



CALL TO ACTION

Making California the Most Military- and Veteran-Friendly State

This Call to Action is based on collegial conversations, studies, published documents and a USC CIR conference held in fall 2016 at the California Science Center, Los Angeles.

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CALL TO ACTION

California has a unique opportunity to improve the state of the American veteran and, in so doing, move to the top of the list of America's most veteran-friendly states.

To be “military-” and “veteran-friendly” means military families, in service and after, are both welcomed and valued in California communities, recognizing the need for tailored events, coordinated efforts, benefit programs, services and policy measures that ensure communities are culturally prepared to support them as they transition to civilian life.

California is home to almost 2 million veterans and more than 57,000 service members currently serving in the National Guard and Reserve components. Although it has the largest veteran population in the nation and a long history of supporting men and women in service, California still falls in the middle of the pack across multiple military- and veteran-friendly state benchmarks (e.g., employment rate, income and affordability, tax laws, housing, mental health access, and access to the VA). Recent studies have shown that post-9/11 veterans experience greater difficulty transitioning to civilian life, reporting higher rates of health and mental health disabilities than previous generations of veterans (Castro, Kintzle & Hassan, 2015; Kemp & Bossarte, 2012). With more veterans, active duty and reservists than any other state, California bears the responsibility to lead this challenge.

After more than 15 years in war, the outpouring of support for veterans and their families is awe-inspiring. We seek to maximize our collective impact and ask some of the state's most influential veteran leaders to come together and create a plan for solving the unmet challenges facing our veteran and military families today. Traditional models of support will not get us there. We must build a better California system for those who have served, are still serving and will return to this great state after service.



BACKGROUND

The USC Center for Innovation and Research on Veterans & Military Families (CIR) is committed to strengthening the transition of veterans and military families into civilian life by increasing their resiliency, their access to care and the community's capacity to serve them.

Through its ground-breaking research, leadership and relationships with some of the most active participants in the veteran sphere, CIR is working to make Los Angeles, and California by extension, the most military- and veteran-friendly region in the nation, along with providing best practices that can be replicated and adapted in other communities across the country.

Five years ago, under the recommendation of Adm. Michael G. Mullen, former chairman of the Joint Chiefs of Staff, CIR began administering the Los Angeles Veterans Collaborative (LAVC), acting as a quarterback to bring the area's diverse resources together to identify gaps in services for veterans and military families and opportunities for cooperation among the various stakeholders. Shortly afterwards it became clear that service providers and funders needed more focused data to drive practices and planning.

STATE OF THE AMERICAN VETERAN STUDIES

In 2014, CIR released the results of the first comprehensive needs assessment of a large urban military population. *The State of the American Veteran: The Los Angeles County Veterans Study* surveyed more than 1,300 veterans in Los Angeles County, gathering invaluable insight into some of the most pressing needs and challenges facing the local military population (Castro, Kintzle, & Hassan, 2014). The results of the study ignited change in how policymakers and veterans service organizations (VSOs) help veterans and military families, and the data has continued to drive collective efforts among L.A.'s government, nonprofit and private sectors.

The study painted a daunting picture of the stumbling blocks that veterans face accessing and utilizing community-based support programs. More than two-thirds of all veterans surveyed reported difficulties adjusting to civilian life, and more than half of post-9/11 veterans reported not knowing where to go or who to contact for help. The study also showed that more than a third of working-eligible veterans were unemployed. Almost two-thirds of post-9/11 veterans reported that civilian employers do not understand veterans or are insensitive to their needs, and more than half thought employers didn't value their skills.

In 2015, CIR replicated the study in neighboring Orange County showing similar results (Castro, Kintzle, & Hassan, 2015). Philanthropic organizations there have used the resulting data to develop strategic funding efforts to target the biggest

challenges identified and organize funding to new services in response.

A study of San Francisco veterans is in its final stages (to be published spring 2017) and aimed at supporting new efforts to organize and coordinate services in the Bay Area. Not only will this study help paint a fuller picture of the needs and challenges facing California veterans, but it has also highlighted the specific issues facing vulnerable groups of veterans. Each study has given CIR new insights to lead a more informed approach to ensuring California remains a good place to live for veteran families.

Throughout this work, it has become clear that diverse sectors within communities must organize themselves on a united front. The role of a community quarterback is key in fostering leaders and mobilizing a mechanism in the community to refer, share information and collectively grow a more responsive system to the needs of veterans and families. Localized data can be particularly helpful when placed in this context. These efforts, however, cannot be done by local communities alone. CIR's studies have highlighted significant needs in national and state policy and the need for new innovations in funding and service paradigms going forward.

STATEWIDE COLLABORATION AND VETERAN POLICY

Compared to many other states across the country, California has led the way in fostering collaborations and collective-impact initiatives (e.g., LAVC: cir.usc.edu/lavc; San Diego Veterans Coalition: sdvetscoalition.org; Ventura County Military Collaborative: vcmilc.org; San Diego Military Family Collaborative: sdmilitaryfamily.org). Collaborations have proved to be a key component in providing a neutral learning ground for service providers to share best practices, foster inter-sector relationships, and coordinate services, yet further support is needed. Many locations across the state lack the framework or backbone leadership to support these collaborations. While places like Los Angeles and San Diego may capitalize on local support and large veteran populations, there are still no formal mechanisms for financing and supporting this capacity. This is particularly the case in less urban



areas where veterans may not have as much of a presence. Without a state framework, support for collaborative functions will rely on intermittent philanthropic funding and be vulnerable to waning support. New policies are needed to formalize a statewide effort to build on current collaborations' successes and explore new ways to foster efforts in rural communities where veteran families may have a harder time accessing support.

Recent efforts from the California Department of Veterans Affairs (CalVet) have led to the creation of a state-specific Transition Assistance Program (TAP) that would connect veterans transitioning to California from active duty or from another state to the state curriculum. Although this statewide program is still in its infancy, it is a promising endeavor to ensure all veterans residing in California receive the resources and information needed to successfully transition into civilian life.

As the socio-economic and political world changes, well-intended policies affecting veterans and their families in California may prove less helpful later on requiring advocacy and meaningful engagement with representatives and lawmakers. While CalVet may act as a policy arm advocating for better veteran policy across the state, the driver for this effort must come from coalitions that rally behind measures. Collaborations, policymakers, VSOs, funders and local veteran leaders should find a way to ensure that they can provide

guidance and support for initiating policies that can make California more veteran-friendly.

California has made a major policy and financial commitment to build housing for the state's chronically homeless veteran population and to identify ways to address transition through employment services. Despite these efforts, continued gaps in services exist. Most veterans transition without a plan for either. New or amended legislation should be introduced that expands eligibility to support veteran families before they are in crisis and face chronic homelessness and unemployment.

There is no coherent strategy that outlines federal and state resources for veteran services. While CalVet provides a statewide resource directory, there is no statewide system for connecting veterans to services. Instead, there is major disconnect between the state and federal level, and the VA and everyone else. This is felt most by veterans who find it very difficult to know where to go or how to get help if they need it. New state policy is needed that provides a strategic framework for supporting local communities and allows for information-sharing and a more holistic plan for supporting veterans and their families across the state.



WHO IS A VETERAN?

The actual working definition of “veteran” has particular relevance in conversations about services and programs available to military-connected populations.

Without a standard, inclusive definition of what it means to be a veteran, individuals will self-select their status. Some of the most high-risk and isolated populations, like women veterans, those without an honorable discharge status, LGBT veterans, and Reservists, may not identify as veterans, leading to confusion about access, eligibility and unnecessary suffering before seeking help.

The federal government and individual state governments, as well as VSOs, all define a veteran differently, offering a wide variety of benefits and services based on time in service, combat experience, disability, discharge characterization and active-duty status. Although a service member may be classified as a veteran under the federal definition, it does not automatically entitle him or her to healthcare or educational benefits, and those who do not meet the eligibility standards cannot receive benefits. For example, members of a National Guard Special Forces Team may have deployed under Title 32 (State Directed Funds) many times over the course of a few years, but this will not make them eligible for education or health benefits because they didn’t serve under Title 10 (Federally Directed Funds). Conversely, a soldier who never deployed, but served on active duty for 90 days after training may be eligible for education or health benefits.

FEDERAL DEFINITION (U.S. DEPARTMENT OF VETERAN AFFAIRS)

A veteran is a person who served in the active military service for purposes other than training under Title 10 for more than 90 days and who was discharged under conditions other than dishonorable as a veteran. However, for VA healthcare eligibility, certain criteria must be met: service after Sept. 8, 1980, the “full period” of service must be fulfilled, typically 24 months of active duty. Certain exceptions to this policy make these criteria difficult to apply.

STATE DEFINITION (CALIFORNIA DEPARTMENT OF VETERAN AFFAIRS)

A veteran is a person who served in the active military, naval or air service, to include Guard and Reserve personnel, who have completed active duty periods, and not discharged or released under dishonorable conditions. Also includes service in the U.S. Merchant Marine between Dec. 7, 1941 and Dec. 31, 1946.

DEPENDENTS AND FAMILY

Equally important in the discussion about defining veterans is the importance of defining families. The VA defines a “dependent” as a spouse, child, or parent(s). After the repeal of “don’t ask, don’t tell,” the law barring homosexuals from openly serving in the military, the nuclear family has changed significantly to include same-sex marriage, but the definition has not. In certain cases, spouses must be legally married to the veteran in order to obtain spousal benefits through a Vet Center or VA. Interestingly, if the veteran is not the head of the household and is being supported like most who transition out of the military (e.g., by a sister, mother, and/or girlfriend), those individuals do not qualify as family members (although this is the majority of caregivers). This is particularly relevant for families that seek support from the VA’s expanded Supportive Services for Veterans and Families (SSVF) program.

CIR’S RECOMMENDATION

CIR proposes that the United States adopt the definition of a veteran used by the United Kingdom: A veteran is anyone who served for any length of time in the military. Equally as encompassing, we recommend a military family member be anyone identified as receiving support while the veteran was in the military. Once granted military family member status, it cannot be taken away due to divorce or death of the service member or veteran.



INSIGHTS & RECOMMENDATIONS

INSIGHT 1: VETERANS ARE BEST SERVED BY LOCAL COMMUNITIES

Despite the countless federal services available, local employers, service providers, and citizens continue to bear the largest burden for supporting veterans after they transition. Local communities are aware of nuances of eligibility for community programs, factors that affect incoming veterans and their families, and are therefore best positioned to understand veterans' unique needs after service.

RECOMMENDATION: EQUIP LOCAL COMMUNITIES TO SUPPORT VETERANS

California should support local communities and leverage localized models that coordinate services, share best practices, organize outreach, and develop infrastructure designed specifically to address the needs of veterans and their families in their city/county. CalVet could take the lead on this effort, providing resources, introductions, coordination and referrals to veterans that transition to California, providing statewide coverage of community resources, not just benefits, to ensure that no matter where a veteran transitions in the state they have access to support when needed.

DISCUSSION

Local VSOs, county and city agencies are more likely to be in tune with what veterans in their communities need. In Los Angeles, for instance, local providers are more likely to be connected to hiring managers to make a referral for an interview for unposted positions than an outside agency. Veterans transitioning to the Bay Area may need insider advice and referrals for finding unlisted affordable housing. Additionally, differences in eligibility and local funding may mean that only certain veterans (e.g., post-9/11 or Title 10) may get resources. Ultimately, these nuisances fall on local providers who are responsible for iterating and retooling programming over time to better fit the needs of their veteran populations.

Most federal and state agencies will speak to the need for this local coordination. Despite this acknowledgement, across the veteran landscape, national policy, programming and funding decisions are made with little regard to how local communities can best support veterans and their families. As one local advocate said recently, "We are both set up for failure—the veteran and us. We don't know when they get here or where they are going and yet we still want to hire and support them." While most communities express a desire to help, the sea of goodwill still struggles to connect with most veterans in their transition.

In the last five years, communities across the state have seen tremendous success in organizing collaboratives that build better systems to support veterans and their families in local communities. Veterans and their families do not require one single service when transitioning into a community after service, but a communal support system that allows for veterans and their families to connect to civilian networks that can improve their quality of life and prevent suffering. As such, local-level efforts must be tailored specifically to ensure veterans (specific to demographics) receive the care and support needed in transition with respect to their community.

To date, most military transition programs (which are administered by the U.S. Department of Labor) are still done at the service member's last duty station with no effort made to connect them to local communities. This approach results in a focus on national employment and benefit programs rather than connecting them to local networks where they will most likely get access to employment and the social support needed for a successful transition. This creates silos and furthers the information gap between local, state and national collaboration. State systems should collaborate with federal agencies to reach out to veterans before they arrive in California and offer connections to local communities and collaboratives when relevant. CalVet's recently funded Transition Assistance Program (TAP) could play a key role in taking advantage of federal programs (where available) to ensure veterans are connected to local communities. A feedback loop between the state and local communities would work towards understanding overall trends, addressing consistent problems across communities, and disseminating best practices throughout the state. This would ensure that programming and outreach is iterative and that communities learn how to best serve their veterans.

INSIGHT 2: LOCAL DATA IS KEY TO ADDRESSING THE NEEDS OF VETERANS IN THE COMMUNITY

Census, VA, and Department of Labor statistics offer little support for strategic decision-making at a local level. Local-level data is key to building solutions that best address the needs of the veterans in that community.

RECOMMENDATION: INVEST IN LOCAL DATA

Invest in collecting county-level or rural area data in order to inform fact-based decision-making, optimize funding strategies, and reframe program development and/or new services and policies to better serve vulnerable subsets of veterans.

DISCUSSION

CIR's studies in Los Angeles and Orange counties brought new insights to communities that relied solely on federal data to drive local decisions. The studies were community-driven, drawing on hundreds of providers to share the survey. Service providers submitted questions and comments throughout the data-collection process. With all the attention on advances in big data, organizations still lacked relevant data to predict and drive decisions. Most glaringly, applying general statistics and studies did not accurately portray the day-to-day issues facing veterans in a particular community. Data derived from these federal data sources, coupled with program evaluations made it difficult to predict and inform services to guide service delivery and identify trends (Ramirez, R., & Brodhead, D., 2013).

Less obvious is the issue that national data is often used incorrectly. Lack of local data means that organizations provide justification for their actions with either anecdotal evidence from veterans or very generalized national or state data. These approaches do not allow us to gauge whether or not we are approaching our target, but rather can be likened to shooting an arrow and then painting a bullseye around where it's landed. Instead of cherry-picking from data that best fits an organization's current agenda, data can—and should be—used in a proactive and decisive way to inform programming. Local data can then allow collaboratives to measure outcomes, and be nimble enough to adjust and create new policy to reflect the changing environment.

INSIGHT 3: CALIFORNIA COMMUNITIES CONTINUE TO STRUGGLE TO FIND VETERANS

Outreach efforts are often difficult, costly and vary greatly based on location and organizational mission. Philanthropic resources and service providers spend significant portions of their budgets trying to connect with veterans in their communities with varying levels of success. While local communities may be best at supporting veterans, they are limited if they cannot connect with them before they are in crisis.

RECOMMENDATION: ESTABLISH A STATEWIDE PROGRAM TO SUPPORT VETERANS IN TRANSITION AND NOTIFY LOCAL COMMUNITIES OF THEIR ARRIVAL

To provide smoother transition support, California, specifically CalVet, needs to take a stronger role in identifying veterans before they transition into civilian life throughout the state. Additionally, organizations across the state need to partner with national leaders to pressure Congress and specifically the Department of Defense's office of general counsel to develop a mechanism that would allow communities to know when veterans return to their communities.

DISCUSSION

Of the thousands of veterans that transition out of the service to California each year, most will never apply for benefits, know where to go for help or get support for getting a job. While many will still be successful, some will not. The stories of veterans needlessly suffering due to disconnection are not new to those who work in the veteran space. Connecting with veterans when they return from service is a challenge that all service organizations deal with. The VA and the DoD do not permit or make available to exiting service members the opportunity to sign up or file for benefits, and likewise do not alert communities that veterans are returning post-service. From a local perspective, this means that the community is still unaware of who is joining the community, leaving many veterans to transition in isolation. These gaps could be dealt with at a state and national level. Statewide resources, like the DMV and now the CalVet TAP programs, can build a system to support veterans by identifying veterans and linking them to advocacy programs and key community members on a local level.

California is in the best position to advocate for early identification of veterans and promote better access to transitioning members from the DoD. California representatives have a responsibility to put pressure on DoD to aid veterans entering the state to contact local veteran support agencies, and in turn, allow communities to reach out to veterans early and prepare them for civilian life, for which they are consistently underprepared for. Collectively, this costs the state millions of dollars in staff time, unemployment, philanthropic support and emergency rooms visits. With the largest veteran population in the country, California can bring national attention to pressure Congress to allow service members to opt-in to letting local communities know they are coming home.

INSIGHT 4: PEERS ARE THE MOST EFFECTIVE OUTREACH

Peer support and peer outreach offer support to veterans where stigma and "not knowing where to go" hinder their ability to access services. Programs like Battle Buddy Bridge and Zero8Hundred have demonstrated the effectiveness of peer programs. But, peer approaches vary greatly between organizations.

RECOMMENDATION: BUILD A WELL-TRAINED PEER OUTREACH STRATEGY FOR TARGETED GROUPS

New systems should be created to standardize training and best practices for veterans who are equipped to provide peer support service, especially for targeted groups like combat veterans, women, LGBT and homeless veterans.

DISCUSSION

“Word of mouth” continues to be the best way that veterans hear about services across the state. Considerable effort and money is spent on outreach, and yet many organizations still struggle to identify and connect with veterans in their communities with limited social networks. Little attention is focused on how to combat most veterans’ strategy of “solo transition”—handling transition on one’s own without the support of services.

Today’s veterans would rather transition on their own. Yet, many say they would prefer to speak with a veteran if they needed help. Outreach efforts should initiate live conversations that can educate and connect veterans to peers who can offer companionship so that if they do need help, they are more readily able to seek it out.

Anecdotal evidence suggests peer supports can be an effective mechanism in supporting recovery and accessing care, particularly when adequately trained and equipped to provide guidance and support. Peers can provide information, offer encouragement and provide a social network to lessen isolation. Discussions in the veteran space indicate that word-of-mouth, particularly among veteran families, is the strongest, most effective means of connecting veterans to support. In a culture where getting help is stigmatized, veterans need high-touch peer services in their local communities in order to get plugged into information that can improve their health and wellness.

Following a human-centered design approach, programs like California’s TAP must be focused on building hubs in local communities where veterans and their families look for services and can be connected to peers—not solely through online portals or unknown VA desks. Online communities and social media are helpful in some capacities; however, they should not be used in place of personal, peer connections. While incredibly useful in various applications, technological capabilities have been overused for outreach delivery and should not replace the relationships and friendships that aid a veteran in the long term, during initial transition periods or at any other point in their civilian life.

INSIGHT 5: SERVICES ARE FOCUSED ON CHRONIC AND ACUTE NEEDS

Current models of support require veterans to suffer, often significantly in poverty, homelessness or mental illness, before support is provided. This model encourages veterans to “white knuckle” it or reach out once in crisis rather than deal with a problem when it arises.

RECOMMENDATION: FOCUS ON PREVENTION

Prevention and “safety net” services must be more heavily invested in preventing suffering, unemployment, homelessness and health problems.

DISCUSSION

There is a common mantra in the veteran service sphere that if veterans would just reach out, then they could get the help they need. This is not entirely true. Echoing medical models, the eligibility requirements for government-funded housing and employment services are predicated on the veteran being in crisis and generally vulnerable. Veterans continue to be told that they do not qualify unless they have a substance abuse problem, are homeless, or are more destitute. In some cases, veterans are incentivized to worsen their personal situations in order to receive assistance.

As an example, under current eligibility criteria for SSVF, support is given only after a veteran receives an eviction notice, making it virtually impossible to find housing in the future without government support in a tight market. In CIR’s focus groups from both Los Angeles and Orange counties, veterans shared that they were told they weren’t homeless enough or “struggling” enough when they reached out for help. In many assessments, veterans are encouraged to leverage social networks to borrow money or a payday loan. This approach encourages veterans to try to solve their own problems with temporary fixes leading to debt, lost relationships and more risk-taking behaviors. Assistance programs need to identify and support veterans early on who are at risk of suffering before they start down the path towards rock bottom.

Moving toward a preventive model will require a resistance to the ‘rescue principle,’ where crisis is a precursor for intervention. This may require both a short-term provision to address urgent cries for help and a focus on addressing the correlating factors that lead to these conditions, like employment, stable housing, family background, untreated mental and physical health, social isolation, and lack of preparedness. Prevention models will inevitably require an initial financial investment, but lead to longer term pay outs. Veteran services and programs across the sector need to move toward a more holistic focus of support that does not require veterans and their family members to be in crisis before being helped.

Crisis may drive change, yet prevention still remains a better approach to advancing the state of the American veteran in California. Long-term investments in prevention efforts like financial readiness, temporary employment, peer supports and rent assistance (without eviction notice) would go a long way toward ensuring veterans and their families are successful. A report from the California State Auditor found that current statewide funding efforts are focused on approximately 2,700 individuals, representing a fraction of the veterans who currently live in California. To provide support for veterans with acute needs without appropriate funding for preventive programming leaves behind the larger community of veterans who may need support and cannot receive it.

INSIGHT 6: A CULTURE OF COMPLACENCY HAS TAKEN ROOT AMONG VETERAN SERVICE PROVIDERS

In the last decade, Federal programs have expanded services granted through nonprofits, which have in turn been incentivized to meet strict eligibility criteria and outputs. This has had a cooling effect on many of these nonprofits' abilities to explore innovative problem-solving solutions. It has created a culture of complacency.

RECOMMENDATION: THE VETERAN SPACE NEEDS TO INCENTIVIZE INNOVATION

Develop, with input from funders and service organizations, a new structure for which new unproven ideas can be piloted and funded in the service sector.

DISCUSSION

Funders and foundations continue to be inundated with trite solutions that lack innovation. Likewise, they're unwilling to support ideas that exist outside long-standing data and commonly held beliefs. Ideas that are unproven, or against the existing norms, are not rewarded or incentivized until late stages. Competition, group think and the need for fiscal responsibility all drive safe choices that limit innovative advances in veteran services. The VA, DoD, foundations and some service providers lack incentives to invest in markets or models that have significant risk (i.e., might fail), and this has created a culture of stagnation where most organizations must maintain their status quo to ensure survival.

A cycle of complacency seems to have taken hold. An idea exists, but it does not get funded, so an organization reverts back to its original methods. Another factor for this complacency is the expansion of VA programs like Supportive Services for Veteran Families (SSVF) into the community. SSVF programs, unlike traditional VA centered programs, provide services through grants to non-profits in the community. This approach has provided many service providers with infrastructure, but the bureaucracy has stymied the desire to think bigger, and can lead to less conversation and ultimately, resignation to government norms. This has incentivized executive directors and CEOs towards taut programs that follow funding requirements though may not be the best fit for their clients. Service providers, not for lack of effort, are tired and burnt out by the lack of support for new and creative ideas.

Now is the time for defiant and bold ideas. Collaboration and public-private partnerships have been the bedrock for these innovations, yet most still work against competitive granting cycles and are not often formally encouraged. While data- and evidence-based solutions offer key considerations, diversity and growth are limited if providers are not encouraged to build new models. The impossible is possible with multiple agencies and organizations working together towards common goals. We challenge those in the veteran space to try new models in new compassionate and novel ways. We must develop a mechanism in the veteran space that allows for early-stage support of risky ideas with an understanding that innovative solutions may be risky, but, echoing venture capitalist thoughts—no risk, no reward.



POLICY RECOMMENDATIONS

The following policy recommendations are based on feedback from the September 2016 State of the American Veteran in California conference that discussed existing state legislation and policy gaps for veterans of all ages, genders, race/ethnicities and discharge statuses. After thoughtful discussion and discourse, we present the following recommendations to the 2017 California State Policy Agenda:

1. PREVENTION FOCUSED PROGRAMS & BENEFITS

Federal, state and even local programs are currently focused on reactive programs or benefits that require a veteran to be homeless, under duress, or at risk to self or others before services can be rendered. California can do better. We have always taken the lead in progressive actions. Communities across California require prevention-focused programs and benefits that seek to help veterans and their families before they are in crisis.

ACTION STEPS

- » Prioritize funding for statewide veteran programs that address the needs of “at-risk” veterans including; women veterans, LGBTQ veterans and National Guard/Reservists.
- » Pass legislation earmarking state funds for agencies providing services to service members, veterans and their families with priority of funds going to organizations with the following:
 - Prevention-focused programs
 - Programs that address needs of “at-risk” veterans
 - Programs that demonstrate the effectiveness of their services

2. INCREASE OUTREACH & ACCESS

Lack of knowledge or awareness of resources for veterans and their families is the result of outdated institutional barriers. Veterans transitioning to California should not be barred from resources or benefits because of an unfounded fear of legal or privacy concerns. Instead, veterans should be able to receive information related to resources in their community prior to their departure from the military.

ACTION STEPS

- » Expand California’s state definition of veteran to include anyone who served for any length of time in the military. (See CIR’s definition).

- » Pass legislation that automatically registers veterans transitioning to California into state assistance and benefit programs.
- » Expand CalVet’s Local Interagency Network Coordinator (LINC) program to hire statewide peer support specialists
- » Support California’s federal representatives in Congress to sponsor and support national legislation that mandates the DoD to let states and local communities know when veterans return to their communities

3. SUPPORT LOCAL PUBLIC-PRIVATE PARTNERSHIPS

California’s prosperity is a direct result of the safety and security provided by veterans of all generations past, present and future. As such, state, county and local officials should seek partnerships with the private sector to ensure our veterans are provided the most complete, advanced and comprehensive services available. In turn, the private sector can offer much more than funding to support veterans.

ACTION STEPS

- » Expand on state programs to fund local community collaborations that focus on building public-private partnerships and enhance the well-being of veterans in their community
- » Provide state funding for research and development of programs to meet the needs of veterans and their families at the local level.



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Report photography from the State of the American Veteran in California conference.

ABOUT CIR

The Center for Innovation and Research on Veterans & Military Families (CIR) is a global leader in promoting the health and well-being of service members, veterans and their families through research, education and collaboration that encourages successful transitions to civilian life. Housed within the University of Southern California Suzanne Dworak-Peck School of Social Work, CIR aims to transform the care and support of service members, veterans and military families, expanding community resources for veterans, heightening awareness about military culture and veteran issues to create supportive communities, and conducting research that expands our understanding of veteran transition issues to decrease suffering and promote meaningful and successful civilian lives.

Located in Los Angeles, home to the largest concentration of veterans in the United States, CIR is the only center in the world to combine its trailblazing research, educational expertise, and local, national and international collaborations to address the pressing needs of all veterans and military families.

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THE STATE OF THE

**AMERICAN VETERAN
IN CALIFORNIA**

CONFERENCE 2016

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