participants did not describe a pleasant journey, but each one felt that they grew mentally and maintained resiliency throughout their homeless stint. Given the role that homelessness played in each veteran's life, it impacted those who had supportive families, peers, and mentors. As I would like to end this study with a happy ending, unfortunately, there is still a lot of work that needs to be done to meet the needs of homeless female veterans. Organizations and support groups have been developed and established based on geographical locations, which is helpful only for those who have access to those organizations. As women continue to serve this country, this study can serve as a source for continuing to establish gender-specific services suitable and accessible to all female veterans. Hooah!!!

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Appendix A: Recruitment Flyer

Interview study seeks female veterans who have experienced homelessness.

There is a new study about the lived experiences of barriers to housing for female veterans transitioning out of the military that could help government agencies and other non-profit organizations better understand and assist with the transitioning process. For this study, you are invited to describe your experiences accessing gender-specific housing suitable for your family.

About the Study:

- One 30-minute- 1 hour Zoom interview that will be audio-recorded (no video recording)
- You will receive a gift card for \$25 as a thank-you
- Your identities will be shielded throughout this study to protect your privacy

Criteria for volunteers to participate in this study:

- 18 years or older
- female veterans
- History of homelessness after military separation
- Served in any branch of the US military

Appendix B: Interview Guide

I am honored that you will consider participating in my study. Information from this study will provide me with detailed, personal data and insights into how there are limited housing options for homeless female veterans. The interview should take about 30-60 minutes on Zoom. These interview questions will ask about your experiences as a female veteran who has experienced homelessness at any point in their life after transitioning out of the military. The information from this questionnaire will only be used for my research. If, at any point and time, you feel that you want to discontinue this study or withdraw completely from this study, it is voluntary. Lastly, if you have any questions or concerns throughout this process, please just let me know.

1. Has joining the military always been an ideal plan for you? What interested you in joining the military? What was your MOS (military occupation specialty)? Did you enjoy your job?
2. Tell me a little more about your military experience. What did that experience mean to you? How long did you stay in the military?
3. How would you describe your transition out of the military? What specifics could you say that made it challenging or smooth?
4. What challenges did you experience after transitioning out of the military? Did you have employment? Did you have any health challenges or issues? Did you have support after you transitioned?

5. Tell me about some of your experiences seeking and utilizing social services as a veteran (including gender-specific housing options). How would you describe the accessibility of the services that were available to you?

6. Were resources limited because of your location when you transitioned out of the military? What led you to become homeless? Can you share your thoughts on this and describe how it has affected your livelihood?

7. Is there anything that I may have left out or anything else that you would like to share with me that I may not have asked?

I would like to take the time to thank you for your participation and your service. I have gained a great deal of insight based on your personal experiences. Are there any questions or concerns you have pertaining to your responses to this study? Lastly, I would like to remind you that I will transcribe your responses based solely on this interview. I will forward a copy of your responses via email for you to review before I move on to the next steps. Again, if you have any questions, please do not hesitate to contact me.