Anthony,

I have enjoyed reading your proposal and becoming familiar with your study plan. I have comments throughout the document. These are global comments, so be sure to address feedback as it applies throughout the document. Here is a summary of the primary concerns:

1. The phenomenon of the study seems a bit elastic throughout the proposal. The focus drifts a bit as you describe it. Also, attempting to examine several different types of trauma seems too broad, as each of these traumas has its consequences and issues. I recommend narrowing to one trauma.
2. The design is not clearly described. Please see my notes and be sure to cite all assertions throughout.
3. The Research Questions need to be revised to focus on the experiences, perspectives, and descriptions of your participants.

Please feel free to have Dr. Linski follow up with me if you have questions or need clarification on any of my comments.

Dr. Girdley, methodologist

September 23, 2018

A study on female veterans and their life after serving in the military

Submitted by

Anthony L. Robinson

Equal Spacing

~2.0” – 2.5.”

A Dissertation Presented in Partial Fulfillment

of the Requirements for the Degree

Doctorate of Education

(or) Doctorate of Philosophy

(or) Doctorate of Business Administration

Equal Spacing~2.0” – 2.5”

Grand Canyon University

Phoenix, Arizona

[Insert Current Date Until Date of Dean’s Signature]

© by Anthony L. Robinson March 21, 2018

All rights reserved.

GRAND CANYON UNIVERSITY

A study on female veterans and their life after serving in the military

by

Anthony L. Robinson

Approved

March 21, 2018

DISSERTATION COMMITTEE:

Full Legal Name, Ed.D., DBA, or Ph.D., Dissertation Chair

Full Legal Name, Ed.D., DBA, or Ph.D., Committee Member

Full Legal Name, Ed.D., DBA, or Ph.D., Committee Member

ACCEPTED AND SIGNED:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Michael R. Berger, Ed.D.

Dean, College of Doctoral Studies

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

GRAND CANYON UNIVERSITY

A study on female veterans and their life after serving in the military

I verify that my dissertation represents original research, is not falsified or plagiarized, and that I accurately reported, cited, and reference all sources within this manuscript in strict compliance with APA and Grand Canyon University (GCU) guidelines. I also verify my dissertation complies with the approval(s) granted for this research investigation by GCU Institutional Review Board (IRB).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Type Doctoral Learner Name Beneath Signature] Date

Abstract

The abstract is required for the dissertation manuscript only. It is not a required page for the proposal. The abstract, typically read first by other researchers, is intended as an accurate, nonevaluative, concise summary, or synopsis of the research study. It is usually the last item completed when writing the dissertation. The purpose of the abstract is to assist future researchers in accessing the research material and other vital information contained in the dissertation. Although few people typically read the full dissertation after publication, the abstract will be read by many scholars and researchers. Consequently, great care must be taken in writing this page of the dissertation. The content of the abstract covers the purpose of the study, problem statement, theoretical foundation, research questions stated in narrative format, sample, location, methodology, design, data sources, data analysis, results, and a valid conclusion of the research. The most important finding(s) should be stated with actual data/numbers (quantitative) or themes (qualitative) to support the conclusion(s). The abstract does not appear in the table of contents and has no page number. The abstract is double-spaced, fully justified with no indentations or citations, and no longer than one page. Refer to the *APA Publication Manual*, 6th Edition, for additional guidelines for the development of the dissertation abstract. Make sure to add the keywords at the bottom of the abstract to assist future researchers.

*Keywords*: Abstract, assist future researchers, 150 to 250 words, vital information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| **ABSTRACT**  **(Dissertation Only—Not Required for the Proposal)**  The abstract is typically read first by other researchers and is an accurate, non-evaluative, concise summary or synopsis of the research study. The abstract provides a succinct summary of the study and MUST include the purpose of the study, theoretical foundation, research questions (stated in narrative format), sample, location, methodology, design, data analysis, and results, as well as, a valid conclusion of the research. Abstracts must be double-spaced, fully justified with no indentions. (one page) | | | | |
| The abstract provides a succinct summary of the study and MUST include: the purpose of the study, theoretical foundation, research questions stated in narrative format, sample, location, methodology, design, data sources, data analysis, results, and a valid conclusion of the research. **Note:** *The most important finding(s) should be stated with actual data/numbers (quantitative) ~or~ themes (qualitative) to support the conclusion(s).* |  |  |  |  |
| The abstract is written in APA format, one paragraph fully justified with no indentations, double-spaced with no citations, and includes key search words. Keywords are on a new line and indented. |  |  |  |  |
| The abstract is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. |  |  |  |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

Dedication

An optional dedication may be included here. While a dissertation is an objective, scientific document, this is the place to use the first person and to be subjective. The dedication page is numbered with a Roman numeral, but the page number does not appear in the Table of Contents. It is only included in the final dissertation and is not part of the proposal. If this page is not to be included, delete the heading, the body text, and the page break below.

Acknowledgments

An optional acknowledgments page can be included here. This is another place to use the first person. If applicable, acknowledge and identify grants and other means of financial support. Also, acknowledge supportive colleagues who rendered assistance. The acknowledgments page is numbered with a Roman numeral, but the page number does not appear in the table of contents. This page provides a formal opportunity to thank family, friends, and faculty members who have been helpful and supportive. The acknowledgments page is only included in the final dissertation and is not part of the proposal. If this page is not to be included, delete the heading, the body text, and the page break below.

Table of Contents

[List of Tables xi](#_Toc503988595)

[List of Figures xii](#_Toc503988596)

[Chapter 1: Introduction to the Study 1](#_Toc503988597)

[Introduction 1](#_Toc503988598)

[Background of the Study 4](#_Toc503988599)

[Problem Statement 7](#_Toc503988600)

[Purpose of the Study 10](#_Toc503988601)

[Research Questions and/or Hypotheses 12](#_Toc503988602)

[Advancing Scientific Knowledge and Significance of the Study 14](#_Toc503988603)

[Rationale for Methodology 17](#_Toc503988604)

[Nature of the Research Design for the Study 20](#_Toc503988605)

[Definition of Terms 24](#_Toc503988606)

[Assumptions, Limitations, Delimitations 26](#_Toc503988607)

[Assumptions. 26](#_Toc503988608)

[Limitations and delimitations. 26](#_Toc503988609)

[Summary and Organization of the Remainder of the Study 26](#_Toc503988610)

[Chapter 2: Literature Review 33](#_Toc503988611)

[Introduction to the Chapter and Background to the Problem 33](#_Toc503988612)

[Identification of the Gap 33](#_Toc503988613)

[Theoretical Foundations and/or Conceptual Framework 33](#_Toc503988614)

[Review of the Literature 33](#_Toc503988615)

[Methodology and instrumentation/data sources/research materials **Error! Bookmark not defined.**](#_Toc503988616)

[Summary 33](#_Toc503988617)

[Chapter 3: Methodology 33](#_Toc503988618)

[Introduction 83](#_Toc503988619)

[Statement of the Problem 84](#_Toc503988620)

[Research Questions and/or Hypotheses 86](#_Toc503988621)

[Research Methodology 89](#_Toc503988622)

[Research Design 92](#_Toc503988623)

[Population and Sample Selection 95](#_Toc503988624)

[Quantitative sample size **Error! Bookmark not defined.**](#_Toc503988625)

[Qualitative sample size **Error! Bookmark not defined.**](#_Toc503988626)

[Research Materials, Instrumentation OR Sources of Data 101](#_Toc503988627)

[Trustworthiness (for Qualitative Studies) 106](#_Toc503988628)

[Credibility. **Error! Bookmark not defined.**](#_Toc503988629)

[Transferability **Error! Bookmark not defined.**](#_Toc503988630)

[Dependability. **Error! Bookmark not defined.**](#_Toc503988631)

[Confirmability. **Error! Bookmark not defined.**](#_Toc503988632)

[Validity (for Quantitative Studies) 109](#_Toc503988633)

[Reliability (for Quantitative Studies) 111](#_Toc503988634)

[Data Collection and Management 113](#_Toc503988635)

[Data Analysis Procedures 118](#_Toc503988636)

[Ethical Considerations 125](#_Toc503988637)

[Limitations and Delimitations 129](#_Toc503988638)

[Summary 131](#_Toc503988639)

[References 134](#_Toc503988640)

[Appendix A. Site Authorization Letter(s) 159](#_Toc503988641)

[Appendix B. IRB Approval Letter 160](#_Toc503988642)

[Appendix C. Informed Consent 161](#_Toc503988643)

[Appendix D. Copy of Instruments and Permissions Letters to Use the Instruments 162](#_Toc503988644)

[Appendix E. Power Analyses for Sample Size Calculation (Quantitative Only) 163](#_Toc503988645)

[Appendix F. Additional Appendices 164](#_Toc503988646)

# List of Tables

Table 1. Correct Formatting for a Multiple Line Table Title is Single Spacing and   
Should Look Like this Example **Error! Bookmark not defined.**

Table 2. Equality of Emotional Intelligence Mean Scores by Gender **Error! Bookmark not defined.**

Note: Single space multiple-line table titles; double space between entries per the example above. The List of Tables and List of Figures (styled as Table of Figures) have been formatted as such in this template. Update the List of Tables in the following manner: [Right click 🡪 Update Field 🡪 Update Entire Table], and the table title and subtitle will show up with the in-text formatting. After you update your List of Tables, you will need to manually remove the italics from each of your table titles per the example above.

# List of Figures

Figure 1. The correlation between SAT composite score and time spent on Facebook. **Error! Bookmark not defined.**

Figure 2. IRB alert. 127

Note: single-space multiple line figure titles; double-space between entries per example in List of Tables on the previous page. Use sentence case for figure titles. After you update your List of Figures, you will need to remove the italics per the example above manually.

# Chapter 1: Introduction to the Study

## Introduction

The events of September 11, 2001, rocked this nation like never before. The event caught the United States and its government by surprise. That day led to a rapid increase in both male and female Americans joining the armed services. That day also led to one of the most substantial influxes of women within the armed services community, the outcome of which will be one of the most significant transitioning processes of female veterans back into society. According to the Department of Veteran Affairs (2013), females are now the fastest growing group within the veteran community. There is evidence that implies that veterans and other military personnel are at considerable risk of developing Post Traumatic Stress Disorder (PTSD) (Haun et al., 2016). Female veterans are at the center of this topic because of their recent role in the war. Despite the harsh reality of war and combat, many of the veterans of the 9/11 era are struggling with the primary process of transitioning back into the civilian world. Today's female veterans are struggling more than they had in the past, because of their increased responsibility in combat operations, which has led to an increase in mental health issues (Sairsingh et al., 2018). These issues seem to be common side effects amongst the female veterans' community because of their significant exposure to trauma multiple exposures to war, during their participation in Operation Enduring Freedom and Operation Iraqi Freedom OEF/OIF.

According to Haun et al. (2016), there is evidence that female veterans are at higher risk of experiencing PTSD in comparison to male veterans. The issue here is how do they handle PTSD after being exposed to or experiencing this form of trauma after being in the military. Since their responsibilities have increased significantly after 9/11, what is the lasting effect this issue has on their ability to reconnect with society are they at higher risk for another long-term element that will influence their transition process. One study suggests that the high prevalence of combat exposure (CE) in both male (82%) and female veterans (73%) who have served in Afghanistan and Iraq, has increased the current body of knowledge that has shown that CE can impact the physical health of these veterans (Street et al., 2013; Buttner et al., 2017). The perception is that today’s female veterans are taking a more aggressive role in military operations, than the old traditional role of the past. According to Crompvoets (2011), the newest generation of female veterans may face growing professional challenges and unique threats to their mental health. One study suggests that female veterans who served are more than 1.5 times more likely than non-female veterans are to experience trauma (Dicteher, Cerulli, and Bossatre, 2011). The previous literature identifies the demand for individualized female-centric care that fits the unique demands of female veterans because of their substantial disability from mental health issues linked with military trauma (Haun et al., 2016). These issues are hitting the female veteran populations the hardest. Thus, in turn, is affecting their identity and ability to cope with stress and adapt to change when transitioning back into the civilian population.

According to Bean-Mayberry et al. (2011); and Painter et al. (2018), female veterans are the fastest growing utilizers of the Veteran Administration (VA) healthcare system. On that point, some unique request is in place to satisfy the demands of this growing population of female veterans that have developed PTSD related issues. However, while research is still emerging on the experience these female veterans faced, the gap remains intact. The gap in the literature comes from the lack of supports and studies that connects female veterans with life-altering events such as PTSD, which is affecting their lives after transitioning out of the military and back into society. No study has yet connected the issues developed from PTSD with the transition process out of the military for female veterans. Most of the studies have concentrated on male veterans have little to no insight into the reality that many female veterans are experiencing, and these studies do not provide an adequate approach to addressing or meeting the needs of the female veterans (Bastian et al., 2016). The evidence indicates that female veterans currently account for 8% of the veteran population, and this number is expected to reach as much as 14% by 2033 (Lehavort & Simpson, 2014; Yano et al., 2010). The current foundational principle for this study will be based on the evidence used in connection with Schlossberg's transition theory and the 4’S model (Anderson & Goodman, 2014). Also, the role theory as developed by J. L. Moreno, George Herbert Mead, Ralph Linton, and Leonard Cottrell. Role theory will be used to understand the interaction of human experience (Blanter, 1991). These theories will be employed to examine how female veterans describe their real-life experiences after suffering PTSD and how these matters will bear on their ability as they transition out of the military.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Introduction**  This section provides a brief overview of the research focus or problem, explains why this study is worth conducting and discusses how this study will be completed. (Minimum three to four paragraphs or approximately one page) | | | | |
| Dissertation topic is introduced, and the value of conducting the study is discussed. | 2 | 2 | 2 |  |
| The discussion provides an overview of what is contained in the chapter. | 2 | 2 | 2 |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 | 2 |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Background of the Study

Over the past century, the role of females in the military have increased to the point where women are now taking part in combat. Female members of the military are now considered to be equal to their male counterparts, as they can now fully engage in combat-connected events. The female population in the military has embraced their new role in combat; indeed, women veterans have increased their position in today's key combat situation that has allowed them to protect and defend the constitution of the United States in a different capacity than before.

While the number of women raising their hand to swear into the service has steadily increased over time, many female veterans have experienced some problematic setbacks regarding adapting and reconnecting into society after their service commitment is complete. In connection with the long-term effects of PTSD, have posed quite the enduring impact on the mental and physical aspects of these female veterans’ and their lives. The aftermath of war and combat has made it quite challenging for many female veterans, even though the Transition Assistance Program (TAP) that was implemented by Congress in the early 1990s is structured to support the veteran community as they transition to the civilian world (Cloud, 2012). Even with the TAP program, there is still not a suitable program that can fully assist female military veterans with the transition process to civilian society.

Female veterans have been labeled as a minority within the Armed Service, even though some female veterans have fully engaged in combat-related mission. This makes their transition process back into the modern world quite challenging, as most of the research in this area has primarily focused on the difficulties that male veterans experience. The limited body of literature that focuses on female veterans suggests that many female veterans are struggling with mental and physical health conditions such as PTSD (DeLucia, 2016; Dichter et al., 2017; Hoge et al., 2004; Tanielian & Jaycox, 2008; Painter, et al., 2018; Yalch et al., 2018) as they transition from the military back into society. What is missing from this body of knowledge is an examination of what will help female veterans who are transitioning from the military to veteran status that will assist them in adapting into their new role as a civilian (Robertson & Bott, 2013) as they cope with the effects of PTSD.

The scope of this study will be to address the real-life issues that many female veterans are experiencing as they deal with PTSD. Female veterans are dealing with many issues that follow them into their life outside the military, and many of these issues are often omitted (Szelwach et al., 2011). As such, this study is designed to examine how female veterans deal with issues that affect their mental and physical health as they transition out of the military.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Background of the Study**  Minimum two to three paragraphs or approximately one page | | | | |
| The background section of Chapter 1 provides a brief history of the problem.  Provides a summary of results from the prior empirical research on the topic.  Using results, societal needs, recommendations for further study, or needs identified in three to five research studies (primarily from the last three years), the learner identifies the stated need, called a gap.  Builds a justification for the current study, using a logical set of arguments supported by citations.  The problem is discussed as applicable beyond the local setting and contributes to societal and professional needs. | 2 | 2 | 2 |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 | 2 |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Problem Statement

How female veterans in Alaska describes how PTSD influence their transition process from military. A successful transition process for female veterans consists of having their issues addressed before re-connecting back into society. Long-term effects of failure to address exposure to PTSD can have a negative impact on female veterans after they have served in the Armed Forces. Kintzle et al. (2015), suggests that female veterans should seek help during their transition phase as a way to provide a level of support if they have had PTSD. The ideas developed by Schlossberg (2011), which implies the 4'S are some of the coping resources of the transitioning process which are the situation, self, support, and strategies that helps determine a successful transition for female veterans. Female veterans that seek to reintegrate without support for exposure to PTSD often wind up dealing with mental and physical issues that hinder their lives from progressing after leaving the military.

A recent study showed that one in every four female veterans would suffer some form of trauma during their military service (Cichowski et al., 2017). While female veterans are the fastest growing segment of the military, they are also more likely than male veterans to suffer from the complex issues associated with PTSD (Cichowski et al., 2017; Creech et al., 2017; Kearns et al., 2016; Latta et al., 2016). What is missing from the body of research is any work that allows female veterans to tell their stories concerning how they cope with PTSD as civilians.

Previous researchers have noted how descriptive qualitative can provide the most authentic approach to capture the lived experiences of people through in-depth interviews that illustrate the phenomenon under examination. A descriptive qualitative study will be used in this study to help gather information that military and civilian leaders can use to design programs for female veterans that may have experienced PTSD.

The lack of services for the general population of female veterans underscores the need to examine current policies designed to address the mental and physical needs of female veterans as they transition out of the military. The findings from this study may provide military and civilian leaders with information that they can use to update future policies and procedures to prepare female veterans to better reclaim their civilian identity after being exposed to PTSD. Many prior studies only seem to be focused on the issues faced by male veterans (Brunger et al., 2013; Galily & Shimon, 2012; Gonzalez et al., 2014; Hammond, 2015; Robertson & Brott, 2013). This study adds to the body of knowledge by capturing first-hand experiences of the transition process from the general population of female veterans.

| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Problem Statement**  Minimum three or four paragraphs or approximately one page | | | | |
| States the specific problem proposed for research with a clear declarative statement.  Discusses the problem statement in relation to the gap or need in the world, considering such issues as: real issues affecting society, students, or organizations; the frequency that the problem occurs; the extent of human suffering the problem produces, the perceived lack of attention in the past; the discussion of the problem in the literature and research about what should be addressed vis à vis the problem; the negative outcomes the issue addresses. | 2 | 2 | 2 |  |
| Describes the general population affected by the problem. The general population refers to all individuals that could be affected by the study problem.  Example: All older adults in the US who are 65 yrs or older. The target population is a more specific sub-population of interest from the general population, such as low income older adults (≥ 65 yrs) in AZ. Thus, the sample is derived from the target population, not from the general one. | 2 | 2 | 2 |  |
| Describes the unit of analysis, which is the phenomenon, individuals, group or organization under study. | 2 | 2 | 2 |  |
| Discusses the importance, scope, or opportunity for the problem and the importance of addressing the problem. | 2 | 2 | 2 |  |
| The problem statement is developed based on the need or gap defined in the Background to the Study section. | 2 | 2 | 2 |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 | 2 |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Purpose of the Study

The purpose of this descriptive qualitative study is to examine how female veterans in Alaska describe how PTSD influence their transition process from the military (Ahern et al., 2015).Through the ideas of Schlossberg’s transition theory and the 4'S model which was created by Schlossberg and other colleagues in later works, will explain how the transition process can lead to various changes such as roles, routines, and assumptions (Anderson & Goodman, 2014; Schlossberg, 2011). The transition for female veterans is much more challenging after experiencing traumatic issues in the military because of the emotional, physical, and social changes of being exposed to the trauma of PTSD (DeLucia, 2016). The significance of the study is to show how PTSD are factors that impact female veterans as they transition from military life to civilian life.

The target population for this study will be female’s veterans to make appropriate inferences about the proposed phenomenon. Ten female veterans from Alaska from any branches of the military considered as the sample for this study. Alaska is a centralized region that has a significant veteran present amongst the military service. The design utilized in this study will be a descriptive qualitative design because it allows the use of critical information to be processed and used to identify barriers and other related issues to capture the real life experience of the female veterans participating in this study (Cassidy et al., 2018). The primary goal of descriptive qualitative studies, in which discovery is often directed towards understanding the “who, what, and where of events or experiences, or their basic nature and shape” (Gutierrez et al., 2013; Sandelowski, 2000). In-depth interviews will allow the researcher to gather data while conducting this qualitative study quickly. The qualitative method is better suited for this study because there is a primary objective as well as a goal in mind to explore, which is the concepts that will assist in producing a comprehensive summary of the actual events that have taken place to show the impact that PTSD has on the female veterans’ community.

The study is limited and constrained by the use of a single geographical based location within the United States. The sample should still allow the researcher to capture information from female veterans who live in one specific region of the United States, which is the state of Alaska. The results of the research may discover the new insight that could assist in a future study that may impact both male and female veterans as they transition out of the military and return to society.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **PURPOSE OF THE STUDY**  Minimum two to three paragraphs | | | | |
| Begins with one sentence that identifies the research methodology and design, target population, variables (quantitative) or phenomena (qualitative) to be studied and geographic location.  This can be presented as a declarative statement: "The purpose of this study is...." that identifies the research methodology and design, population, variables (quantitative) or phenomena (qualitative) to be studied and geographic location. | 2 | 2 |  |  |
| Describes the target population and geographic location. | 2 | 2 |  |  |
| **Quantitative Studies**: Defines the variables and relationship of variables.  **Qualitative Studies:** Describes the nature of the phenomena to be explored. | 2 | 2 |  |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Research Questions and Hypotheses

The research questions provide direction in examining the issues of PTSD that female veterans are experiencing and the available resources that they have that will assist them in completing a successful transition back into society. This descriptive qualitative study is the design that will be used to examine the issues of PTSD. Extending the current body of knowledge towards the descriptive qualitative research approach will encourage future conversation about the current dilemma many female veterans are experiencing (Caeli et al., 2003). The framework developed in the descriptive qualitative research will assist the study in understanding the experience and events of these female veterans. Schlossberg's (2011) transition theory and the 4'S model will be used as the foundational framework to support RQ1, RQ2, and RQ3 to explain the process of transitioning from the military after dealing with the elements developed while in the service. In contrast, role theory will be used to provide a detailed background on the participants for RQ1, RQ2, and RQ3, providing a better empathetic understanding of the transition process. The following research questions will guide the current generic qualitative research study:

R0: How do female veterans in Alaska describes how PTSD influence their transition process from the military?

R1: How do female veterans in Alaska describe how PTSD influenced their transition process from the military concerning the idea of transition?

R2: How do female veterans in Alaska describes that how different traits of military service play a positive role in the transition process of female veterans?

R3: How do female veterans in Alaska indicate that the specific military service traits negatively influence the entire transition process for female veterans?

There is limited research that examines how female veterans who are transitioning from the military to veteran status adapt to their new status in the civilian world as they cope with the effects of PTSD. Research has shown that the transition process is a significant change that impacts one's life (Anderson & Goodman, 2014). Female veterans make up an increasing proportion of the military, yet all of the previous studies in the area of transitioning from military to civilian life have only targeted the transition process of male veterans (Gutierrez et al., 2010; Robertson and Brott, 2013). The notable gap present in the body of knowledge suggests a need to examine the transition process of female veterans. Schlossberg’s transition theory and role theory will be used as the theoretical foundations to explain the importance of studying the issues that are impacting the lives of female veterans after their service commitments are over.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Research Question(s) and/or Hypotheses**  Minimum two to three paragraphs or approximately one page | | | | |
| **Qualitative Studies:** States the research question(s) the study will answer and describes the phenomenon to be studied. Note: The research questions guide the data which will be collected to answer the research questions; they do not identify the instruments.  **Quantitative Studies**: States the research questions the study will answer, identifies and describes the variables, and states the hypotheses (predictive statements) using the format appropriate for the specific design and statistical analysis. | 2 | 2 |  |  |
| This section includes a discussion of the research questions, relating them to the problem statement. The research questions need to be connected to the theory(s) or model(s) from the theoretical foundation section, as well. | 2 | 2 |  |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Advancing Scientific Knowledge and Significance of the Study This studies on female veterans will show the agony, as well as the significant life-changing events that take place in the military, which is the resulting factor of the current in a gap in the literature (Kehle-Forbes et al. 2017). Trauma suggests that the stresses that female veterans have to overcome during the process of transition involve both mental and physical aspects due to the trauma of PTSD. The hope is to produce similar results of this similar phenomena project will bring light to the issues and concerns that female veterans experience.

The transition process has become a challenging ordeal for many female veterans that are suffering from conditions such as PTSD. Yalch et al., (2018) explain how female veteran are increasingly called upon to serve in both official and unofficial combat roles, and their service increases their chance of potential exposure to PTSD. Combat exposure is one of the strongest predictors of poor physical health in veterans (Floto et al., 2017; Maia et al., 2011,2011; Ramchand et al., 2015). In addition to the possibility of combat exposure, female veterans also fill many roles such as being a spouse, mother, friend, and student, thus creating an additional burden which puts them in a vulnerable position. The challenges that many female veterans have to overcome are numerous and are compounded to create pitfalls within their lives, making it difficult to re-enter society as civilians. Pierce, Pierce, and Pritchard (2016) suggested that the occurrence of these issues is additional stressors after exposure to traumatic events and that this can trigger avoidance, negative mood cognition symptoms, and altered arousal and reactivity on the part of the female veteran (American Psychiatric Association, 2013). Thus an examination of this phenomenon will advance the body of scientific knowledge.

The focus of the study is to examine the real-life experiences that many female veterans have encountered during their transition to civilian status. The current study is based on a demographic projection which indicates an increase in the female veteran populations within the next 30 years of approximately 50% (Department of Veterans Affairs, 2014). However, their issues are often overshadowed or downplayed because of the express interest or concern placed on male veterans. Society often forgets that female veterans play a role in the overall plan for creating peace throughout the world. This study is, therefore, necessary to fill a gap in the literature by providing a closer look at the experiences of female veterans. The value of this study is to raise awareness that there are some issues that female veterans face as they transition back into society

The value of this research is to add information to the field of management by providing organizational leaders with the ability to be aware of many of the mental and physical setbacks that are keeping female veterans from succeeding outside of the military. In addition to raising awareness about the ongoing issues many female veterans encounter before leaving the service, this study will investigate how female veterans’ lives play out after experiencing PTSD as part of their military service. Female veterans that struggle with the transition process may be more prone to isolate themselves from potential social supports after PTSD, thus limiting their ability to transition back into a healthy lifestyle (DeLucia, 2016; Larson & Norman, 2014). This study will set to address the current transition theory process and explains how they will impact the various role that encompasses inside of the role theory. The particular 4S model developed by Schlossberg is an effective theoretical perspective to determine the process of transition. Consideration of this theoretical approach is beneficial to address all the concern relevant to the idea of transition in the form of any event. This perspective helps to figure out the impact of changing the routine of the military on the lives of veteran’s women. By, address and explains the different elements and how they are influencing the transition theory as well as how they will play a significant role in which way to align the individual specify the role. Each theory will focus on the current literature by add value to the current body of knowledge as well as the significance to the study that will focus on the issues at hand which is the elements that create barriers during the transition process. The theoretical foundations will explain the importance of the study by making some preliminary suggestion in the correct course of action in handling the issues at hand which is impacting the transition theory as well as the role theory. By, highlight the areas that need a closer looking in evaluating the transition process will help add value to the current study.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **ADVANCING SCIENTIFIC KNOWLEDGE and SIGNIFICANCE OF THE STUDY**  (Minimum one to two pages) | | | | |
| Identifies the “gap” or “need” in the literature that was used to define the problem statement and develop the research questions. | 2 | 2 |  |  |
| Describes how the study will address the “gap” or “identified need” defined in the literature and contribute to the body of literature. | 2 | 2 |  |  |
| Describes how the research fits with and will contribute to or advance the current literature or body of research | 2 | 2 |  |  |
| Describes the potential practical applications from the research. | 2 | 2 |  |  |
| Identifies the theory(es) or model(s) that provide the theoretical foundations or conceptual frameworks for the study. | 2 | 2 |  |  |
| Connects the study directly to the theory and describes how the study will add or extend the theory or model. | 2 | 2 |  |  |
| Describes how addressing the problem will add value to the population, community, or society. | 2 | 2 |  |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Rationale for Methodology

This study will use a qualitative methodology to explore the current issues that female veterans are experiencing after leaving the military. A qualitative methodology will allow for an exploration of the life experiences of female veterans. A qualitative methodology is used to gain knowledge and understanding by accessing individuals’ lived experiences and describing these experiences using rich and authentic language (Byrne, 2001; Brue & Brue, 2016; Moustakas, 1994). A qualitative approach can be used to address all aspects of the research question through in-depth interviews that explain the phenomenon in question.

A qualitative method will allow for the collection of data to answer the research questions that described their real-life experiences female veterans have when trying to transition from military service and deal with issues that are hindering their success in the civilian sector. A qualitative method focuses on the experienced and the phenomenon based on the involvement of the research subjects, as their perspective can be used to understand the nature of the issues under investigation (Sailakumar& Naachimuthu, 2017). The research questions are correctly aligned with the problem statement, as it is not known how a female veteran's life will be affected after serving in the military during their transition phase.

A quantitative study will not provide the best result in showing the real-life experience of female veterans, as this project is not concerned with collecting quantitative data to gather different variables to identify the problem. The exploration of quantitative research of veterans only hints at the internal stressors of combat exposure which has had some level of impact on the psychological well-being of the veteran (Gordon, 2014). A quantitative study would, therefore, be the incorrect study or method to use in this study because a quantitative method would be ill-suited to examine the personal issues that are consuming these female veteran’s lives. A quantitative approach has an emphasis on measuring relationships between distinct variables, and this approach never captures the true essence of the real-life experience. The study, therefore, calls for a more encompassing approach, which is why a quantitative study is not a correct fit to examine the needs of the female veteran after serving in the military.

A qualitative study will allow the researcher to learn how female veterans are affected by their service in the military. This study requires a qualitative method to align the research questions and the problem statement concerning how female veterans are handling the issues that transpired while they were in the military. Qualitative descriptive studies have as their goal a comprehensive summary of issues in the everyday terms of events (Gutierrez et al., 2013). A qualitative study accounts for free discussion based on personal experience, whereas a quantitative is more along the lines of a statistics driving method that shows the value of the study. A qualitative approach indeed is more suitable for this study as the focus is to gain in-depth access to female veterans as they explain their real-life events. The aim is to gain proper understanding of the views of female veterans about the impact of PTSD which can better achieve by attaining their detailed point of view which is possible through qualitative research method. Mix method research is one critical form to conduct comprehensive research work. It is important to examine difference implications of this method to figure out how this particular method can never be suitable for this specific research study. The broad idea of mixed method research comprised of both the elements of qualitative and quantitative research work. The overall idea of mixed method research involves consideration of experiments, survey, and the qualitative tools in the form of focus groups, interviews research (Cortini, 2014). It is established that the mixed research method can never viable for this specific research study due to restriction in the form of time requirements. Conduct a survey can be a time-consuming activity that can never establish as effective when it comes to exploration of the transition process of female veterans into society. Qualitative research can be a better option to ensure the required form of descriptive research analysis.

| **Criterion\***  **(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Rationale for Methodology**  (Minimum two to three paragraphs) | | | | |
| Identifies the specific research methodology for the study. | 2 | 2 | 2 |  |
| Justifies the methodology to be used for the study by discussing why it is an appropriate approach for answering the research question(s) and addressing the problem statement.  **Quantitative Studies:** Justify in terms of the problem statement and the variables for which data will be collected.  **Qualitative Studies:** Justify in terms of problem statement and phenomenon. | 2 | 2 | 2 |  |
| Uses citations from seminal (authoritative) sources (textbooks and empirical research literature) to justify the selected methodology. **Note:** *Introductory or survey research textbooks (such as Creswell) are not considered seminal sources*. | 2 | 2 | 2 |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 | 2 |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Nature of the Research Design for the Study

The design utilized in this study will be a descriptive qualitative design. The basic or fundamental qualitative description is categorical, less interpretive, less abstract, and has the goal of a straight descriptive summary of the data (Caelli et al., 2003; Sa Sandelowski, 2000). The descriptive qualitative studies tend to draw from naturalistic inquiry, which purports a commitment to studying something in its natural state to the extent that is possible within the context of the research arena (Lambert and Lambert, 2012). This descriptive qualitative design is used, because it provides a comprehensive summary as well as analysis, in the conventional terms or specific events experienced by the individuals or participating groups of individuals in the study. A descriptive qualitative design will be used to focuses on discovering the nature of the events as well as the experiences of female veterans in this study. The primary goal of descriptive qualitative is to be exploratory research that summarizes the data surrounding the study. The descriptive qualitative design will produce the best possible results regarding sharing a female veteran's real-life experiences after their time in the military based on the nature of those specific events. There were other designs up for consideration for this study. The designs were carefully considered to include, narrative design, phenomenology design, grounded theory, and a case study. The narrative design is geared to focus more on how a story is being transcribed instead of actual events that have taken place (Lee et al., 2016). Englander (2012) elucidate that phenomenological psychology, using a qualitative method, tries to identify the essential structure of a phenomenon. The grounded theory approach does not adequately account for the real-life expression, as grounded theory is an approach in which the inquirer generates a general explanation of a process, action, or interaction shaped by the views of a more substantial number of participants (Creswell, 2007; Johnson, 2015). The case study design did not align to support the purpose of the study, as the primary focus of a case study is to examine the boundaries of a given system. Ridder (2017) notes how a case study design is also used to analyze the respective contributions that data makes to a theory. Thus, the reasoning behind selecting a descriptive qualitative design is that this design allowed a straightforward description of the current phenomenon that is under investigation, it accounts for useful information by the researcher to regarding the events, it also, account for who, what, where, and how the event took place. The descriptive qualitative design to understand the motivations underlying volunteerism was used to gain this understanding (Lamb et al., 2018).

It is necessary to establish that total twenty veterans will be recruit for the study to ensure overall authenticity of the study. Consideration of twenty recruits further helps to select ten individuals as the population for the study. The target population for this study is female veterans from the state of Alaska and the sample population for this study will include ten female veterans who have encounter any form of PTSD from their time in the service. Semi-structured interviews will serve as the primary source of collecting data surrounding the transition process of female veterans, followed by document analysis, observation, and field notes. Seidman (2013) explains that the interview provides access to the context of people’s behavior and thereby provides a way for researchers to understand the meaning of that behavior. The interview protocol will be the key a primary data sources collection process utilized in this study. Before conducting an interview, a panel of experts must review the questions and establish a test run to develop a proper interview protocol. Based on their knowledge of the current body of literature, the experts will review the interview question for validation and offer suggestions and recommendations where needed to explore and summarize the data to carefully examine the assumptions they bear on the study. The semi-structured interview will be performed in a public setting such as the local library, Starbucks, Zoom, and other social media platform to ensure privacy to conduct a sixty-minutes interview. The semi-structured interview will all me to conduct the electronic or in-person interview to collect data and analysis the document observes the participant and take field note to capture the thematic data to support the study. The data analysis will consist of pure data which will allow me gathered new coding to look for an additional theme and new information that will imply addition research to be generated from this study. When it comes to approach of thematic analysis that the analysis method developed by Braun and Clark will be used. This specific step by step guide helps to ensure better form of understanding about all relevant research steps (Braun, Clarke, Hayfield, & Terry, 2019) It is worthy to explain different steps relevant to the main idea of thematic analysis.

**Get Familiar with the Data**

The first step of qualitative analysis is to ensure proper reading of the entire concept. The detailed understanding of interview structure will help to identify main themes from the content.

**Generate Initial Codes**

It is particular phase when it comes to proper organization of the entire data according to the actual requirements of the study. This specific step allows researcher to determine particular codes considering the meaningful prospect of main themes.

**Search for Themes**

The third step of this analysis is also crucial that is come up with proper consideration of main themes of the research study. Proper consideration of initial codes helps to determine relevant theme for the study.

**Review Themes**

It is critical to check the overall effectiveness of overall themes used for the study. This part of the analysis will be assistive for researcher to consider the themes which are relevant to main feature of concern in the form of transition process of female veterans.

**Define Themes**

This certain stage allows researcher to modify initial themes according to the changing perspective of the research work. It is important to explicitly explain the entire idea of thematic approach to figure out all the relevant features. Refinement of themes relevant to main research objective is helpful to narrow down the procedure of research.

**Write-Up**

The final step demands researcher to start writing about the final themes considering the main objective of the study.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Nature of the Research Design for the Study**  Minimum three to four paragraphs or approximately one page) | | | | |
| Identifies and describes the selected design for the study. | 2 | 2 |  |  |
| Justifies why the selected design addresses the problem statement and research questions.  **Quantitative Studies:** Justifies the selected design based on the appropriateness of the design to address the research questions and data for each variable.  **Qualitative Studies:** Justifies the selected design based on the appropriateness of design to address research questions and study the phenomenon. | 2 | 2 |  |  |
| Briefly describes the target population and sample for the study. | 2 | 2 |  |  |
| Identifies the sources and instruments that will be used to collect data needed to answer the research questions. | 2 | 2 |  |  |
| Briefly describes data collection procedures to collect data on the sample. | 2 | 2 |  |  |
| Describes the unit(s) of observation, which may be individuals, groups, documents, artifacts, databases, based on the data collection plan and instruments/sources. For example, units of observation may be individuals or documents. | 2 | 2 |  |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Definition of Terms

The section includes the definitions and terms used throughout this study.

**Intimate Partner Violence. Intimate Partner Violence.** According to Heyman et al. (2015), one such danger is intimate partner violence (IPV), comprising physical, verbal/symbolic, or sexual acts that cause—or have reasonable potential to cause—harm to an intimate partner. Intimate partner violence (IPV) includes psychological, physical, or sexual aggression by a current or former intimate partner and is associated with a wide range of health and social impacts, especially for women (Dichter et al., 2017).

**Military Sexual Trauma.** The term military sexual trauma (MST), defined by the U.S. Department of Veterans Affairs (VA) as "experience of sexual assault or repeated, threatening acts of sexual harassment" that, according to U.S. Code (1720D of Title 38), involves "psychological trauma, which in the judgment of a VA mental health professional, resulted from a physical assault of a sexual nature, battery of a sexual nature, or sexual harassment which occurred while the Veteran was serving on active duty or active duty for training (Caplan, 2013).

**Post-Traumatic Stress Disorder.** Posttraumatic Stress Disorder (PTSD), also termed partial, subclinical, or subsyndromal PTSD, is widely defined as having PTSD symptoms below the threshold for diagnosis (Zlotnick et al., 2002), as the result of failure to develop fully-threshold symptom levels or due to a partial remission of previously threshold symptoms (Franklin et al., 2015). Matheson (2016), suggest that the diagnosis of ‘core’ PTSD itself is a relatively recent inclusion in psychiatric manuals, appearing for the first time in 1980 (American Psychiatric Association), and was a response to the difficulties presented by veterans returning from the Vietnam war. PTSD and other trauma-related psychopathology in female veterans, other military-related stressors may also increase the risk for these outcomes among veterans (Kearns et al., 2016).

**Self.** The initial coping resource refers to an individual influence the ability to handle and move through the transition process. When considering the different varieties of the self we are looking at what the person brings to the transition, one must account for characteristics such as socioeconomic status, gender, state of health and mental health conditions and how it directly influences one's outlook on life (Anderson, Goodman, & Schlossberg, 2012).

**Setback.** A setback is an unfortunate event that happening that hinders or impedes setback an unfortunate happening that hinders or impedes; something that is thwarting or frustrating.

**Situation.** This coping resource represents different variables that may occur as related to specific situations. Key facets of the situation variable are the concepts of mastery and choice, which are a deliberate decision, or if people or circumstances forced the conclusion towards the transition process (Anderson, Goodman, & Schlossberg, 2012).

**Strategies.** The coping resource is considered a necessary tool or strategy that help veterans navigate their paths through transition or retirement. Policies related to purpose and meaning can be influential in influencing perceptions regarding how the transition is perceived (Anderson, Goodman, & Schlossberg, 2012).

**Substance Use Disorder** Substance use disorders (SUDs), commonly referred to addiction, have been extensively studied in the last decades and several lines of evidence suggest it consists in a neuroadaptive pathology (Hone-Blanchet & Fecteau, 2014). According to Hone-Blanchet & Fecteau (2014), the addiction is the behavioral result of pharmacological overstimulation and usurpation of neural mechanisms of reward, motivated learning and memory. Substance use disorders (SUD) are among the more chronic and costly mental health conditions treated in the Department of Veterans Affairs (VA) (Painter et al. 2018).

**Support.** The people, institutions, things encompass the coping resources of support, and abstract concepts such as faith and spirituality, that feel supportive to an individual. Support comes in many different forms and contexts and may be perceived as positive or negative, depending on the person’s culture (Anderson, Goodman, & Schlossberg, 2012).

| **Criterion\***  **(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Definitions of Terms**  (Each definition may be a few sentences to a paragraph.) | | | | |
| Defines any words that may be unknown to a layperson (words with unusual or ambiguous meanings or technical terms) from the research or literature. | 2 | 2 |  |  |
| Defines the variables for a quantitative study or the phenomena for a qualitative study from the research or literature. | 2 | 2 |  |  |
| Definitions are supported with citations from scholarly sources. | 2 | 2 |  |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |



## Assumptions, Limitations, Delimitations

Assumptions. Within the study, there are various assumptions. Previous researchers explain that the assumption was gathered of the prior researcher based on the limited evidence gathered that leads to a fair assumption in the research, unwarranted assumptions about people in the military and military service, asked insensitive questions about veterans (Ahren et al., 2015).

1. It is assumed that during this process, the people that are included in this study to show the relevance of the study, this sets to address the problem statement of female veterans and retirees, which is not knowing how female veteran's lives are transformed after serving in the military and how this will influence transition process. The participants in a phenomenological study are expected to explain their real-life experience (Bryne, 2001). This study will exclude participants that are unfamiliar with the process of transitioning to civilian life.

2. It is assumed that the participants will answer the questions to the best their ability based on their real-life experience.

3. It is assumed that the data collected and gathered from the in-depth interviews will show the similarities and differences in the responses of the female veterans. This assumption is put in place to prevent biases from interfering withholding to the subject descriptions in the interpretative analysis (Maiocco & Smith, 2016).

Limitations. Limitations are the border and boundaries of the study that is out of the researcher control. The limitation is a notable weakness in the study has exceeded out of the control of the researcher. There has been some limitation discovered in this study, which is common when conducting research or gathers fact about a specific study. The strengths and limitations of Qualitative research focusing on its shortcomings and how Quantitative analysis can overcome these shortcomings (Atieno, 2009). By, using a sample of convenience, instead of utilizing the random sample, the result of the study will not be geared to hand a larger population. Maicoo and Smith (2016) recognized that research is limited in scope due to several factors. The study is not geared to hand one set test; the study has developed vital detail that has been strategically placing within the study to gather the right information, which will be used to support the study Another limitation factor to considers time. Time is a factor that will alter the result of the study place a considerable limitation on the result gathered from the data. Two limitations of the study would be the small sample size and the location of the study since the study will only include ten female veterans in one region (i.e., Alaska). The limitations of the study explain why the only a small portion of the study may have experienced any of these issues and through the female experience will provide more information on the current gap in the literature. A detail explanation must be put into place to explain the process in how to deal with the current limitations of this study that has come to light in this study so that it cannot interfere or disrupt the current outcome of this study.

**Delimitations**. The delimitation is the boundaries of the study that have been created by the researcher. The delimitations are setback and hurdles created by researchers; these delimiting factors are the result of the research questions, the theory, and methodology which is set to view the current theoretical perspectives that will be adapted to support the ongoing investigation of the population. The delimitation process is choices that are a problem which is a direct indicator that they are tied to a series of other problem or rejection to support the study. This idea is to allow the purpose statement to explains the fact and the intent of the study in a transparent manner to recommend to the baseline ideas of the study and set a clear expectation of the study that will not be cover during this process. The delimitations of this study will illustrate the criteria based on the participants that will enroll in this current study based on the geographic region coved in this study such as female veterans in Alaska. The delimitations factors that take place in the study are required items constant control as the researchers, to explain the step-by-step instruction that provides insight into the study based on size and demographics. The philosophical framework will highlight the delimitation of the study. When developing the context for this study will also help explain the support details to study the methodology. By, selecting the method and design in the study also set a borderline on what the findings can establish. The delimitations factor in this study limited the about of participation of female veterans because of the size of the study and the number of female veterans that have experienced any of this issue here in the state of Alaska. Most of the literature related to understanding a woman’s experience (Baechtold & De Sawal, 2009).

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Assumptions, Limitations, and Delimitations**  (Minimum three to four paragraphs) | | | | |
| Defines the terms: assumptions, limitations, assumption, limitation, and delimitations at the beginning of each section. | 2 | 2 |  |  |
| States the assumptions being accepted for the study (methodological, theoretical, and topic-specific).  Provides a rationale for each assumption. | 2 | 2 |  |  |
| Identifies limitations of the research method, design sampling strategy, data collection approach, instruments, and data analysis.  Provides a rationale for each limitation.  Discusses associated consequences for the generalizability and applicability of the findings. | 2 | 2 |  |  |
| Identifies delimitations of the research design and associated consequences for the generalizability and applicability of the findings.  Provides a rationale for each delimitation. | 2 | 2 |  |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Summary and Organization of the Remainder of the Study

In today military environment, the cooperation of male and female veterans is essential for working toward the common goal of protecting and defending the constitutes. The female veterans present have increased their contribution to the battlefield in recent years. Since September 11, 2001, female veterans have significantly increased their engagement in combat-related issues. Many of these veterans are struggling with the process of transitioning back into society. With a more active role in combat, there has been an increase in mental and physical issues for female veterans that are impacting their ability to have a successful transition. Post Traumatic Stress Disorder (PTSD), affecting their ability to transition back into society properly (Dichter et al., 2017; Roger et al., 2017; Sairsingh et al., 2018). Thus, making their transition process quite tricky and challenging to handle the current situation at hand.

The service commitment is complete; these veterans are suffering from challenges and setbacks that will hinder their progress in returning to society. There is a growing concern in connection to these issues have on the long-term effects affecting both the mental and physical conditions of the military veterans. According to Ahren et al. (2015), many veterans are experiencing challenging conditions and traumatic events while in the military. The body of knowledge explains the challenges many female veterans suffer during their time in the military. Previous researchers explained how specific issues that have taken place within the military compromised nearly 12% of female veterans after the service members deployed during the timeframe of Operation Enduring Freedom (OEF), and Operation Iraqi Freedom (OIF) (Sairsingh et al., 2018). Various issues related to combat exposure alters the transitioning process.

The purpose of this qualitative descriptive study explains how these issues are impacting their process of transition. According to Painter et al., (2018); Bean-Mayberry et al., (2011), women veterans are the fastest growing utilizers of Veteran Administration (VA) care. The qualitative study will provide the best recalling memories and experience of their lives to explain the issues. The in-depth interviews offer the best course of action of data collection from the ten female veterans who are experiencing problems after 9/11. To ensure the validation process of the support and record the events, transcripts of each participant will tell their own real-life story to support the study. Chapter 2 a synthesis of the literature based on the response from the female veterans and similar research. Chapter 3 explains the methodology of the study and the design and the implementation of this study. Chapter 4 describes the findings and other information gathered through visual and written results. Chapter 5 is the interpretation of the conclusions that relate to the current body knowledge. I have expected to have all the proposal review by November 6, 2018, IRB completed December 1, 2018, and all the data collection done by December 30, 2018, and I expected to have my dissertation done by April 30, 2019.

| **Criterion**\*  **(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Chapter 1 Summary and Organization of the remainder of the study**  (Minimum one to two pages) | | | | |
| Summarizes key points presented in Chapter 1. | 2 | 2 |  |  |
| Provides citations from scholarly sources to support key points. | 2 | 2 |  |  |
| Describes the remaining Chapters and provides a transition discussion to Chapter 2. For proposal only, a timeline for completing the research and dissertation is provided. | 2 | 2 |  |  |
| The chapter is correctly formatted to dissertation template using the *Word Style Tool* and APA standards. Writing is free of mechanical errors. | 2 | 2 |  |  |
| All research presented in the chapter is scholarly, topic-related, and obtained from highly respected academic, professional, sources. In-text citations are accurate, correctly cited, and included in the reference page according to APA standards. | 2 | 2 |  |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

# Chapter 2: Literature Review



















# Introduction to the Chapter and Background of the Problem

Over the year's there has been an increase in the studies regarding veterans and some of the issues they faced during their time in the service which has impacted their ability to have a successful transition out of the military. However, there has not been enough evidence to support the current literature that ties these issues together to show how anyone symptom influences the transition process for female veterans. First, this review will explain the challenges that female veterans are experiencing while serving in combat-related environments, which have possibly altered their life after their time in the military is over. Secondly, there will be a close examination of the current theoretical foundation used in this study to show how the long-term effects of military service effect female veterans through the Schlossberg theory transition and the 4'S model (2011) and role theory model (Blanter, 1991). Each of these models will be used to explain the various roles of the female veterans both on and off duty, to help support and identify the theoretical foundation, to address the research questions and the data collection process for the current study. Thirdly, part of the review will be put in place to examine the contemporary themes that have appeared from the existing literature to explain the issues that female veterans are experiencing before they begin their transition process back into society. The developing themes involve a significant amount of trauma which would impact the mental capacity of these female veterans influencing their ability to adapt outside the military environment. The primary focal point of this study is geared toward explaining the effect that Post Traumatic Stress Disorder (PTSD) has on female veterans, and the additional traits that will be used in the study will be sub-topic, which will help support the study is Military Sexual Trauma (MST), Intimate Partner Violence (IPV), and Substance Use Disorder (SUD). All of these issues have a different impact on how these issues influence the female veteran’s ability to adapt to change as they begin the process to reintegrate back into society. Lastly, this chapter will end with an overall summary or conclusion of the literature that is surrounding the current phenomenon which is the ongoing issues that are influencing these female veterans as they begin their transition process back into society.

In the current study, there is a significant amount of data within current publications surrounding female veterans', which is altering lives after they transition out of the military. The bulk of the current information and literature was introduced from earlier studies and various scholarly and scientific researching databases. Most of the current quires where captured from the most recent publication within the suggested timeframe of the past five years. All the searches pinpointed toward the issues that female veterans are experiencing that influencing their life after their service and during their transition process. In addition to the overall impact, the military has on female veterans’ lives that is leading to long-term setback after leaving the service. The primary focus of the researcher will be to use the various alert techniques to process the step by step procedures of the recently published peer-review article by EBSCOhost and Google Scholar by setting parameters using keywords based on female veteran's experience. The searches were based on a qualitative study that will include keywords that focuses on the current study, words such as female veterans, military veterans, women veterans, military sexual trauma, post-traumatic stress disorder, intimate partner violence, substance use disorder, transition theory, 4'S model and role theory.

The current influx of female veterans within the past decade has raised attention to current literature to assist and reduce the current gap where the concern of the female veterans who have experience or suffered in recent encounters. The developing growth of the current literature suggests that service members have severe emotional distress or trauma after sexual assault victimization (Rosellini et al. 2018). Thus, further indicating the current gap in the literature explaining the ordeal female veterans face before transitioning back into society to take on typical roles outside the military. The purpose of this qualitative descriptive qualitative study will explain and explore how female veteran's lives are being influenced by their lived experiences in the military which altered their transition phase back into society. It is believed that female veterans from all branches of service struggle with some form of PTSD, which is impacting their ability to have a successful transition process back into society, because of what has happened to them before leaving the service

In recent years female veterans are making up a more significant percentage of the United States armed forces; this shift has developed dramatically within the past two decades. In 1973, women made up only 2.5 percent of the total active-duty force, but by 2005 the number had increased fourfold, bringing the total to approximately 14 percent (Baechtold & De Sawal 2009; U.S. Department of Veterans Affairs, 2007). Today’s female veterans are not sitting behind a desk or only participating in war to provide medical support, and today female veterans serve in the same capacity as the male veterans in a combat zone. Female veterans are entering the military to serve in the same capacity as male veterans, in addition to that their area also expects to adopt the same roles as male veterans and deal with the same issues that come along with serving the country. This increased responsibility has also increased their chance of being exposed to stressors that can lead to PTSD down the line that has the capability of impacts their transition process. Rosellni et al. (2018), explains how earlier qualitative researchers have shown that females are more likely to join the military and serve their country than their male counterparts for various reasons.

On the other end of the spectrum are some of the same reasons why women decide to join the military will also, be some of the same reasons why they decide to depart the military. The honor of being assigned to a unit that supports the frontline battle has a significant impact on female veterans lives, which is causing them to walk away from the service with issues associated with mental and physical issues such as PTSD, which can lead to or stressors such as sexual assault, gender issues, and identity issues which all have some significant influences on these female veterans' abilities to have a successful transition process. The conflict of war and trauma has a unique way of impacting individuals differently especially when it comes with such a prohibitive cost in the long run for many of these female veterans (Herman, 1997; Westwood et al.,2010). The human costs are significantly higher for military personnel, and their families because they are at substantial risk of developing PTSD and other issues that may impact their family’s dynamics, but also creates severe psychiatric disorders that led can to health and social problems. The impact of these issues is serious and shows up almost simultaneous when the female veterans return home. Thus, requiring a more precise understanding of the real-life experiences female veterans are subjected to during their time in the military that carries over into their personal lives, impacting their ability to transition appropriately out of the military.

The outcome of trauma both mental and physical has led to some troubling ordeals for many female veterans. The veteran female population is in dire need of an effective process that will aid them in their transition process after experiencing the various stage of PSTD that was developed within the military. It is vital to develop a clearer understanding of military culture to help them with the transition process back into society (Reppert et al., 2014). These factors of combat-related issues and PTSD all have different side effects on female veterans, which pose a different threat in their lives. Putting them in the category of overcoming barriers to feel accepted by society. There is still further research that needs to take place to develop a comprehensive understanding and snapshot of female veterans and then they are issues experiencing, which is are affecting their ability to have a successful transition back into society.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **CHAPTER 2 INTRODUCTION (TO THE CHAPTER) AND BACKGROUND (TO THE PROBLEM)**  (Minimum two to three pages) | | | | |
| **Introduction**: Provides an orienting paragraph, so the reader knows what the literature review will address. | 2 | 2 | X |  |
| **Introduction**: Describes how the chapter will be organized (including the specific sections and subsections). | 2 | 2 | X |  |
| **Introduction:** Describes how the literature was surveyed so the reader can evaluate the thoroughness of the review. This includes search terms and databases used. | 2 | 2 | X |  |
| **Background:** Discusses how the problem has evolved historically into its current form. | 2 | 2 | X |  |
| **Background**: Describes the “gap” or “need” defined in the current literature and how it leads to the creation of the topic and problem statement for the study. Note: This section should be a significant expansion on the Background to the Problem section in Chapter 1. | 2 | 2 | X |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 | X |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Identification of the Gap

Since, September 11, 2001, more women have entered the military at an alarming rate, which has increased the overall strength of the military and its ability to win wars, conflicts, and battles. However, with the considerable increase of female veterans present now than in recent years has subjected them to becoming victims of certain outliners brought on because of the stressor of war and combat. Thus, placing them in a predicament of being a victim to specific combat-related issues that lead to the mental and physical setbacks that have been connected to PTSD, which is creating a significant barrier on their lives and placing a strain on their transition process back into society. Now female veterans have the capability of serving in every role within the military spectrum, thus eliminating the gender bias mindset. Nevertheless, this increased responsibility comes with a hefty price and burden. Many of these female veteran’s struggle with adapting a healthy life after serving. Putting them and their family at risk of being a victim of mental and physical setbacks. The statistical data shows that many female veterans are at risk of suffering a mental or physical setback that will derail their transition back into the civilian world. The study has shown that US combat Veterans, the lifetime prevalence of PTSD has been found to range from 6% to 31%, with a current prevalence of 2%–17% (Ketchesonet al., 2018). The imprint of war and combat-related issues are sitting with female veterans much longer than their male counterparts. Resulting in female veterans experiencing higher rates of divorce, homelessness, and are more likely to be single parents in comparison to their male counterparts (Mulhall, 2009; Reppert et al., 2014(Zinzow et al., 2007).

A gap was determined after a careful review of the literature which is there is an unknown element of PTSD, which is influencing female veterans’ lives after they begin the transition process back into society. The developing issues of PTSD have made it quite difficult for these female veterans to transition back into home as well as to their family and friends without re-living some of the events caused by PTSD (Mulhall, 2009). Although female veterans are still one of the steadiest growing segments within the military structure, there is little to no evidence of supporting their transition process after being exposed to an issue that led to PTSD issues, which is affecting their transition process back into society. Like earlier wars and conflicts, female veterans are finding it hard to reconnect with society after completing their service obligation. The most recent available research has exposed the notable gap in the literature that has led to the development of the problem statement for this study. Not being able to cope or adjust back into society has led to some significant many life-altering events such as unemployment due to the setbacks developed inside the military. According to Duggan & Jurgens, 2007; Reppert et al., 2014) the unemployment rate for female veterans 8.2% is higher in comparison to the rate for male veterans at 4.7%. The female veteran might be the fastest growing segment in the active duty department as well as the fastest growing within the veteran community. Meanwhile, there is no clear guideline to address their needs and issues that impact their ability to have a successful transition.

According to Blias et al. (2018), further explains how there are so many consistent challenges within the female veteran community that does not get addressed because of the difference in culture environments and real-life experience for these female veterans. Female veterans consume many roles inside and outside the military making them have a multi-layered life in every manner in both a personal and professional setting, which is still not properly geared toward addressing and answering the current issues at hand. Thus, resulting in the assumption that female veterans do not have the self-efficacy about their ability to comprise a successful career outside of the military. The ongoing issue within the literature shows all forms of the gap in the transition process for female veterans concerning the effects that PTSD has on the female veteran’s community, which is resulting into some unfavorable outcomes for these female veterans. The statistical evidence has shown a significant downshift with the number of surrounding less fortunate female veterans has increased in recent years (Baechtold & De Sawal, 2009; Reppert et al., 2014). While the role of female veterans has evolved so, have the issues that they experience while in service.

The literature explains the current gap in this present study, which shows the significant impact these issues have on these female veterans and the problems they are faced with as they are trying to return to back to a normal life after dealing with PTSD which has been connected to their military career. Returning to a normal life is quite a challenge for these female veterans. The impact of war has a different overall effect on their life because these incidents sometimes carry over into their life after the military. The harsh reality is these mental and physical issues are staying with these veterans for a lifetime if they are not adequately treated. Lack of evidence in the current literature is another sign of how female veterans have often been overlooked due to the masculinity of the military. Previous qualitative studies on female veterans did not address some of the present issues such as PTSD, which is hindering the transition process for female veterans. According to Maiocco and Smith (2016), the mental health issues are a growing concern amongst female veterans’ community and the presents themes are becoming a growing concern amongst this veteran’s community. PTSD is a severe setback for female veterans, which will be shown in the current body of knowledge. The notable gap is set to show the real-life experience, and address some of these issues that are hindering these female veterans and provide some recommendations to this study that will help expand on the current body of knowledge, in how to properly reintegrate as well as transitions these female veterans back into the society. Exploring all of the needed research to provide a clearer understanding to expand on the current body of knowledge to help bridge the gap in the existing research that is often overlooking these issue that these female veterans are experiencing. Research statistics explicitly indicate the chronic prevalence of the issue of PTSD in female veterans that ultimately appears in many different traumatic forms. It is reported that there are almost 81% to 93% of female veterans who suffer from different forms of trauma that look in their operations and approach of lifestyle. Adult sexual assault is another major concern indicating through the statistics referring to the domain of 30% to 45% (Dobie et al., 2004). The increasing rate of the different forms of traumatic events demands to critically and carefully observe the entire phenomenon concerning the related concerns.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **CHAPTER 2: IDENTIFICATION OF THE GAP**  (Minimum two pages) | | | | |
| Summarizes the “societal” or big problem. Highlights what has been discovered and what still needs to be discovered related to the topic from literature or research dated within the last five years. | 2 | 2 | X |  |
| Discusses and synthesizes the evolution of the research on the problem. Specifically:   * Identifies the key sources used as the basis for the gap * Identifies trends in research and literature. * Identifies how the research focus has changed over the recent past (five years). * Discusses key findings that emerged from recent studies. * Discusses limitations or prior research and define future research needs. | 2 | 2 | X |  |
| From the findings of research studies and evolution of recent literature on the topic, defines the problem statement for the study. | 2 | 2 | X |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Theoretical Foundations and Conceptual Framework

The researcher is set to explore all options and provide a more precise understanding how the female veterans are suffering from PTSD and explain their real-life events as they are trying to begin a new chapter in their lives as they transition back into society. Early researchers and other studies only targeted specific research questions to capture the correct theoretical framework to describe the real-life experience of these female veterans. Green (2014), points out that a theoretical foundation is a tool that can be used to supply clarity and give direction to this study or that can be viewed as an outcome. The theoretical foundation in this study is set to serve as a building block to support the foundation to address the current problems within the literature, by using the correct research approaches in determining which models and theories will be appropriate to address the issues in this study, in addition to the transition process.

Female veterans will have the ability to adopt any specific skill set or knowledge-based agenda developed within the military. However, this process is often overlooked, because of their roles, gender, and status within the military. Many leaders are now female veterans, where they hold a prominent leadership role within their organizational setting; the demoralized factor is that many of these leaders will or have experienced some form of real-life issues such as PTSD, which will affect their lives as well as their military career. While the number of the female veterans continues to increase, many of these female veterans are still experiencing challenges and issues that are disturbing their ability to capitalize on their full potential as civilians and affecting their transition process out of the military. With the advancement of knowledge and research has yet to prepare these female veterans to face some of the interpersonal stresses of being exposed to more combat-related issues of war, which is crippling their process of having a successful life after the military (Fox et al., 2016).

Serving in the military has the capability of opening many doors for female veterans from all branches of services, which is a direct reflection on their disciple and training developed from their time in service. However, many of these female veterans are still a large number of these veterans struggling to find employment in the civilian sector, because of their education level, lack of training, versatile, and some the issues developed in the military. These issues can be considered as game changers for many of these veterans, because of the problems with PTSD and other elements that may represent an additional hurdle to overcome which is a difficult task to tackle resulting into some unfavorable outcome for these veterans. According to Mobbs & Bonanno (2018), female veterans are experiencing issues at such a prominent level, which interferes with their transition process back into society. The transition process is not easy by any means for these female veterans because of the mental and physical hurdles they must overcome to feel accepted by society again. There have been some difficulties with their experienced when they are trying to reconnect with society, as well as gain their identity back, which has been taken away from them because of some of the issues that have taken place in the military. The study is set to enhance the body of work to show some of the challenges and problems that are creating a certain level of concerns, which has made the transition process quite challenging for these female veterans.

By, taking that leap of faith and leaving the military is never an easy task nor decision to make for these female veterans because of the doubt and uncertainty of their future. Sometimes, their story and outcome are altered because of real-life issues or events developed in the military which is having a more significant impact on their progress to have a successful life. Although the transition process is complicated and difficult for these female veterans, the reality is that these numbers will continually grow based on the needs of the military. The constant engagement of war and other conflict has developed some serious mental issues such as PTSD which is undoubtedly taking place during their time in service. Whereas, these issues of PTSD are causing some significant drawbacks within these female veterans’ lives, making it quite difficult to get their lives back on track. The transition process is not an easy task to tackle without the proper aid; various factors influence the individual’s behavior, which is impacting their ability to manage the transition process properly (Griffin & Gilbert, 2015). Besides the hesitation towards the transition process, female veterans are experiencing different emotional symptoms, which is altering their ability to reconnect with society because of the mental and physical issues they are suffering due to the stressors of the military. Since, the conflict of wars brings on various side-effects within female veterans’ community, which can destroy their sense of purpose, as well as their will and their confidence in their ability to be regaining a normal life again. The various setbacks and dilemmas that transpire within the female veteran’s community, the past models, and theories from previous studies were also set to examine the veteran female population. However, with Schlossberg’s (2011) transition theory and the 4’S model, as well as Blanter’s (1991) role theory are set to align the current study with previous studies to capture the purpose of this study, therefore explaining and exploring a clearer understating in how female veterans are describing their real-life experience and how they are impacting their ability to have a successful transition back into society.

**Schlossberg’s transition and the 4’S model**. All the current literature that involves transition process uses the expertise of Schlossberg’s to expand on the existing body of knowledge regarding adults’ transitions from various facets in life. The transition process is where a series of events that comes together to supply a framework that leads toward a convenient outlet or strategy that can determine the correct course of action in helping the basic need and ideas that connects the transition process. Schlossberg and other colleagues have viewed the transition process as an event or non-event that is the outcome that results in or led to change (Goldman & Anderson, 2012). The transition process can be a scary thought for most uniform veterans, especially female veterans because of the unknown factors that may lay in wait for them once they leave the service. The transition process is a challenging task to conquer because everyone experience leads to different results and experiences regarding the transition process. Thus, making the transition process unpredictable for these female veterans because of some the issues they must face after leaving the service. Schlossberg's approach towards the transition process and the handling of individual behavior present quite a challenge. At times is processed can be tough to tackle because the transition process does not have a clear step-by-step process that can account for all of the previous issues, develop by these female veterans that need to be addressed before transition out of the service. The value of the 4-S model which is situation, self, social, and strategies will explain the basic identity of transitioning. The essential parts of the 4’S model will pave the way in addressing the current issue of PTSD and how it impacts these female veterans lives as they try to transition out of the military and re-enter society. Schlossberg (2009) model is set to instill the value of hope in the veteran and provide them a set guideline that will increase their potential, provide options, and develop strategies that allow them to focus as well as being able to cope with change. The average female veterans’ career in the service will experience some form of change that will result into the transition phase, which may cause some doubt in some case, however, through the 4-S model will assist them in this process. The issues that transpired in the military such as PTSD and other combat-related elements are unexpected events that may alter their outcome in life which will influence their transition process. Anderson et al. (2014), confirmed that female veterans need some help, which will focus on both the practical and psychological aspects of their lives to support their basic ideas which will lead to a successful transition process back into society.

Coping is not normal nor natural traits acquired by female veterans. The essential part of the transition process is requiring the necessary tools that will assist them as they being to exit the service. Every individual needs a different approach towards the transition process because each person brings new experiences, where the results will vary based on their overall assessment during their transition process. Female veteran’s struggle with the essential details that allows them to cope with society and reconnect with others because of some of the issues struggle with after leaving the military. Anderson et al. (2014), goals are to enlighten the process, which will show how the transition process will focus on the coping mechanism of having a successful life through the Scholssberg theory and the 4'S model. It looks in various ways to encourage ability to be adept and to provide the necessary strength in assisting the female veterans with their transition process. A coping mechanism is a tool for mitigating the doubt that comes with change. The fundamental principle is a direct reflection of the 4-S model and how it suppose to work to incorporate change into their lives, so that they can strive to have a favorable outcome, despite the many side effect of PTSD that has been developed within the service.

The 4-S model is the focal point for these individuals because it allows the basic needs of the individual to be highlighted to explain their story. The foundational development can lead to a successful transition story instead of the opposite spectrum of a successful outcome. A successful transition process will depend on the veterans and how they handle the issues connected to PTSD. Further research concludes that Schlossberg and her colleagues discovered three additional transition barriers, and those are anticipated, not anticipated, and nonevent (DiRamio et al., 2008). The developer of this method had led to a development which touches on one of the researcher's questions regarding: How do female veterans describe the impact that PTSD has on their transition from the military service? The coping skills require a delicate approach when it comes to mental and physical barriers created by unforeseen events such as PTSD.

Developing a strategy that directly relates to coping responses in the Schlossberg transition model is one of the key elements in dealing with critical issues or concerns that take place in the military (Anderson et al., 2014). Assessing the situation is a crucial component for female veterans that are returning home and trying to adjust back into a routine in life before and after the service. However, there are some transitional issues that veterans are being brought home with them as they exist in the military. These issues are affecting their character and ability to accept changes and developed into their new roles outside of the military. The transition role of female veterans is about letting go of past issues of oneself, cutting ties with former positions, and developing a new identity and learning new characters; however, this cannot transpire until they address the growing concerns of PTSD.

**Roles Theory**. A vital component of adjusting to a new role for female veterans is to overcome past issues of PTSD and accept their new position, according to plan; the real-life experience is a critical part in who they are as a person. The long-term effects that have transpired in the military can impact the overall mental and physical state of these female veterans, which is affecting their roles on the outside of the military. Thus, placing a burden on the overall health and behavior of these female veterans as they take on new positions. Role theory has been known as an efficient way of describing the various part of the female veterans identify the multiple functions they take on during their time in the service by explaining how these different roles are connected to a much more significant issues in the with the growing fields of veterans which is impacting their psychology, social psychology, sociology, organization behavior, and human resource management (Yau & Han Jan 2010). The role theory for female veterans is about adapting to change in their new roles and developed into previous parts and work to establish a new identity instead of living with issues such as PTSD and work through the setbacks and challenges that have been designed from the military. Female veteran's status is robust to regain, after suffering a mental or physical setback, which is impacting their character and role, thus, affecting their social skills and behavior which makes it difficult to transition back into society.

The role of the military has always assumed the perception of being masculine, within the past two decades that role has shifted to their counterpart, as female veterans have taken on more responsibility and positions in the military. Female veterans will consume multiple roles inside and outside the military, which has a significant impact on their decision-making process. The researchers will acknowledge the surrounding factors, which will impact their identity and roles as they begin the transition process. Miles & Petty (1975) suggest that role theory requirements relate to the organizational behavior based on the level of the employee, through the instrumentation differences process, and which may vary based on the probable differences within the corporate design. The military is a unique organization that requires an exceptional individual to meet those demands and roles of the military.

The study is set to extend past the body of knowledge to explain how these roles, will affect these female veterans' lives, which is a direct alignment with the research question of How do female veterans describe the impact that PTSD has on their transition from the military service? The real-life experience will explain what these female veterans have considered being an important issue in their lives that they are struggling with and the various roles they consume which are influencing their beliefs and their decision-making process. The various roles these female veterans take on which has created a gap between themselves, their families, the military, as well as their military families, have begun to be to addresses to devise a correct course of action to tackle these issues of PTSD, and dealing with other issues of combat-related exposure (Canfield & Weiss, 2015). The Schlossberg's (2014) transition theory and the 4’S model can be added to provide clarity in the direction that will generate a response to the study and aligned the survey to match the research question to show the notable gap in the literature surrounding the transition process for female veterans after experiencing issues of PTSD.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **theoretical foundations and conceptual framework**  (Minimum two to three pages) | | | | |
| Identifies a model(s) or theory(ies) from seminal source(s) that provide a reasonable conceptual framework or theoretical foundation to use in developing the research questions, identifying variables/phenomena, and selecting data collection instruments. | 2 | 2 | X |  |
| Cites the appropriate seminal source(s) for each theory or model. | 2 | 2 | X |  |
| Includes a cogent discussion/synthesis of the theory or model and justifies the theoretical foundation/framework as relevant to the study. Connects the study directly to the theory and describes how the study will add or extend the theory or model.  **Quantitative Studies:** Have one theory for each variable. For example, use the model the survey is based on. Use the theory or model upon which the instrument is based.  Distinguishes between the model/theories being used for research questions and data collection versus the background models and theories generically relevant to the study. | 2 | 2 | X |  |
| Builds a logical argument of how the research questions are developed based on the theoretical foundation for the study. | 2 | 2 | X |  |
| Reflects an understanding of the foundational, historical, research relevant to the theoretical foundation/framework. | 2 | 2 | X |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 | X |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Review of the Literature

During the earliest wars, females were responsible for tasks such as cooking and medical services. There were nursing corps that were created for these services. They were not allowed to become part of the armed forces. Then in 1948, under theWomen’s Armed Services Integration Act, women were given the official status in the military. They were then allowed to become part of all branches of military service as well as receive veterans. In 1980, Veterans’ Affairs centers formally started integrating gender-specific services. Due to this profession, these female veterans have different issues. With the increased number of women in the military, there is also an increase in their level of stress due to the nature of their job. During the wars, they become part of both combat arms units and noncombat missions (Huynh-Hohnbaum et al., 2003). They are thus also required to attack as frontline units. There is a bulk of research related to these veterans, and the focus had been on PTSD. It can be defined as a mental disorder as a result of some traumatic event leading to reexperiencing of the occasion, or memories. This can be in the form of avoidance of memories, insomnia as well as frighten response. Female veterans suffer from PTSD that is linked with different mental health difficulties such as poor psychiatric, substance abuse and comorbid psychiatric diagnosis (Zinzow et al., 2007). These also suffer from nightmares, sleep disturbances, worse physical health as well as physical limitations. Research has also conducted to check the reoccurrence of different diseases (Huynh-Hohnbaum et al., 2003).

The phenomenon of PTSD influence the lives of female veterans in many different aspects. It is worthy of mentioning that different researchers consider different paradigms related to the negative impact of PTSD on the living approach of female veterans. Consideration of these various prospects is crucial to identify the fundamental issues and offer better intervention plans to deal with the problem. Dobie et al., (2004) critically identify different forms of health concerns that ultimately leads to different functional impairment in the case of female veterans. The health concerns explained in the way of posttraumatic stress disorder. Researchers of this study indicate that the approach of self-reported health problems and different impairment firmly and positively associated with the facet of PTSD. It is stated that female veterans as a targeted population group recognized as the group who is immensely exposed to the high level of trauma. The research work conducted by Dobie et al., (2004) also focused to critically assess other psychological concerns closely associated with the primary health issue in the form of PTSD. Common physical symptoms were also identified and evaluated under the domains of stomach pain, back pain, joint pain, dizziness, etc. Consideration of these symptoms sometimes associated with other psychological concerns for female veterans. Proper identification of the general association between PTSD and other different psychological concerns is essential to make better inferences about the magnitude of the health concerns and functional impairment in the case of females working as veterans. The issue of drug abuse is also closely related to the paradigm of the psychological concerns for female veterans. Researchers come up with the idea that sometimes it becomes difficult for the female veterans to deal with the physical and psychological exertion that ultimately appears in the form of their disbalance life approach outside their responsibilities in the military (Dobie et al., 2004).

High prevalence of different symptoms of PTSD in female veterans ultimately negatively affect their approach of functioning in both forms of professional and personal lives. This particular phenomenon can observe in many different styles refer to the overall functioning of female veterans. Various symptoms of PTSD ultimately lead to other health concerns that affect the performance level of females as veterans.

A valid approach to examine the literature has indicated that female military veterans are suffering from issues such as PTSD, which is hindering their ability to transition back into society. The transition process for many veterans is a complex and challenging ordeal that requires unique processes that can lead to a successful outcome for these female veterans. A veteran that suffers from PTSD will show a significant sign of emotional distress, involving often relatively passive feelings of sadness and frustration (Murphy et al., 2017). The researchers’ review scholarly articles comprised of both qualitative and quantitative studies, resulting in emerging trends, issues, and themes that led to this study. According to Ketcheson et al. (2018), the military population is at a much higher risk than the civilian population for developing mental health conditions such as PTSD. The developing idea that included problems arising after transitioning back into society, unemployment, overcoming challenges, and issues related to PTSD and other elements such as MST, IPV, and SUD are some of the alarming issues that are concerning and interfering in these female veterans lives as they try to develop into their new roles and identity outside the military.

The literature will explain the constant challenges that female veterans are experiencing during and after returning home from combat and beginning the process to transition back into society. Today's military is a volunteer force, so the demand is different from the earlier decades, resulting in a different outcome for these female veterans, experience as a much different result than before. The reality is that war has become a more significant event than before which has an entirely different outcome for female veterans than male veterans. The myriad of studies and literature have arrived at the same conclusion that mental and physical issues developed from PTSD take place in the military, placing these veterans at a disadvantage as they try to re-establish an identity outside of the military. PTSD is one of the issues amongst military personnel and veterans and emphasizes the need for conscientious screening for several commonly associated conditions (Ketcheson et al., 2018). By developing techniques to examine the various issues of PTSD and concerns to capture their real-life experience.

To raise awareness and acknowledge that there is a pressing issue of concerns amongst the veteran female community in regards to the effects of PTSD. According to Verlezza (2015), PTSD has become the signature wound of recent conflicts as soldiers returning from Afghanistan and Iraq has faced many reintegration challenges. Previous researchers have concluded that are some internal and external problems within the female veterans' community, which has developed over some time which is impacting their transition out the military. Lastly, setback by cause PTSD has impacted these female veterans to such a point where they are struggling to regain their lives after the mental and physical setback caused by PTSD, which they have been to subjected while serving their country. According to Morin (2011), veterans have a challenging time readjusting to civilian life while others make the transition with little or no difficulty. Through the real-life experience has shown to be the likely course of action for these female veterans to share their constant battle with PTSD, and create a haven that focuses on beginning the healing process for these veterans.

Reestablishing the female veteran’s identity is the primary focus of this research. Female veteran's social status is one of the critical issues that are to begin restoring. In addition to recounting their life after experiencing PTSD and though the participants of other veterans will allow this study to be a direct reflection on how the reintegration process should transpire for these female veterans. There are several unique challenges to overcome when it comes to transitioning and adjusting to the back into civilian life because it is never easy to overcome barrier and pitfalls that are related to PTSD, which is hindering the transition process for these veterans as they seek employment outside of the military (Gillums, 2016). The current literature review will determine as well as align the justification accordingly to meet the current methodology and instrumentation utilized in this study

The team gathered will represent the theoretical foundation for the content that is developed from the current literature review to discuss the issues of PTSD and show how they are impacting the female veterans' community and adopt a process that leads to a successful transition back into society. A female veteran that has a recent transition or veterans that are currently serving were also found to be at higher risk for PTSD, depression, or panic disorder (Reberia, Grootendost, & Coyte, 2017). The direct influence that combat experiences on female veterans have been tied to the various measures of combat exposure that is developed during deployment process has previously been demonstrated to be a consistent ingredient in these veterans’ lives that correlated with PTSD.

**The transition back into society**. Since September 11, 2001 women veterans have become the largest growing segment of the military. There has never been an era throughout history where there have been so many females joining the army and later becoming veterans, which make it quite tough to compare this current century of veterans to the previous era of the history for the military. The Transition Assistance Program (TAP) is required for all existing military personnel and currently focuses on the practical elements of obtaining work (Keeling, 2018). Nonetheless, the TAP should concentrate on the needed prerequisite in providing the further data regarding the truths about the cultural variances of civilian society, the importance of finding meaning, and the importance of getting in contact with other veterans. The conversion from military service to civilian life requires navigation of a series of modifications, such as changing roles, reference groups, friendship networks, and individuality (Keeling, 2018).

The challenges that many female veterans are experiencing now are different from what female veterans 40 years ago where experience, because of the direct involvement in combat operations has increased over time. The other literature suggests or implies that there will be a significant increase of veterans trying to transition back into society in the next upcoming decade. However, they are suffering from stresses such as PTSD, which the main mental setback for these veterans or stresses such as MST, IPV, and SUD, which have all been directly connected to their time in the military. The transition from military to civilian life can be difficult for a female veteran (Hawkins & Crowe, 2018).

Transition to civilian life can be a hard adaptation for some individuals, especially those experiencing psychological or physical health issues (Hachery et al., 2016). The veterans that suffer the most is the one that appears to be having a problem or difficulty with the transition experiences where they feel the most socially isolated, connect with other veterans helps. However, reintegration typically presents some challenges for military families with a standard set of tensions that can bear on their physical, emotional, cognitive, and societal areas (Marek & Moore, 2015). The procedure of having any success at the transition experiences is somewhat complicated, and ensure any degree of success in transition process involves a multidisciplinary method to address potential risk and protective components that come with the modulation procedure. According to Hachery et al. (2016), since the transition from military to civilian life is challenging for some, individual resources, such as a sense of control, may help veterans to navigate through this potentially stressful time.

The research reports suggest that more than 1.7 million of the 2.6 million soldiers deployed to Iraq and Afghanistan have transitioned back into social life with a possibility of an additional one million is expected transition as well within the next five years (Mobbs & Bonanno, 2018; Zoli, Maury, & Fay, 2015). The review of the current literature will explain the emerging trends that are connecting these current issues of PTSD and other elements to the present concerns of the female veteran community. According to Keeling (2018), military culture is central to transition because adapting to civilian life requires the evolution of new cultural understanding and accomplishments. Female veterans who serve now will be faced with a greater risk of experiencing PTSD and other element developed in this current era than in previous years. The substantial difference of the war and how they are conducted through the various war tactics is the resulting factors in how the thing must be done to win battles and conflict, increasingly being exposed to PTSD.

This sudden increase in war tactics has created such a burden in these female veterans' lives where they are eager to leave the military after their service obligation is complete. In retrospect, the current wars and conflict are creating a significant strain on the men and women of the armed forces, where they have no other options to step away from the service and become veterans, despite the issue they may face after leaving the service. If these prospective issues of PTSD remain unaddressed, these current issues will not only stay the same but continue to get worse for these female veterans, as they begin the reintegration process (Hazle et al., 2012). Therefore, within this current section of literature, there will be evidence that suggests there will be some form setback during the transition process, which will impede on the progress of these veterans as they transition back into society.

These setbacks are leading to an increase in unemployment, an increase in mental and physical issues that are connected to PTSD and other elements. The issues surrounding these health concerns of these female veterans are calling for additional studies take place an examine the current needs of these female veterans and further explore the options that will lead to a solid program. It will provide a proper treatment program for these veterans that are experiencing or suffering from PTSD or other elements in the correct manner, to have a successful transition. According to Cooper et al. (2017), three key elements are determining the transition journey: military and combat history, personal resilience, and whether the journey toward and through transition has been a positive or negative experience. The idea behind discussing this topic was to provide a unique perspective to this study and highlights some of the unknown issues and concerns of PTSD and the other elements that are present in these female veterans' lives, which had led to some unfavorable outcomes for these female veteran’s. It is clear that many issues are surrounding PTSD and the other present element, which is represented a current challenge within this study as well as in the lives of these female veterans, which is impacting their progress to create a successful life outside of the service. Female veterans are suffering which is the main points of this study and previous studies, to show that there is a huge burden placed on the transitional aspect of these veterans' lives that create doubt in their future.

The agenda of this study is to address the current gap in the literature surrounding issues of PTSD and the other element experience of female veterans. It is impacting their transition process, by evaluating the problem at hand will allow all of the other elements to be addressed to create a process that will lead to a successful life outside the military. According to Cooper et al. (2017), life events experienced in the military may cause difficulty for some in the transition process for many veterans. By, utilizing the correct procedure is vital in examining the many issues that may be unforeseen, which has the possibility of resurfacing after leaving the military service is one of the critical points that is being developed in this study. Since the transition process often focuses on the practical function that supports a successful conversion process by seeking out the job and understanding the individual condition. This will allow these female veterans the due process in having a successful transition process back into society after handling the issues of PTSD and other elements developed inside the military.

**Mitigating challenges.** The skill sets developed inside the military are unique and is not like any other training; the average person will ever experience without joining the military. Family life in the armed forces has been qualified by a unique confluence of stressors (Tam-Seto et al., 2018). However, the knowledge that is gained is not like no other, which can lead to some unique opportunities in the civilian sector. The average female veteran will develop some extraordinary skill set and develop a unique knowledge-based that was created during their time in service. The Armed Services Vocational Aptitude Battery (ASVAB), the Air Force Officer Qualification Test (AFOQT) and the Aviation Standard Test Battery (ASTB), are some of the determining factors that align the qualification factors with opportunities or choosing a career path within the military.

Hawley et al. (2016), explains how these specialized training and education provided by the military will assist them in their vocational and psychosocial rehabilitation process to address the needs of veterans as they try to reintegrate back into society. Besides training, the mental and physical barriers that female veterans must overcome. The primary contributing factor to securing an adequate job is not because of the lack of trying or the means of choosing the correct positions to align their current skill gained in the military or having the right options to secure employment once they transition out of the service. The existing literature will examine how these female veterans possess the needed education level as well as training to direct match or compare to their civilian counterparts, which may translate into a higher salary job after leaving the military (Mulhall, 2009; Reppert et al., 2014).

Female veterans who are choosing to stay in school before reentering the workforce and leaving the military possible will have a better chance of securing employment. There are over 7,000 assigned tasks and jobs that directly align military members to and the civilian sectors (Curtis, 2012). Even with the extensive amount of employment within the military, there are still some challenges to overcome. For female veterans, because of some of the one-dimensional training many of these veterans received in the military, which steamrolls their ability to have multiple skill sets that are always transferable, which will meet the demand of the civilian sector. Thus, making it tougher for organizations to hiring process of veterans because of a lack of transferable skills developed in the military.

Therefore, the military has recently developed a method and system geared towards hiring veterans, called Veterans preference, and with this process allows all veterans a much higher chance of receiving a job over their civilian counterpart, who is being considered for the same position. The lack of understating of the military posts sometimes limits the organization of hiring because of the unknown criteria or uncertain of military jobs. Thus, creating a detrimental factor that will decrease their chances of adequately securing employment outside of the military. According to Keeling (2018), veterans' who transition to civilian life after military service have tended to center on the experiences of those with mental or physical health difficulties or employment challenges and homelessness. The findings indicate that there is a need for better training for veterans so that they are the potential possibility of employment outside the military. By, potential aligns their current job and to their educational level, which was developed in the military give them a chance of seeking the correct civilian occupations.

The hesitancy to hire veterans is one of the most challenging factors for veterans things to overcome for because of the difficulty in transcribing the military training into specific, doable jobs outside of the military. Previous research indicated that there is a noticeable gap in the literature that align military training with civilian careers, which also, creating an additional barrier within the female veteran community. DiRamio et al. (2015), suggests that the average veteran will be transitioning from the military service into the classroom setting instead of the workforce, while the study also showed that many of these veterans have to participate or supporting in some manner of the ongoing conflict that is taking place in Iraq and Afghanistan. Further indicating that more and more veterans, who are more likely to pursue their education options before re-establishing their present back into society. The reality is that the significance of military jobs, training, and language is strict for prospective employers to understand; this is creating an additional setback inside this struggling community of female veterans.

Most veterans do not adequately align their skill set, and their abilities highlight their level of understanding when it comes to finding job opportunities jobs outside the military, which is limiting their opportunity of finding a job is also quite challenging when it comes to an understanding their resume. Veterans have suggested that engagement is a strong causal factor of health and life satisfaction; recent evidence suggests that job quality is too significant (MacLean, VanTil, Sweet, Poirier & McKinnon, 2018). Some findings indicate that commissioned officers might not have to face the same challenges as enlisted personnel because of their level of education which can transition over into the civilian sector. However, many commission officers also, with the struggle of finding a job or employment the same way as the enlisted personnel. The commissioned officer has a clear advantage concerning finding a job on the outside because of the advanced military training and leadership courses that prepare them for life outside of the military. The skill set developed by some of the commission officers will align as well as match to their current position, to their place after leaving the service.

The development and leadership training allow commissioned officers a better chance of seeking employment on the outside of the military because of the assumed level of training and leadership developed gathered over the years. These increased responsibilities have been in place, to see if they can handle the managerial level type issues, such as budgeting, finance, personnel, mentors and leadership and other forms of leadership, which is a direct alignment to administrative positions on the outside. The development of doctrine, organization, practice leads to growth and development as a leader (Daniels, 2016). Commissioned officers are considered administrative managers regardless of the career, while the enlisted personnel is viewed as the blue-collar work performing more of a hand on approach to ensure that the daily tasks required are met and keep on track to ensure organizational efficiency. The findings within the current literature all suggest overcoming these obstacle of finding adequate employment these veteran needs to address the issues of PTSD and the other elements, which is impacting their employment status as well as there transition process. These experiences are affecting their ability to acquire a job outside of the military based on their training and education developed by the army to align and match the r skills with the civilian sector.

**Post-Traumatic Stress Disorder.** The current literature suggests that there has been a wide range of PTSD symptoms that have targeted many veterans, both male and female. According to Williams et al. (2017), a broader range of rates of probable PTSD has been reported, with 12 to 39% of Operation Enduring Freedom (OEF) /Operation Iraqi Freedom (OIF) /Operation New Dawn (OND) Veterans either enrolled in or actively sought VA health care after screening positive for PTSD. PTSD is a severe matter than many veterans do not take seriously. If not treated promptly many veterans find it challenging to readjust back into society, putting them at a higher risk of having long-lasting health issues. Foremost, we included both male and female participants because research indicates that adult males and women may have different PTSD symptom profiles (Fullerton et al., 2001; Green, 2003; Zlotnick, Zimmerman, &Wolfsdorf, 2001), proposing that the diagnostic usefulness of each PTSD symptom may vary by gender ( Green et al., 2017). PTSD has been linked with severe impairments in social functioning, including disrupted family relationships (Harris et al. 2017). This disruption to the family dynamic can lead to unforeseen issues down the road if gone unaddressed.

War has a significant way of altering the reality of the brain, changing the narrative of the story, leaving a avoid in the veteran's mind, which forces them to relive or react the tragic event never genuinely going the real-life loop experience. This reality's so right for these female veterans reliving the tragic events never coming out of the loop. Harris et al. (2017), explain how the current literature has explained how marital/partner relationships indicate that many veterans with PTSD experience high degrees of marital conflict and negative communication with a spouse. Female veterans are stuck in a closed loop system because of the onset of the military conflicts in Afghanistan and Iraq estimated incidence of PTSD among military personnel is at 9% before deployment and between 12 and 18 percent in the post-deployment stage (Hoge, Castro, Messer, McGurk, Cotting, & Koffman, 2004; Vasterling, Proctor, Amoroso, Kane, Heeren, & White, 2006; Stana et al., 2017). The role of the female veterans has become more of a universal role in a modern era of conflicts, female veterans roles and responsibilities have increased resulting in a more increasing presence of female veterans being heavily involved in the conflict.

Combat veterans suffer the most from PTSD because they are not given proper health care to address their physical and mental needs (Yehuda et al. 2014). It is possible that both men and women in the military may delay or never seek medical treatment for PTSD because they are trying to uphold the masculine military stigma. Most veterans avoided medical treatment for PTSD because it indicates a sign of weakness within a culture which will impact the current traditions. Veterans suffering from combat-related issues of war have risen to 13%, the highest it has been since the Vietnam era (Jain et al. 2016). The demographics of war has shifted, resulting in more female veterans having a direct path to more combat-related issues.

The veteran female population is increasing; however, there are understudied risks associated with being exposed to long-term combat-related issues. Pierce & Pritchard (2016), implies that PTSD symptoms can develop after exposure to a traumatic event and include intrusion, avoidance, negative mood and cognitive symptoms, and altered arousal and reactivity (American Psychiatric Association,2013). The operational stress can lead to higher rates of long-term effects that are the result of not properly managing the issue of PTSD. Dysregulated basal cortisol levels may be a risk factor in the development of PTSD common to a female veteran (Pierce & Pritchard, 2016). The method indicated that PTSD affects each person differently and is based on the tragic event that transpired.

The literature provides little to no information about the issues at hand, or that gender roles play a considerable role among the female combat veterans. C’de et al. (2016), suggest that there are higher levels of trauma exposure taking place during the time of conflict which has joined with various other issues that are developing during combat, leading to more severe forms of PTSD. The findings in other studies suggest that PTSD is just as much a life-altering issue as much as MST. Both are having a long-term impact on the future survival of these veterans, creating a wall for their potential growth as they begin to transition back into society. Managing PTSD through spiritual connection is one tonality that has been relatively neglected in the scientific literature (Harris et al. 2017).

Female veterans in the United States being diagnosed with PTSD or MST require a unique medical approach to address their needs and concerns. With the adult population of women utilizing the VHA, it has become extremely vital that these veterans receive the same attention as their male counterparts when it comes to addressing PTSD related issues. Kehle et al. (2017), highlighted that PTSD is one of the most common conditions for which women veterans receive service-connected disability, and about one-quarter of women who use VHA outpatient services have a history of military sexual assault (MSA). These findings were consistent with recent studies that indicated a significant challenge to overcome when trying to transition back into society. PTSD related injuries hinder the civilian sector from offering the opportunity to come aboard and work for the organization. \

The physical and mental health challenges that are presently studied can influence the quality of life for many of these female veterans. PTSD is a general psychological condition that has the qualities of being distressed in intimate partners of people living with these symptoms. Various scholars indicate that PTSD has been reported to be a higher level of depressive and anxiety symptoms. Female veterans seeking help for this mental illness can improve their overall health and safety of others by reaching out and creating a level of trust that will lead to a successful transition process. This current scholarly research indicates that some of this treatment receive can increase the PTSD symptoms during this phase of recovery (Story & Beck, 2017).

Dealing with combat, sexual, and physical trauma creates an experience that forces them to relive the same issue continuously after the event is ceased to exist. Story & Beck (2017) created an environment where female veterans in this study can include their new perspective, enhanced coping, improved mood and quality of life. While these female veterans receive health care at no cost from the VHA, they are hesitating in seeking medical attention although many female veterans are trying to establish a baseline to overcome the challenges of combat to reconnect with society.

However, like the physical challenges the mental challenges are even more desperate to handle or overcome because of the constant mental reminders. This section notes that current female veterans can now be treated through the PTSD specialized outpatient care process, which has a significant impact on the feminine veteran quality of life. Social support and relationship difficulties contribute factors to the risk of developing PTSD (Cloitre et al. 2016). The impact on relationships and adapting to life after a war zone is somewhat challenging for many female veterans, and their return home has been affected which has a significant impact on their lives after service amongst the female veteran's community, because of the struggles that come with the issues develop from PTSD (Gerlock et al. 2016). The ability to maintain and efficiently cope is stopped because of the transitional elements that bring combat-related stresses, destroying the process of transitioning from the military to civilian life. The data suggest that some individuals join the army at an early age and that is to escape the abusive and dysfunctional household.

PTSD is a severe roadblock amongst the female veteran community, which lead to the various form of depression. According to Sairsingh et al. (2018), Depression is currently one of the most prominent health conditions among female veterans. Therefore, these outcries of depression lead to behavioral concerns as well as health concerns within this subgroup of individuals within the military. The overall impact of these symptoms are followed by a history of different element and variable such as anxiety, PTSD, alcohol misuse, and drug abuse are some of the significant issues inside the female veteran community. The mental factor is a tough symptom to overcome without being the previous diagnosis because of each sign that on its own identity that leads to some unfavorable outcome.

According to Pierce & Pritchard (2016), female have an account for around 14.6% of all US troops deployed to Iraq and Afghanistan (Department of Defense, 2012). This mindblowing fact has lead researcher to believe that the chance of experience PTSD, sexual assault, and combat trauma is significantly more likely to happen to female veterans than a civilian, which will lead to developing symptoms of PTSD because of the prolonged exposure. Combat Veterans are facing exponential increases in symptoms associated with PTSD (Gehrke et al., 2018). Female veterans are some of the victims for this limited exposure which puts them at risk for MST, IPV, and SUD.

**Military Sexual Trauma.** The tactical and operational roles have been completely overhauled during the current conflict to support Iraq and Afghanistan. According to Goldstein et al. (2017), there has been a significant increase in the number of women serving in the military, and women currently comprise about 15% of the Department of Defense Active Duty force (Office of the Deputy Assistant Secretary of Defense, 2014). The increase in female veterans has been on a steady incline since 9/11, putting more and more female veterans in the frontline to participate in combat. Military-related stressors have been a predominant topic within the veteran male population, and it is no longer an issue that only haunts the male veteran, now the problems have become a known factor in the female veteran community. Rogers et al. (2017) suggest that female veterans who are survivors of Military Sexual Trauma (MST) often face an increased burden of chronic pain, including a broad range of pain conditions independent of the psychological effects of military sexual trauma. The devastating factor is that these issues are getting less attention because of the minority role that women fill in the Armed Forces. Military trauma is exceptionally high in the female veteran’s population**.**

The severity of being exposed to military relates stressors is the side-effect of being associated continuously with combat-related issues. Military sexual trauma (MST) is another form of stressor that is plaguing the female veterans across the board, by being subjected to sexual assault or sexual harassment (Kimerling et al., 2007). The results from this mind-blowing ordeal are placing female veterans at a considerable disadvantage when trying to develop a new identity outside of the military. According to Eichler & Evans (2018), sexual harassment and assault during service can result in MST, with potential long-term consequences for a Veteran's transition to civilian life. It is quite challenging to secure employment after being impacted by combated related issues that lead to the possibility of being subjected to military sexual trauma.

The emotional scars left behind from being sexually assaulted can be far worst to overcome than the loss of a loved one, because of the constant reminder of being a victim. A recent review of research on MST indicated that between 9.5% and 33% of women report experiencing an attempted or completed rape during military service (Kintzle et al., 2015). While service commitments continue to increase the results are devastating that female veterans have a high chance of being sexually assaulted or harassed based on the present literature. Moreover, experiencing MST presents a significant challenge when trying to reestablish an identity back in society. MST is an issue that targets all branches of service from all demographic regions. However, the primary victims seem to be female veterans both officers and enlisted. Research suggests that are some contributing factors that are overwhelming to the military culture that is spreading like a virus amongst the female veteran's population.

The physical and mental abuse impacts the female veterans in such a manner that they are becoming prey to perpetrators within the military structure where they have lost their faith and confidence in the system. The current issues have destroyed unit cohesion and destroyed the trust amongst members within the organization. The Veteran's Health Administration implies that with the growing rate of female veterans that 1 in 4 women will experience some form of MST throughout their time in the service. The history of sexual trauma can result in chronic pain conditions among female veterans. The literature explains that a history of sexual abuse may increase the chances of developing pelvic pain (Cichowski et al. 2017). A clinical study has indicated that physical abuse mixed with sexual abuse can result in female veteran's experiencing and unsuccessful lifestyle after transitioning back into society. There has been a definite connection that MST can be linked to a variety of problems that involve chronic pain conditions in the veteran female population.

In addition to the physical barriers that MST imposes on female veterans, they are also suffering from a psychological effect of MST. According to William & Bernstein (2011), the indication of a comprehensive description of MST among U.S. female veterans is needed to better understand its impact on these individuals' lives and current treatment strategies. The physical health concerns are impacting these female veterans in various ways which leads to mental setbacks that are causing depression among the veteran female population. William & Bernstein (2011) highlighted women reporting a history of sexual assault while in the military, 26% endorsed 12 of 24 symptoms/conditions of self-administered, mailed survey information about a spectrum of physical symptoms and medical conditions, compared with 11% of women with no reported sexual assault while in the military.

The majority of these issues seem to be addressed or made aware after the female veteran returns home from combat or after suffering a near-death experience that has lead to combination of various side effects such as sleeplessness, nightmares, bursts of temper, flashbacks, panic attacks, fear, and an inability to cope with everyday life. According to Hawkins & Crowe (2018), there is a growing body of literature has reported the prevalence of MST amongst female veterans as well, with approximately 6% of active-duty female veterans reporting unwanted sexual contact in the past year. These issues are tough to overcome because they associated with the mental setbacks that transpire amongst the veteran female population. MST remains a persistent problem despite increasing focus throughout the DoD and the Federal Government (Hickey et al. 2017). Female veterans are always in danger because of the broad issues that transpire in the military that pose a challenge to their lives as they try to transition back into society. Many of these veterans that are serving in this present conflict find it quite challenging to return home and reintegrate back into civilian life after experiencing MST.

The previous literature has suggested that with the rapid increase of the female veteran’s population that MST issues will only continue to rise as well within the female veteran’s community. It is estimated that only 5% of female veterans will report any form of MST (Hickey et al. 2017). In spite of the unexpected increase in opportunities for many female veterans, many of these women are reluctant to pursue any combat-related assignments in fear of being taken advantage of or abused by their counterparts while doing their assigned job or task, thus affecting their chance of reintegrating back into society. Monteitih et al., (2016) provides information that indicates the issues suffered from military sexual trauma can be linked to the problems surrounding suicidal ideation and suicidal attempts. The physical injuries that are sustained are far more severe than many people understand

Sexual trauma is prevalent through the Armed Services resulting in a life-altering experience for many female veterans. Military sexual trauma itself is a particular situation where there are robust risk factors for suicidal thoughts that would further underline the importance of assessing for suicide risk when Veterans screen positive for military sexual trauma (Monteitih et al., 2016). MST is a subcategory that coexists with the current factors of PTSD. Inquiry shows that female veterans who have experienced MST are more potential to acquire mental health conditions, including PTSD, depression, and substance use disorders, all of which can cause an impact on reintegration (Hawkins & Crowe, 2018). While these factors share some of the same background based on the various types of trauma, compounded by experiences of sexual assault can place female veterans at an increased risk for post-traumatic stress disorder (PTSD) both during and after their military service (Surís, Lind, Kashner, & Borman, 2007).

The skills that female veterans acquired during their time in the service has been considering to be more transferable then their male veterans. However, one of the most notable pitfalls for these female veterans is that their talent often gets overlook by civilian employers. Civilian employers have placed a limitation of the female veterans’ community because they do not recognize and value their military-acquired leadership skills or their Veteran status, particularly if they have not served in combat roles (Eichler & Evans, 2018). These issues seem to be an ongoing challenge for these female veterans because of their gender; these are of MST among female veterans’ community is carrying which has some influence on their civilian employment. According to Eichler & Evans (2018), hence implying that having experienced MST within the military work setting may lead to interpersonal and functional challenges when transitioning to civilian careers, letting in a larger potential for being re-victimized.

However, unlike the issues taking place on the battlefield, MST is something that can be prevented if all the accurate measures were in place to eliminate this stigma that the military carries regarding female veterans. MST is an experience that bridges issues related to mental, physical, spiritual, wellness, and socioeconomic factors (Eichler & Evans 2018). While there is proper training put in, to place surrounding these issues, many female veterans are still being targeted by males. The fear of being ostracized is always in the back of their mind creating a barrier of fear that leads to them not being able to discuss these issues with the correct people to seek help. The impact of reporting MST can lead to further consequences which may result in shame and fear of stigmatization. The long-term exposure to sexual and physical trauma during military service is associated with adverse mental and physical health outcomes (Gison et al., 2016). Due to the growth of current issues, the complexity of health concerns may not adequately be addressed resulting in female veterans experiencing problems after the transition process has begun.

**Intimate Partner Violence**. Intimate Partner Violence is a form of domestic violence that many female veterans are experiencing throughout their various relationships resulting in symptoms that mimic PTSD. According to Breilding et al. (2014); Bartlett et al. (2018), IPV affects approximately one in three women and one in four men in their lifetime. IPV, including physical, psychological, and sexual aggression from a past or current intimate partner, has been recognized to be a significant public health problem in the United States (Breiding, Basile, Smith, Black, & Mahendra, 2015; Maskin et al., 2019). IPV is the result of interpersonal violence that is the result of either abuse physically, verbally or both depending on the circumstance. According to Latta et al. (2016), the study found that women veterans reported significantly higher lifetime rates of IPV than non-veteran women (Dichter et al.2011). The current literature implies that females who have had experience with IPV were more likely to be divorced or separated than those who had not experienced IPV. Compared with their nonmilitary peers, military members and veterans have a higher occurrence of IPV (Maskin et al., 2018). These violent acts cause PTSD and other forms of mental health disorder, thus limiting the veterans transition process. Therefore, this present study is set to address the notable gap in the current literature to explain the real-life experience of female veterans after dealing with issues caused by IPV

Although studies should address the data with caution as there is a need to find out the overall risk factors of IPV amongst the female veterans and how these issues plague their current growth as they begin the healing process of being a victim to marital problems. According to Maskin et al. (2018), stated that approximately 29% of women and 10% of men had experienced rape, physical violence, and stalking by an intimate partner. Female veterans that suffer from IPV are often reluctant to seek help or receive advice on how to accurately cope or handle domestic violence. The IPV aspect has a very significant range that seems to impact the psychological, physical, or sexual aggression by a current or previous intimate partner and is affiliated with a broad scope of health and social impacts, particularly for adult females (Dichter et al. 2017). According to Dicthter et al. (2017), current studies show that the statistical data estimated 5.3 million U.S. women experience IPV each year, and nearly 42.4 million women experience IPV in the form of rape, physical violence, or stalking in their lifetime. According to Maskin et al. (2018), female veterans are 1.6 times more probable to experience IPV victimization than women who have not worked in the military. This is an alarming number because, with the constant increase of female veterans each year, the data will only increase to show how many female veterans are accurately impacted by this abuse, which has a lasting impact on their future growth as ordinary civilians.

IPV seems to influence the female veterans lives the most because of the harsh reality of being married or dating their perpetrator, which elevated the depression rate and destroys the home life of these veterans. IPV is not just about physical abuse; it is the mental destruction that hurts the most for more female veterans; verbal abuse can cause more harm than physical abuse. Acute and chronic physical and psychological health effects of IPV, which are easily documented, ranging from symptoms of chronic pain to sign of PTSD (Maskin, Iverson, Vogt, & Smith, 2018). Female veterans who bear from any form of MST may develop symptomatology and coping symptoms that are a direct response to the increased risk of IPV exposure or have shared risk factors for both experiences. The previous research concludes a severe issue with IPV that has its limitation to address the ongoing problems that transpire amongst the female veteran community. Physical, sexual, or psychological aggression and stalking from a past or current intimate partner is what most of these female veterans are reliving after transitioning out of the military (Dardis, Amosro, & Iverson 2017).

According to Dardis et al. (2017), advocation for the importance of IPV and showing how these issues will affect the female veteran community and how these issues can lead to adverse consequences which have the capability of influencing the overall mindset of these female veterans. The misuse and coercion have strongly associated with mental health symptoms, such as depression, for female IPV victims (Ditcher et al., 2013; Maskin et al., 2018). Veterans overall physical and mental behavior will be affected because of the issues brought about from IPV. They are limiting their ability to function appropriately or handle and cope with things such as sleep impairment, depression, anxiety, and substance use. The transitioning process is limited by as well as affected by the issues surrounding intimate partner stalking, which is one of the unique side effects of PTSD, many female veterans are experiencing these symptoms after being a victim of IPV. To better aid as well as help the growing female veteran population, health care professionals must become better acquainted with the side effect of IPV.

This familiarity will assist in the education process to better understand the issues at hand and provide a better platform to meet the needs of these female veterans both mentally and physically. Victims of IPV may find it challenging to secure employment because of the restriction set forth by their abuser, which undermine their functional outcome. According to Crowne et al. (2011), & Maskin et al. (2018), evidence suggests that female veterans experiencing IPV were at greater danger of unstable employment both concurrently and 6 to 8 years following victimization. With the right treatment program in place for these female veterans will meet the needs of the public and address the health concerns surrounding IPV. By showing the side effects of both of their physical and mental needs, the reality of this current issue will need to be addressed to discuss the certainty of dealing with such violent acts suffered by many female veterans.

Developing the right coping techniques can allow the veteran to handle the stresses efficiently as they begin the process of transitioning back into civilian life. The physical, sexual, and psychological forms of IPV lead to and impair many mental health conditions amongst the female veterans' community which leads to issues to included depression, substance use disorders, suicidality, and posttraumatic stress disorder (Bartlett et al., 2108). The complexity of transitioning from the military to civilian life as a female veteran is quite challenging because there is no way to prepare for the unknown because of the harsh reality of reentering society without addressing the issues developed. According to Creech et al. (2017), cognitive–behavioral group treatment explicitly designed to help military populations reduce and which will aid in ending their use of Intimate Partner Assault (IPA), which can lead to a successful transformation that results in the ideal transition process for female veterans

A successful transition examined by studying the phenomenon of the military which will align all the necessary factors to better prepare the female veteran to ensure they can create a successful outcome despite, the reality of being a victim to specific traumatic events that have happened needs to be addressed so they can develop a technique to overcome IPV. According to Maskin et al. (2018), the evidence is supporting and suggest that IPV victimization is associated with lower levels of job satisfaction and functioning, and that gender plays a substantial role in these associations. IPV is a crime that targets some but affects everyone, and the real-life experience impacts everyone in the narrative, these issues create doubt, uncertainty, hopelessness amongst the female veteran's community. Female veterans are more likely than nonveteran women to experience IPV, with one in three female veterans experiencing lifetime IPV (Iverson et al. 2016).

There is no manuscript currently in circulation or developments in hand to describe the real-life experience many of these female veterans are experiencing. Strategic planning is one of the critical factors to overcome when addressing these issues that are developed in the military, regarding IPV, it is not a bad option to plan to seek help until it is time to solve the problems at hand. The military is comprised of countless rough rides, which have a lot of twists and turns that take the individual in every direction. Thus, implying the need to require an individual with a sound mind to handle the planned and unplanned events that take place in the military that creates change. Seeking help is the first step in addressing the current dilemma that hinders a successful transition process. Meredith et al. (2017), suggest that initiatives to improve comprehensive care for women veterans have experienced a positive effect on at least one indicator of excellent gender-specific care screening of women who has experience in some form of MST and IPV.

The current trends have implied that a fine design painting will excellent capture the picture in preparation to create a smooth transition process for veterans, especially female veterans and none of those images involved the harsh reality that most of the female veteran community will be an IPV victim. Although high levels of IPV are documented among both women, who are actively serving in the military and those who are veterans (Mercado et al. 2015), the value of the army is about demonstrating self-control, being humble, and disciplined, many female veterans are striving for those values to be restored into the military structure to help eliminate the ongoing issues of trauma. The research shows that if these issues are addressed, could lead to many of these female veterans regaining their relationship with their loved ones and having a positive outcome to such a sad ending. This positive outlook can rewrite the story for so many lost female veterans and allow them to concentrate on what counts the most and aid them with obtaining their life in society and will enable them to get their spirit back on the right route.

**Substance Use Disorder**. Substance use disorders (SUD) are among the more chronic and costly mental health conditions treated in the Department of Veterans Affairs (VA) (Painter et al. 2018). According to Giannitripani et al. (2018), SUD is a component that consists of abuse or dependence on alcohol or other drugs, which is damaging to women’s wellness and tone of liveliness. These issues are developed after suffering a form of PTSD or other traumatic events which will lead to the overusing or overdosing on prescription drugs. The rate of co-occurrence of SUD and PTSD among women veterans is estimated at between 30%, and 59%, 10 and women Veterans with SUD may be as much as ten times more probable to have comorbid PTSD than those without SUD (Giannitapani et al., 2018). The side effect of being subjected to SUD is experienced psychosocial concerns such as homelessness and unemployment.

The current literature examines the gender differences when it comes to utilizing the VA treatment facility to restore the veteran female community into society without any lasting effect of SUD. Recent studies indicate that female veterans may be more vulnerable to substance use disorders than women in the general population due to their vulnerability risk factors related to assisting in the US military (Gobin et al., 2015). According to Painter et al. (2018), the results show that the acute treatment types, 34.5% of OEF/OIF/OND VA patients used the ED, 4% used residential mental health treatment, 6.9% used residential addiction treatment, and 23.6% used psychiatric inpatient treatment at least once in the first year of VA care. The increase in women's exposure to military stressors corresponds to an increase in women diagnosed with PTS and SUD (Conard and Sauls, 2014, Fontana et al., 2010; Yalch et al., 2018). SUD can potentially lead to more adverse actions, which will completely alter or stop the transition process for many of these female veterans as they try to return to society.

SUD is the onset, development of Severe mental illness (SMI), which is another side effect PTSD. Many female veterans become addicted to opiate medications for several reasons to mask the pain or overcome the trauma. According to Yalch et al. (2018), the effects of MSA and other military stressors on symptoms of SUD and PTSD way heavy amongst the female veterans’ community. Those issues are limiting the ability of the female veterans forcing them into rehab to rediscover their identity and address the issues at hand, which is a game changer of been addicted to opiates. According to Cucciare et al., (2013) and Gobin et al. (2015), one of the standout factors is that there is a growing health issue experienced by a significant proportion of female veterans is alcohol misuse and alcohol-related problems. Pain has been linked to being a leading cause of not being able to adapt to society because of the constant obsession with opiate medications. According to Lovejory et al. (2016), several studies have identified specific patient demographics and clinical characteristics associated with prescription short-term opioid therapy (SOT) and long-term opioid therapy (LOT) among various samples of Veterans with and without SUD histories. SUD is recognized as the one primary form of the PTSD that become the reason for the diminishing approach of military and other functioning for the women. Proper identification of the element of SUD make it easy for the assessors to figure out the prevailing psychological concerns that influence the approach of veteran operations and other functions feature by the women veterans outside the military services.

A better understanding of differences among alcohol user groups can help target limited health care resources in a way that best meets the needs of the patients (Pedersen et al. 2018). According to Ditcher et a. (2011) and Gobin et al. (2015) found higher rates of lifetime IPV exposure among female Veterans compared to non-Veterans (33.0% vs. 23.8%) and documented associations between IPV exposure and employment in heavy drinking. The present study is set-up to develop a process that targets the active and lifetime users of the SUD history to align with the proper treatment regime to create a meaningful diagnostic that will add value to the current literature to change the overall outcome for female veterans who are in the process of transitioning out of the military. Gobin et al. (2015), implies that the interpersonal alcohol-related concerns have been associated with a history of MST and higher rates of adulthood physical assault. Giannitrapani et al. (2018), explains that female veterans with SUD, many of whom possess a story of violence, injury, and PTSD, women-only SUD care may not be equally successful if it is only provided in a mixed-gender clinic or course of study because of psychological safety concerns.

SUD is still one of the remaining medical and mental health burdens that take place in the medical treatment facility which has a long-term effect on both individuals and society, because of the adverse outcome that comes from the result of being addicted to various medications — creating an issue within the family structure and the military atmosphere, resulting in the military member being discharged from the service. Female veterans that pose an unusual combination of SUD and PTSD may benefit from gender-specific programs designed to address conditions simultaneously (Giannitrapri et al., 2018). With SUD there are some adverse outcomes after entering a substance use treatment facility, which is essential to designing the correct measure to address the issues of using a substance treatment facility, to help reduce the burden of morbidity and mortality resulting from these disorders (Decker et al. 2017). The proper handling of the substance use disorder can contribute to a successful life outside of the military with the appropriate direction and coaching to develop a procedure that promotes rehabilitation inside of the various other outcomes which are the ethical decisions made after being a victim of substance use disorder.

Personality traits predict variation in important SUD treatment outcomes. These personal traits stem to form at an early age for female veterans in particular during their childhood is where most of the violence form which leads to a lasting and damaging effect on their life, which involved long-term consequences for adult women, including increased vulnerability for alcohol misuse. SUD has been on the uprise within the military, especially in female veterans' community. According to Gobin et al. (2015) found amongst female veterans that childhood sexual abuse was related to increased likelihood of binge drinking and both childhood physical and childhood sexual abuse were predictive of drinking until intoxicated. Thus, resulting in a particularly vulnerable sub-group of veterans that are struggling with the transition process. It allows the veterans to reach an achievable goal to get help through this process. Blognien et al. (2016), explains the method of the present work was grounded on a sample of U.S. military vets who were observed throughout their stays in a residential treatment program, to find out if their lives change so that they could feel accepted in society.

The current focal point should be on increasing access to SUD treatment, and wellness care system administrators. This could help form awareness that increased access to care of many veterans, could result in short-term cost offset and result in increased usage of both outpatient mental health and non-mental health facility (Hagenorn et al. 2017). According to Pedersen et al. (2018), it is clear that efforts need to be made to engage veterans that are struggling with alcoholism, these current users need to reach out to the service provided to them to address the ongoing issues developed from addiction. The focal point of this study is getting veterans in this program as quickly as possible to get them the needed help which has been assumed to be one of the many issues that are altering their lives after service. These female veterans are suffering from countless near-death experiences because of the over usage of medication or being a victim to some form of assault.

Many veterans allow their pride to get in the way of creating a new personality or adapting to change, which pushes them away from the needed help, instead of running towards the required support, the military does not allow the member to be pushed to the limits where most people would turn around and leave. According to Chapman & Wu (2014), veterans in poor mental health had increased odds of suicide mortality; women with a SUD had a higher risk ratio of completed suicide than men with a SUD. The reality is that SUD is often overlooked doing the screening process amongst female veteran home for combat, since 9/11, to the point where the symptoms usually go undiagnosed amongst the female veterans' community. Chapman and Wu (2014), indicate that Studies show an association between substance use, alcohol, opiates, and inhalants have an increased odd of suicidal behaviors amongst the female veteran community.

According to Pedersen et al. (2018), the research literature on substance use and treatment utilization among veterans with schizophrenia by studying patients in this population with different layers of substance use concerning patient characteristics and service use. SUD program is one of the most significant quality improvement processes to get these military veterans' lives back on the right track after being addicted to alcohol or other opioid medication. According to Chapman & Wu (2014), implies that substance use being triggering factor that can lead to increased odds of suicide ideation attempted suicide, or completed suicide, interventions on substance use might improve mental health, reduce suicide ideation, and help prevent or reduce suicide attempt and completion. Referable to the restriction of the study it is not clear on how the real-life experience can present a quality insight in establishing a positive future timeline. Without a strict time, frame to re-address the current issues to ensure if the veterans turn their life around to reach a successful conversion process, also, to examine if the current issues will go up or down later on in the future. The future of the military is the brightest it has ever been, though further research and current literature some clear guidelines will instill trust back into the military and its veterans. While the female veterans continue to increase in size, it is time to get them some help, so they will have the ability to cope with society and let go of the past and focus on the future. According to (Friedman et al.,2011; Chapman & Wu, 2014) VA is committed to identifying and serving female veteran's unique health care needs.

**Veteran identity**. This section was developed to understand better the true identity of the female veterans and the roles they play in protecting the constitution of the United States and how these roles create conflict with the current process of having a successful career outside the service which will hopefully lead to a successful transition process. According to Firmin et al. (2016), multiple role identities, specifically ones that may be more valued than a mental illness identify, may be protective against the effects of stigma. Female veterans in several health care backgrounds and for existing transition programs, including a consideration of the function of identity (Keeling, 2018). The primary focus is providing a professional environment while gathering the necessary insight to promote the value of the military and increase the current body of knowledge on the emphasis on why female join the army and later on become veterans.

The shock of a veteran role identity on their recovery and how these perceptions differ from non-veterans. According to Keeling (2018), the female veteran transition is considered that includes psychological considerations of the impact on identity and the potential for existential crisis. Female veterans have been recognized as a group of individuals with a unique identity, life history, and experience. According to Di Leone et al. (2016), to women in these cohorts, the exposure of sexual harassment may also be linked to their identity as service members and veteran. Outside organizations struggle to accept and understand the roles of the military because of the language barriers and the strict discipline in the army. Transition threatened their military identity; letting go of their military identity might create emptiness and an existential crisis (Keeling, 2018). The individuality of the military member is like a mysterious agent, only a small snippet of who a person is let out, thus applying the various theories to arise a clear image is required in interpreting the differences in military life and civilian life. Female veterans are leaving the military as well as going their identity previously tied to a career and pursuing a different having the freedom to be an individual requires individuals to reconcile who, as mortals, they are. The female veteran transition process is immediately connected to Scholsberg’s theory and the 4’s model as well as the role theory, which is a very fascinating connect to the individual identity that will bear on their cultural behavior.

**Methodology**

The study used qualitative methods to reach a fuller apprehension of the real-life experience of female veterans. There are some research studies that focus on the approach of PTSD referring to the role of women as veterans. It is important to mention that the qualitative research method refers to the one popular research method to identify the concerning issues linked with the working and health paradigm of females as veterans considering the issue of PTSD. The research study conducted by Sayer and Freindmann-Sanchez (2009) is one significant example of the research work that focused on the idea of the PTSD treatment concerning the approach of veterans. The research method in the form of a qualitative technique is utilized by the researchers to assess the actual phenomenon and the feature of attention (Sayer et al., 2009). The particular procedure of qualitative research work is adopted by the researchers to identify the approach of PTSD treatment concerning the functioning of veterans in both forms of males and females. This approach is viable referring to the primary objective of the study that focused on providing better intervention plan and recommendation regarding the treatment of the issue related to PTSD. The qualitative research work presents the effective options to conduct interviews with the participants to develop better ideas about the problems of PTSD they faced as veterans. The approach of direct conversations helps researchers to carefully observe the specific symptoms and concerns associated with different forms of psychological concerns.

The veteran participants will be based on recruited through the university and surrounding community through flyers and e-mail communications this method will be employed to properly screen the veteran to meet the study qualification (Pierce & Pritchard, 2018). This qualitative approach allows the researcher the ability to assess the best form of action to examine the publication at hand that is impacting these female veterans and how these issues affect their experiences before and subsequently after leaving the military. According to Sandelowski (2002) and Gutierrez et al., (2013) the qualitative descriptive studies have as their goal and agenda to reach a comprehensive summary based on the issues at hand depending on their everyday struggle of the terms of the actual events. All female veterans that participants in this study with military experience had a current active duty status or had been active duty within the past five years. The thoughts of the qualitative designs one conducts interviews until reaching saturation, which occurs when subsequent discussions do not yield new information (Rubin & Rubin, 1995; Gutierrez et al., 2013). The qualitative study will explore all the options and avenues through the data aggregation procedure and interviews to understand the life experience of female veterans which they are compelled to speak. The findings in this study have been geared toward the importance of the clinical implications such that interventions aimed at reducing the sexual satisfaction and function concerns experienced by MST survivors should focus on specific components of PTSD (Bias et al., 2018).

The qualitative study will furnish the best possible solution in addressing current issues through the problem statement. According to MacGregor et al., (2011) to developments and evidence of emerging innovations in VA women’s mental health maintenance, we conducted a qualitative work to investigate approaches to women’s mental health care delivery in the area. The qualitative work offers a window into the complexities and dynamics of how VA facilities and their providers are approaching arrangements for their care, in the hopes of informing ongoing policy and practice (MacGregor et al., 2011). The qualitative study seeks to attain knowledge and understanding by accessing individuals’ lived experiences and describes these experiences using rich and authentic language (Byrne, 2001; Brue & Brue, 2016; Moustakas, 1994). The qualitative approach addresses all the relevant concerns of the research question, through in-depth interviews that explain the phenomenon.

The qualitative work will produce the best possible instrument to accumulate data to serve the inquiry questions that described their real-life experience when trying to transition and deal with topics that are blocking their success in the civilian sector — the qualitative study to investigate approaches to women’s mental health care delivery in the field (MacGregor et al., 2011). The qualitative method focuses on the experience, the phenomenon explains the actual life experience and is by far the best method to determine the nature of concern surrounding female veterans (Sailakumar& Naachimuthu, 2017). The research questions are aligned with the problem statement, as it is not known how a female veteran's life will be affected after serving in the military and during their transition phase. The qualitative study among female veterans of recent conflicts was conducted to explore the women's experiences and potential suicide risk factors, according to the Interpersonal-Psychological Theory of Suicide, including burdensomeness, failed belongings and acquired ability (Gutierrez et al., 2013). Not being able to cope or adjust back into civilian life will play the critical role that will impact the transition process which will lead unforeseen scenarios that is results of setback that has been developed within the military environment. According to Haun et al. (2016), this work is unique in that it qualitatively examined the experiences of female veterans from their perspective to realize the impact of PTSD. The qualitative methods have been valuable as the better-suited process to meet the goal of this study.

The quantitative study will not provide the best solution in reading the real-life experience of female veterans, by applying the corrected data collecting technique or routine to assemble all the facts by using different variables to distinguish the trouble. According to Gutierrez et al. (2013), qualitative and quantitative methods are likely to provide stakeholders with complete characterization. The exploration of quantitative research of veterans only indicates a little tip of internal strains of combat exposure which had some degree of shock on the psychological welfare of the veteran (Gordon, 2014). The quantitative study will be the incorrect study or method utilized in this field because it will be difficult to address the personal issues of the subject that are consuming these female veteran’s lives. Quantitative approaches have a significant emphasis on building, and measure relationships between two discrete variables are never capturing the genuine substance of the real-life experience. The study calls for a more encompassed approach, and a quantitative survey was not a correct fit to examine the demands of the female veteran after serving in the military.

The qualitative work will ascertain the value of the research, by reading how they are measured differently used to play an essential function to support the field, by demonstrating how the effects of the military may transform individually to use the female veterans' lives in the hereafter. This work takes a qualitative method to align the research questions and the problem statement in how female veterans are handling the matters that transpired in the military, which introduce challenges as they commence the transition process out of the military. Qualitative descriptive studies have as their goal a comprehensive summary of issues in the everyday terms of those events (Gutierrez et al., 2013). The qualitative research accounts for free discussion based on personal experience, whereas the measure is more along the creases of a statistical driving method that show the value of the field. A qualitative approach indeed is more suited for this field to gain in-depth access to female veterans as they explain their real-life consequences.

**Instrumentation**

The various tools to collect qualitative data. The current collection of data was gathered by using a qualitative approach in explaining the collection process through collecting articles and reading the materials to support the present study, unstructured techniques to develop and add on to the existing theme through the interview process (Carter et al. 2014). The phenomenological interview questions are set to interact with the member to uncover any missed information that will provide some essential detail to the study Roberts (2013).

Conducting in-depth research on female veterans transitioning back into society captures prominent strength in the study using the fundamental principle of the semi-secured interview process to achieve the comprehensive unattainable response through the data collection process: Vance (2015), the advantage of using interview accounts for a more flexible approach to gathering the information. The additional interview process provides a variety of effective collection processes that focus on collecting data from the female veteran community.

The process concludes to explain the military transition process through interview and field notes. This gives the best possible way to accurately developed results during the interview process to capture real-life experience, achieved through verbal clues and body language. The interview process will be the foundation of discovering the hidden messages in the dialogue captured from the interview and transcribed to explain the real-life experience of these female veterans (Naphan & Elliot, 2015).

| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **REVIEW OF THE LITERATURE**  (Minimum 30 pages) | | | | |
| This section must be a minimum of 30 pages. The purpose of the minimum number of pages is to ensure that the overall literature review reflects a foundational understanding of the theory or theories, literature and research studies related to the topic. A well-written comprehensive literature review that reflects the current state of research and literature on the topic is expected and will likely exceed 30 pages. Literature reviews should be updated continuously. This is an ongoing process of dissertation completion. | 2 | 2 | X |  |
| **Quantitative Studies:** Describes each research variable in the study discussing the prior empirical research that has been done on the variables and the relationship between the variables.  **Qualitative Studies:** Describes the phenomena being explored in the study discussing the prior research that has been done on the phenomena. | 2 | 2 | X |  |
| **Themes or Topics (Required):** Discusses and synthesizes studies related to the proposed dissertation topic. May include (1) studies focused on the problem from a societal perspective, (2) studies describing and/or relating the variables (quantitative) or exploring related phenomena (qualitative), (3) studies on related research such as factors associated with the themes, (4) studies on the instruments used to collect data, (5) studies on the broad population for the study, and/or (6) studies similar to the proposed study. The themes presented and research studies discussed and synthesized in the Review of Literature demonstrates an understanding of all aspects of the research topic and the research methodology. | 2 | 2 | X |  |
| **Methodologies used in prior research on the topic (required):** Section is built on prior research studies and does not include references to methodology books and articles. **What other methods have been done in similar studies on the topic?**  Discusses and synthesizes the various methods that have been used in prior empirical research related to the study to present the best methodology for the proposed study. This section demonstrates a broad understanding of methodologies used in the research area. | 2 | 2 | X |  |
| **Instruments/data sources/research materials used in prior studies on the topic (required):**  Provides a discussion of instruments, sources of data or research materials used in **closely-related** empirical studies on the topic (dated within last 3 to 5 years).  Demonstrates an understanding of the instruments used in prior studies on the topic.  Synthesizes the information to recommend the instruments to be used for the study. | 2 | 2 | X |  |
| Structures literature review in a logical order, including actual data and accurate synthesis of results from reviewed studies as related to the learners, own topic. Provides a synthesis of the information not just a summary of the findings. | 2 | 2 | X |  |
| Includes in each major section (theme or topic) within the Review of Literature an introductory paragraph that explains why the particular topic or theme was explored relative to the overall dissertation topic. | 2 | 2 | X |  |
| Includes in each section within the Review of Literature a summary paragraph(s) that (1) compares and contrasts alternative perspectives on the topic and (2) provides a synthesis of the themes relative to the research topic discussed that emerged from the literature, and (3) identifies how themes are relevant to the proposed dissertation topic and research methodology. | 2 | 2 | X |  |
| Provides additional arguments for the need for the study that was defined in the Background to the Problem section. | 2 | 2 | X |  |
| Ensures that for every in-text citation a reference entry exists. Conversely, for every reference list entry, there is a corresponding in-text citation. Note: The accuracy of citations and quality of sources must be verified by learner, chair and committee members. |  | 2 | X |  |
| Uses a range of references including founding theorists, peer-reviewed empirical research studies from scholarly journals, and government/foundation research reports. **Note:** **A minimum of 50 peer-reviewed, empirical research articles are required for the literature review.** |  | 2 | X |  |
| Verifies that 75% of all references are scholarly sources within the past four years for the proposal and five years for the dissertation. The 5-year time frame is referenced at the time of the proposal defense date, and the 5-year timeframe is referenced at the time of the dissertation defense date. **Note:** Websites, dictionaries, publications without dates (n.d.), are not considered scholarly sources and should not be cited or present in the reference list. |  | 2 | X |  |
| Avoids overuse of books and dissertations.  **Books:** Maximum of 10 scholarly books that present cutting edge views on a topic, are research-based, or are seminal works.  **Dissertations:** Maximum of 5 published dissertations. |  | 2 | X |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 | X |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Summary

Through Chapter 2, the researcher performed an extensive review of the literature describing the ongoing development through the research and the issues that are limiting the growth inside of the female veteran community. Each year female veterans are faced with the harsh reality of transitioning out of the military to pursue different goals and dreams. However, most of those goals and visions are impacted by the lifestyle of being in the military. The growing concerns are that the veteran female population continually outgrows their male counterparts. Thus, making it quite challenging for them to transition out the military without any issues, it is almost entirely impossible to come about because of the constant development of war and conflict. Through the fundamental structure of the Schlossberg (2011) transition theory and 4’S model and Blanter (1991), role theory will examine the techniques required to limit the issues that may alter the future for many female veterans.

The current influx of female veterans within the past decade has brought some needed attention to the existing literature, reducing the current gap in the literature of the overwhelming experience female veterans have suffered in recent years. Rosellini et al., (2018), implies with the growing rate of service members especially the female veteran the onset of war is going to create issues the direct have a severe emotional setback for these veterans after experiencing sexual assault, which may directly lead to PTSD. Today female veterans take on the same combative role as a male veteran, and now serve in the same capacity in every aspect of war, which is a direct comparison to their male counterpart. Today’s military is about evolution and change that all started to transpire right after 9/11, where female has made a significant generational shift amongst the gender category, where they are now viewable in the same context as the male veterans. However, these new roles in the combat zone have also placed them in some dangerous situation, where this is following them after leaving the military. The vitality is evident provide a unique approach to understand the feature of military culture better to offer better assistance which will help them through their transition phase back into society (Reppert et al., 2014).

The researcher implies a gap in the literature that has gone too long not to address now and that is female veterans are suffering in more ways than imagined to transition back home to family and friends without re-living the trauma. Per, (Duggan & Jurgens, 2007; Reppert et al., 2014) the unemployment rate for female veterans (8.2%) is higher in comparison to the rate for male veterans (4.7%). The ongoing issue within the literature shows all forms of the gap in the transition process for female veterans, which results in some unfavorable outcomes for these veterans.

The theoretical foundation in this study is set to serve as a building block to the foundation to address the current problem within the literature, by using the correct research approach to determine which model and theories will be appropriate to address the issues in the study as well as the transition process. Leaping faith to leave the military is never an easy decision for many female veterans because of the uncertainty of their future. A future made more uneasy because of the main issues of PTSD, which can bring on other side effects such as MST, IPV, and SUD.

Schlossberg’s theory both the transitional factor and the 4’S model is set to instill the value of hope within the female veterans’ community. By, providing the proper guidance which allows them to capitalize on their life after the military, this method assists them in overcoming challenges and set back. The transitional theory use by Schlossberg has considered the theory is that it provides the most clarity for veterans. It is evidence that there is a growing epidemic taking place in the military that is influence these female veterans live outside of the service. Coping and handling change is never easy for the average person, now imaging has to deal with change after experiencing PTSD, or other issues such as MST, IPV, and SUD all issue are a potential setback in their transition process. Therefore, placing a burden on their role inside and outside of the service. However, the role theory is put into place to help to identify the specifics at hand, which has been hindering the process of transitioning out of the military correctly — the developing idea that included problems arising after transitioning back into society, overcoming challenges, and issues related to PTSD and another issue such as MST, IPV, and SUD. These are some of all the alarming problems that are interfering with female veterans, developing their new roles and identity.

The skill sets developed in the military are not like any other training the average person will ever experience; the knowledge gained from this experience can open up unique opportunities in the civilian sector. However, unlike the issues taking place on the battlefield, PTSD is something that cannot yet be adequately prevented if all the correct measures are in place to provide help to these female veterans. However, trying to address this issue is quite challenging as well to eliminate this stigma within the military that is cripple the female veterans’ community. Thus, it is possible that both men and women in the military may delay or never seek medical treatment for PTSD is true because of trying to uphold the masculine standards. The current literature implies that females who have experience MST will also suffer or have a higher chance of experience IPV were more likely to be divorced or separated than those who had not experienced IPV. The side effect of being subjected to SUD is experiencing psychosocial concerns such as homelessness and unemployment. A qualitative approach is indeed and is more suited for this field to gain in-depth access to female veterans as they explain their real-life consequences. The current collection of data was gathered by using a qualitative approach in describing the collection process through collecting articles and reading articles to support the present study, unstructured techniques to develop and add on to the current theme through the interview process (Carter et al. 2014). This provides the best possible way to accurately developed results during the interview process, capturing real-life experience through verbal clues and body language. In chapter 3 will be a detailed analysis which will involve a discussion for the design process as well as the data collection process. The technique of qualitative study will be considered to attain important information about the main objective of the study. The approach of systematic research work will be adapted to meet the significant criteria of research. Semi-structured interviews will be conducted to attain valuable opinion of anticipated female veterans to determine the actual reality of the research questions.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **Chapter 2 Summary**  (Minimum one to two pages) | | | | |
| Synthesizes the information from all prior sections in the Literature Review using it to define the key strategic points for the research. | 2 | 2 | X |  |
| Summarizes the gaps and needs in the background and introduction describing how it informs the problem statement. | 2 | 2 | X |  |
| Identifies the theory(ies) or model(s) describing how they inform the research questions. | 2 | 2 | X |  |
| Justifies the methodology, design, variables or phenomena, data collection instruments or sources, and population to be studied. | 2 | 2 | X |  |
| Builds a case (argument) for the study in terms of the value of the research and how the research questions emerged from the review of the literature. | 2 | 2 | X |  |
| Reflects that the learner has done his or her “due diligence” to synthesize the existing empirical research and write a comprehensive literature review on the research topic. | 2 | 2 | X |  |
| Summarizes key points in Chapter 2 and transitions into Chapter 3. | 2 | 2 | X |  |
| The chapter is correctly formatted to dissertation template using *the Word Style Tool* and APA standards. Writing is free of mechanical errors. | 2 | 2 | X |  |
| All research presented in the chapter is scholarly, topic-related, and obtained from highly respected, academic, professional, sources. In-text citations are accurate, correctly cited and included in the reference page according to APA standards. | 2 | 2 | X |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 | X |  |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

# Chapter 3: Methodology

# Introduction

The process of transitioning out of the military is quite challenging for so many veterans; it is tough to develop a plan that will be custom tailored to every veteran. Schlossberg theory is set to explain the true meaning of the transitioning process which will examine the road to transition and how it has a certain level of difficulty transitioning events that result in change, thus having an impact on relationships, routines, assumptions, and roles (Goodman & Anderson 2012; Schlossberg 1981). Even though recent studies do not truly capture the surrounding environment of the transition process or examine the transition experience of a military veteran, there is a gap in the literature examining the real-life experiences of female veterans as they transition out of the service (Flowers et al. 2014). Hereafter, the purpose of this qualitative method and descriptive qualitative design is to describe, examine, and explore the various outcomes to understand better how female veterans described their real-life experiences. To better understand how their lives are altered after they are transitioning out of the military with issues developed in the service and how they are coping with these issues to create a successful transition process back into society after leaving the service in Alaska.

The information gathered in this chapter will include a complete cross-examination of the research questions that will address a specific ongoing problem that is developed in this research — secondly, the development of the solid ideas that will lead to the correct method and design that will best support and align to the purpose of this study and explain in detail. The development of this chapter will cover a wide range of information which will cover the sample population, source data, and support the validity and reliability of the data-collection strategies. Afterward, the researcher outlines the systematic process and procedures used to analyze the results of the data. This chapter will include the correct method to take when using the ethical consideration methods, so each participants identity is safeguarded and identify the potentially limiting factor of this study. To conclude, in this chapter there will be a summary to explain the key points, and immediately followed-up with data analysis, additional findings, and newly developed trends outlined in Chapter 4.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **CHAPTER 3 INTRODUCTION**  (Minimum two to three paragraphs) | | | | |
| The introduction restates the purpose statement to the study. This section also outlines the expectations for this chapter. | 2.5 | 2.5 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Statement of the Problem

How female veterans in Alaska describes how PTSD influence their transition process from military. A successful transition process for female veterans consists of having their issues addressed before re-connecting back into society. Long-term effects of failure to address exposure to PTSD can have a negative impact on female veterans after they have served in the Armed Forces. Kintzle et al. (2015), suggests that female veterans should seek help during their transition phase as a way to provide a level of support if they have had PTSD. The ideas developed by Schlossberg (2011), which implies the 4'S are some of the coping resources of the transitioning process which are the situation, self, support, and strategies that helps determine a successful transition for female veterans. Female veterans that seek to reintegrate without support for exposure to PTSD often wind up dealing with mental and physical issues that hinder their lives from progressing after leaving the military.

A recent study showed that one in every four female veterans would suffer some form of trauma during their military service (Cichowski et al., 2017). While female veterans are the fastest growing segment of the military, they are also more likely than male veterans to suffer from the complex issues associated with PTSD (Cichowski et al., 2017; Creech et al., 2017; Kearns et al., 2016; Latta et al., 2016). What is missing from the body of research is any work that allows female veterans to tell their stories concerning how they cope with PTSD as civilians.

Previous researchers have noted how descriptive qualitative can provide the most authentic approach to capture the lived experiences of people through in-depth interviews that illustrate the phenomenon under examination. A descriptive qualitative study will be used in this study to help gather information that military and civilian leaders can use to design programs for female veterans that may have experienced PTSD.

The lack of services for the general population of female veterans underscores the need to examine current policies designed to address the mental and physical needs of female veterans as they transition out of the military. The findings from this study may provide military and civilian leaders with information that they can use to update future policies and procedures to prepare female veterans to better reclaim their civilian identity after being exposed to PTSD. Many prior studies only seem to be focused on the issues faced by male veterans (Brunger et al., 2013; Galily & Shimon, 2012; Gonzalez et al., 2014; Hammond, 2015; Robertson & Brott, 2013). This study adds to the body of knowledge by capturing first-hand experiences of the transition process from the general population of female veterans.

The veteran female population has grown over time due to the increase of war as well as conflict, and all the evidence consistently implies that it is not known how the female veterans will describe their real-life experiences after suffering a setback during their time in the military, which could influence their transition process. The overwhelming transformation of the present military has created this growing concern amongst research, indicating that the majority of the prior studies solely focus heavily on the male veterans instead of focusing the veteran's population as a whole (Blaauw-Hara, 2016; Johnston et al., 2010; Kranke et al., 2015). However, the contrast of this study will include the participation of 10 female veterans. The in-depth interview protocol is set to understand how PTSD has influenced the real-life experience of these female veterans as they begin the transition process out of the military. Many of these ongoing issues are impacting their mental and physical attributes which are subduing many of these female veterans' lives on a long-term basis ( Blias et al., 2018). There is a need to address some of these overlooked issues that many female veterans are experiencing during their time in service, which is haunting them in their new roles and life outside of the military. This is the reasoning for this study, to add to the current body of knowledge to address the gap in the literature surrounding the transitional experience of many female veterans after being exposed to certain symptoms that are directly connected to PTSD, which is creating set back within their reintegrating process back into society.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **STATEMENT OF THE PROBLEM**  (Minimum one to two paragraphs) | | | | |
| The research problem (Problem Statement) is restated for the convenience of the reader from Chapter 1. | 2 | 2 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Research Questions and Hypotheses

The research questions in this descriptive qualitative study are set to guide this process to an examination of female veterans' lives as they explain their real-life experience suffered during their time in the service which is influencing their transition process. According to Englander (2012), it is through openness and reflection on one’s previous phenomenological interviews that one can get a better interviewer, in a sensation very similar to the phenomenological training from one individual's point of view to show their empathic ability. The research questions will address the connection to the problem statement since it has yet to be known how female veterans described their real-life experience based on the situation that transpired during their time in the service that will influence a successful transition back to into their civilian life as they reintegrate back into society in the state of Alaska.

The current body of knowledge surrounding the topic suggests that the theories and the existing literature which are put in place is directly related to the current descriptive qualitative, indicating the complexity of transitioning out of the military. The transitional theory used by Schlossberg's (2011) will assist in providing the initial framework for RQ1, RQ2, and RQ3. The Schlossberg theory and the 4’S model is set to explore the resources that deal with the situation, self, support and the strategies that surround transitioning. The value of the 4S' has been explaining in various forms another researcher to indicate the theory conclude to a successful transition (Flowers et al. 2014; Griffen and Gilbert, 2015). Blanter's (1991) role theory explains the critical attribute to providing a vital foundation platform for the RQ1, RQ2, and RQ3. The theory developed by Blanter (1991), highlights as well as explains the contributing factors that are used in their theory to explore the interaction of the human experience based on their role in the military. The prestigious honor of serving in such a structure and organization as the military has put a strain on many of these female veterans' lives creating a significant impact as they transition out of the military. The study of female veterans often has been underexposed because of the masculinity of the military, placing a barrier within their lives which limited their ability to reach their full potential. The following research questions will guide the current descriptive qualitative study:

R0: How do female veterans in Alaska describes how PTSDF influence their transition process from the military?

R1: How the approach of transition of female veterans from military service is challenging considering the impact of PTSD?

R2: How different traits of military service play a positive role in the transition process of female veterans?

R3: What are military service traits that negatively influence the entire transition process for female veterans?

The primary source of data will consist of semi-structured interviews. Since female veterans make up a significant portion of the military this rapidly growing segment of today's population has been a huge contributor to the notable gap in the current body of knowledge. A suggestive recommendation will add to future studies to analyze the transition process with all of the related issues to settle if they impact only targeted female veterans. The Schlossberg transition theory and the role theory will show the different variations of the theoretical foundations to explain the importance of reading and provide some suggestions on managing the current topics that are affecting the lives of female veterans after their service commitment has ended. Female veterans in the military setting have subjected them to unforeseen issues that may have altered their transition process, which may be explained by their real-life experience and may enhance the body of knowledge surrounding the descriptive analysis of female veterans.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **RESEARCH QUESTIONS and HYPOTHESES**  (Minimum one to two pages) | | | | |
| **Qualitative Studies:** Restates the research questions and the phenomena for the study from Chapter 1.  **Quantitative Studies:** Describes the variables, at the conceptual, operational and measurement levels, then restates the research questions from Chapter 1 and presents the matching hypotheses. | 2 | 2 |  | X |
| Describes the nature and sources of necessary data to answer the research questions (primary versus secondary data, specific people, institutional archives, Internet open sources, etc.).  **Quantitative Studies:** Describes the data collection methods, instrument(s) or data source(s) to collect the data for each variable.  **Qualitative Studies**: Describes the data collection methods, instruments, and data sources to collect the data to answer each research question. | 2 | 2 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Research Methodology

This study will use a qualitative approach to examine the descriptive qualitative study that focuses on military transition and how these issues influence the future for many female veterans. The qualitative research focuses more on the in-depth study of people’s lives or the issues in their natural settings without resorting to standardized, pre-regulated categories of analytic thinking in the same capacity as the quantitative study (Yilmaz, 2013). The role of the qualitative study will help in getting the correct technique used to better interpret the burden of the participant and their lived experience in association with the current phenomenon. The qualitative study will explore all the options and avenues through the data aggregation procedure and interviews to understand the life experience of female veterans which they are impelled to speak. With the semi-structured interview format, the goal is to use a qualitative interview that is defined by a pre-set question guideline which is set to gather information. The qualitative research will provide the best possible result in addressing current issues through the problem statement, which is exploring the unknown of how the female veteran's life is transformed after serving in the military.

This study is not suited for the quantitative methodology because of the necessary real-life experience needed to examine and explore the behavior of these female veterans. According to Watson et al. (2014), the current study also provided a fuller investigation of satisfaction often inaccessible through a traditional quantitative method by using a multimethod approach. This method does not create the accurate reenactment of the real-life experience of these female veterans. The study sought to examine the personal connection to the veterans' through a similarity process to account for the issues that are brought about during their time in the military as they begin the transitional process phase.

The researcher in this study indicated that the mix-method approach is not an improved method that will provide any insight to the study. The current mix-method studies are comprised of both the qualitative and quantitative data which does not indicate a direct approach to the study. The mixed-method approach is inappropriate for this study; previous researchers acknowledge the collection process qualitative and quantitative data is not suitable for this current study. According to Kiessling and Harvey (2005), the mixed-method technique will offer a means to address the multifaceted problems more effectively due to flexibility and unconstrained view.

The previous studies employed various methods to evaluate the veteran population — the current researcher participants of qualitative studies which will explain how these real-life experiences will allow them to the ability to express freely their knowledge which is the meaning of this growing phenomenon ( Ditcher and True, 2014). The real-life experience will examine the overall performance of the veterans based on the information gathered. There is a gap in the literature directly aligning with the qualitative approach which is the best approach for this study. The qualitative study will best explore their real-life experience which will examine their military experience as they begin the process to transition out of the military back into society.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| **RESEARCH METHODOLOGY**  (Minimum one to two pages) | | | | |
| Provides a rationale for the research methodology for the study (quantitative, qualitative, or mixed) based on research books and articles. | 2.5 | 2.5 |  | X |
| Provides a rationale for the selected methodology based on **empirical studies** on the topic. | 2.5 | 2.5 |  | X |
| Justifies why the methodology was selected as opposed to alternative methodologies. | 2.5 | 2.5 |  | X |
| Uses an authoritative source(s) to justify the selected methodology. ***Note:*** *Do not use introductory research textbooks (such as Creswell) to justify the research design and data analysis approach.* | 2.5 | 2.5 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Research Design

The descriptive qualitative design will be used to examine the current fundamental qualitative description of the military transition process of female veterans. Gregg et al. (2016) conclude that the descriptions insights from the lived experience of student veteran's transitions and how practitioners and educators can address veterans’ needs in occupations in which meaning is shared. The descriptive qualitative study approach will allow the researcher the ability to understand better the detailed process of the military transition based on a summary of the data in conjunction with their real-life experience of female veterans. The pattern employed in this study will be descriptive qualitative design because the basic idea of the invention is applied to get the real-life experience of the female veterans, which will be taking part in the study. The research design is used to describe and explain the individual experiences of the female veterans.

The use of the descriptive qualitative design will be put in to help highlight the similarities and differences of the study. The primary goal of the descriptive qualitative design is to understand the motivations underlying volunteerisms used to gain this understanding of the study (Lamb et al., 2018). However, there were other designs up for consideration, but for this study, the descriptive qualitative design will produce the best possible result in sharing the female veteran's real-life experiences after their time in the military. The descriptive qualitative design is the most appropriate approach to address the research question surrounding that which will explain the real-life experience of female veterans through a comprehensive summary of data to connect their experience.

The descriptive qualitative approach is a direct design to explore the authentic approach which explains the real-life experience through an in-depth examination that aligns the phenomenon correctly with the female veteran's transitional theory (Latham, 2014). The study provided a pivotal platform that will display the female veterans real-life experience through shared moments that will highlight their experience through the roadmap of transitioning out of the military back into society. For this study, there could be various designs utilized to such as case studies, grounded theory, and ethnography the qualitative process that will support the descriptive design of this research. The descriptive qualitative design was the correct course of action for this study because it provides a comprehensive point-of-view that links as well as aligns the real-life experience of these female veterans.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **RESEARCH DESIGN**  (Minimum one to two pages) | | | | |
| Elaborates on the research design from Chapter 1. Provides the rationale for selecting the research design supported by empirical references. Justifies why the design was selected as the best approach to collect the needed data, as opposed to alternative designs. | 2 | 2 |  | X |
| **Quantitative Studies:** Provides the variable structure and states the unit of analysis. And unit of observation. If multiple data sources have different units of observation, specify the key variable for matching cases.  **Qualitative Studies:** Provides the unit of analysis and the unit of observation. If multiple data sources have different units of observation, specify the matching cases.  In qualitative study designs, the units of analysis (or observation) are each sample participant. In case study design (single or multiple), the unit of analysis is a “bounded system” in its own right. This could include one individual, one family, one group, one community, one school, one policy, one region, one state, one country, etc. The sample may include several participants, but these must be members of a homogeneous unit representing the “bounded system” that is the case study unit. | 2 | 2 |  |  |
| Uses an authoritative source(s) to justify the design. ***Note:*** *Do not use introductory research textbooks (such as Creswell) to justify the research design and data analysis approach.* | 2.5 | 2.5 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Population and Sample Selection

The general population for this descriptive qualitative study will consist of female veterans, both enlisted and officers who have experienced some PTSD. The sample population for this study is female veterans from the nation of Alaska who has felt some form of PTSD and the sample population for this study will include ten female vets who have gone through some form of PTSD, from the target population located within the central part of Alaska. The sample population will be female veterans who have begun the transition out of the military within the past deserve or who have severed since September 11, 2001. The location for this study will be concluded in the western geographic region of the United States with those who reside in the state of Alaska. The study expects to recruit 20 participants who are willing to tell their real-life experience based on the setback they experienced during their time in the military. The public data source such as advertisement board, flyers and handouts will be used as potential recruitment for participants to reach a target population to support the study.

This study will be advertised through various social media outlets through a recruitment statement. Recruitment may also come through word of mouth in the local veteran community. By, targeting both platforms will account for enough participants to replace someone if they decided not to participate or feel uncomfortable. The only outlier in requires of doing social media data collection is the protection of the participating private and the proper handling of their information and how it is stored in a secure location. The growth of this sample size for this study meet a minimum needed for fulfillment for a sample using a qualitative project, which is influenced by both theoretical and practical consideration many of these female veterans will come across these requirements based on their earlier experience (Robinson 2014). For this part of the study, random selection will provide a much more valid observation of the study.

According to Serra et al., (2018), using purposive sampling for this study, strategies is quite different from those of probabilistic sampling, seeming not a generalization or randomness, but the well-informed selection of very specific cases, capable of maximizing the chances of observing phenomena of interest, will allow the participants to be selected purposively based on the criteria identified from the target population of veterans that are willing to participate in this study. The target population goal is to capture female veterans that served in this current century, who have transitioned within the past five years from all branches of service that currently reside in the state of Alaska. The target population will only be geared towards assembling the specific information or details from female veterans in one specific region, the state of Alaska, to examine the impact PTSD has on their life after stepping aside from the military. The target must have experience or have been medically diagnosed with PTSD, during or after their time in the military. They must have transition within the last five years to ensure the validity of the data.

During this study, the sample size of this study based on the target population where most of the information will be gathered to indicate the current issues at hand for female veterans. There is an assessment of the known problem of female veterans to explain the events that take place and set off by addressing the problems at hand that many female veterans are feeling after leaving the service. Despite the study being limited to conclude one specific region in the United States, the study will be limited because of its geographical locations which make the selection process much more selective when it comes to the participants. If the required participant is not reachable for the study, there is a plan put into place to reach out to another participant, by expanding the time frame as well as expand on recruitment venues to maximize on the target population size to reach the anticipated sample size or until data saturation to collect the necessary data. This study is direct, align with the fundamental principle of the purposive because the goal is to directly screen and identify certain criteria that will help support and screening device to select and screen participants. By, utilizing the basic process, which will account for all demographic requires, the body of knowledge, and all of the experience to align with the purposefulness of study. Also, align the sample to the study to identify the needed element to implement within this process to focus on sampling model and also focus on the particular context characteristic that will support the current process and contribute to the study. There will be limited to how many people can fully participate in this study and the number of individuals who want to contribute to a current body of knowledge.

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **POPULATION AND SAMPLE SELECTION**  (Minimum one to two pages) | | | | |
| Describes:  The population of interest (The group to which the results of the study will be generalized or applicable) (such as police officers in AZ),  The target population from which the sample is selected (such as police officers in AZ who belong to the police fraternal association).  The study sample (individuals are drawn from the target population who provide the final source of data) (final number from whom complete data were collected). | 2 | 2 |  | X |
| 1. **Site Authorization and Recruitment** 2. Describes the process for obtaining site authorization to access the target population. 3. Describes the site authorization process (what needs to be included in the request) confidentiality measures, study participation requirements, and geographic specifics. 4. If public data sources or social media are used to collect data, although site permission is not required, provide arguments and evidence as to why these sources can be used without site permission. 5. Describes the sampling strategy and process for recruiting individuals to comprise the sample. | 2 | 2 |  |  |
| **Quantitative Sample Size Requirements**  Describes the expected study sample and the proposed and rationale:  An *a priori* or equivalent analysis and *post hoc* Power Analysis is required to justify the study sample size based on the anticipated effect size and selected design**.** Certain procedures are applicable for small samples. Those situations must be justified through computation or literature. Justification is based on the selected design and statistical procedures.  **G\*Power or equivalent computation is required.** G\*Power software can be downloaded from the link presented below <http://www.gpower.hhu.de/en.html> using an alpha error of 0.05, medium effect size and statistical power of 0.80 for each statistical analysis that is proposed.” | 2 | 2 |  | X |
| For proposals, this section discusses *a priori* computation, and for the dissertation, this section discusses both *a priori* and *post hoc* computation of statistical power based on actual sample size obtained through data collection. Screenshots of the computation for each statistical test (proposals – *a priori* and dissertation – *a priori* and *post hoc*) should be included in the Appendix  When calculating the expected return rate for questionnaires and surveys, assume the return rate is 5-10% when no incentives are provided and 15-20% when incentives are provided.  **Attrition:** When doing repeated measures studies in an experiment, learners should consider the probable loss to attrition.  **Qualitative Sample Size Requirements:** The sample size should be stated for each form of data collection including interviews, observations, questionnaires, documents, artifacts, visual data such as drawings and photographs, etc.  **Case Study:** Guideline: A minimum of 10 participants or cases in the final sample for interviews. Learners should pursue a minimum of 20 individuals to recruit to account for attrition; minimum of three sources of data; must demonstrate triangulation of the data across two sources for each RQ. Case study interviews may include closed-ended questions with a dominance of open-ended questions; should be no less than 30 minutes; no less than five pages of participant responses/speech in the transcribed data per interview, single-spaced, 12 pt. Times New Roman. A minimum of 50 questionnaires if the questionnaires will be used for thematic analysis. The size for other sources (e.g., number of documents or artifacts, observations, etc. should also be identified.  **Phenomenology**: Guideline: Minimum of 8 interviews. Learners should pursue 12 individuals to interview to account for attrition. Interviews should be 60-90 minutes. There should be no less than 12 pages of transcribed data, single-spaced, 12 pt. Times New Roman, per interview. Interview questions must be open-ended.  **Descriptive:** Guideline: A minimum of 10 participants in the final sample. Learners should pursue a minimum of 20 individuals to recruit; 2 sources of data; no less than five pages of transcribed data, single-spaced, 12 pt. Times New Roman, per interview.  **Narrative:** Purpose is a collection of stories around a phenomenon. The protocol offers questions that get the participant to tell their personal story regarding a phenomenon including the roles of stakeholders. Guideline: Minimum of 8 interviews. Learners should pursue 12 participants to account for attrition. Interviews should be 60-90 minutes. There should be no less than 12 pages of transcribed data, single-spaced, 12 pt. Times New Roman, per interview. Interview questions must be open-ended.  **Note:** A key criterion for selecting a sample size for a narrative study is to elicit long, in-depth of stories about the phenomenon which may be hours long.  **Grounded Theory:** Grounded theory studies yield a theory or model. Usually two rounds of data collection with interim analysis. Minimum of 50 pages of transcribed data from interviews, open-ended questionnaires, or other data sources. Transcripts are 12point font and single-spaced. Studies typically have a minimum of 10-30 interviews (45-60 minutes in length) and 40-60 open-ended questionnaires. Interview questions must be open-ended.  **Questionnaires or Surveys:** If used in the study the minimum number should be 40. This data collection method can be used in different qualitative designs. | 2 | 2 |  |  |
| **Strategies to account for attrition:** Students should consider the anticipated sample size will not be reached, so must provide a justification or alternative plan for the study (expanding time frame, expanding target population, changing the design to bring down sample size needed, or adding data collection approach, adjust an analysis). | 2 | 1.75 |  |  |
| Defines and describes the sampling procedures (such as convenience, purposive, snowball, random, etc.) supported by scholarly research sources. Includes a discussion of sample selection, and assignment to groups (if applicable), and strategies to account for participant attrition.  For a purposive sample identify the screening criteria and device for screening the participants (egg: a demographic questionnaire, expert knowledge of the topic, screening questions such as years of experience in a position). | 2 | 2 |  | X |
| Describes the study sample size. Provides evidence (based on the empirical research) literature that sample size is adequate for the research design and meets GCU required sample size requirements (listed in criteria below). | 2 | 2 |  |  |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Sources of Data

The instruments utilized to collect the information for this qualitative work will be linked up through the diverse operations of data collecting procedures through many kinds of data gathering techniques, such as interviews and field notes. The female veterans and the issues they face in the military was the phenomenon under examination to explore and add to the body of knowledge to better understand the issues that are influencing their transition process out of the military. According to Kivelitz et al. (2018), furthermore, the implementation and analysis of semi-structured qualitative interviews involves multiple subjective decisions, which is the correct approach to direct the issues of PTSD in this subject, and by bringing in the correct data, the best options will be in-depth interviews to show their similarities and differences in their real-life experiences.. The information surrounding the real-life experiences of the participant will be developed through open-end questions used in the semi-structured interview process. The primary data source that will be used is the semi- interviews; then the second method will be done by collecting information through an electronic recording device. This will aid in accumulating the needed data to illustrated the participant's responses to the inquiry and to paint a brilliant photograph of their response to locating the common courses or events that these female veterans are going through.

The research approach of focus group can establish as the second source of data for this study. This form of data collection helps research to collect focus piece of information from the relevant people in case of transition process of female veterans. It can be defined as suitable option to get detailed knowledge about the actual form of consideration. Focus group is one important form of qualitative research study that can be helpful to better handle the sensitivity of the issue of PTSD in case of transition procedure of female veterans into society. It will be referred in the form of pilot study by considering two relevant individuals to get initial knowledge about the concerns of female veterans.

Nonetheless, no data collection procedure can commence without the approval of Grand Canyon University Institutional Review Board (IRB). Before beginning the protocol of the interview procedures, the content must be reviewed by the expert panel to evaluate the validity of the question, which will lead to a more semi-structured interview protocol, then apply the input, suggestion, and recommendation given by the panel. Video chat and video recording is another source that may be utilized to reach the participants throughout the state of Alaska as another source of data collecting if they do not have time for an in-depth interview. The value of this method is instrumental for the researcher-practitioners to get in touch with their reveries in interviews because they may convey truths about participants’ experiences and the research relationship that are otherwise inaccessible (McVey et al. 2015). Secondary record data is characterized as the second source of data or considered instrument for the study to enhance understanding level about the required form of knowledge. The option of analysis of existing research work on this specific issue helps to determine the exiting trends about the influence of military routine on female veterans. Former research conclusions work to formulate better understanding of the entire perspective of military life for the females and how it influences their lives concerning its psychological concerns. Different forms of data collection delivered by government and other organizations help to determine the association between military functions and their impact on female veterans.

The interview protocol will consist of a demographic question that will be provided in Appendix D when created to provide a quick background of the participant to explain as well as examine the finding collected to support the study, which will be in the Appendix section. The coding is a process of the material into chunks or segments of text before bringing meaning to information (Rossman & Rallis, 1998). This section is only explained the basic scores of data used to develop the reliability of this study, which is through the interview process, observation, and electronic recording. Through the data collection process and source of data will this segment be used to break them into the segment to create different categories and labeling to look for key term and themes.

The semi-structured interview will provide an interpersonal connection to understand better the real-life experience many of these female veterans have encountered through their time in the military. By using a semi-structured interview will provide a closer look at the real-life experience that is taking place. The data collection instrument will be based on an interview platform that focuses on the issue at hand to explain these issues affection the overall demographic inside of the military which is interfering with the transition process. The qualitative interview process accounts for those face to face meeting which allows the participant to feel comfortable answering those open-ended questions to collect data and search for themes and trends. Very often data collecting takes place in a specified period, and qualitative data analysis is viewed as a next step in the research process after all data have been gathered and transcribed.

The use of descriptive qualitative design creates an environment that leans heavily on real-lived events. Capturing the lived experience will allow an opportune to learn from the current experience to help other people and organizations that may be facing that same issues and experiences. The interview process accounts for the real-life experience to come forth to collect valid data and give accurate documentation in what truly has transpired in their lives. Utilizing the proper technique to conduct comprehensive qualitative research will offer a huge advantage in the interview process when trying to collect data that will be vital to the study. The strength of the study will come from the semi-structured interview that will capture the in-depth response of the participant to add value to the study.

The structure data collection instrument and data sources that will provide the best overall assessment and observations will be the semi-structured interview. The facts that are gathered from this process will capture the issues at hand that is impacting the underlying process that will lead to a successful transition. The interview protocol will guide the responses that will be collected during the interview, which will be transcribed in a journal to explain the real-life experience these female veterans have to encounter during their time in the military service. The interview protocol will explain the informed consent. The next process in the will be to request permission to begin the recording of the interview.

This process will initiate the rapport building method with some simple and basic icebreaking question. The goals of this process are developing a rapport that will encourage a certain level of trust to gather information based on the semi-structured interview to uncover issues or concerns when it comes to elicit peoples own view and descriptions — followed by, the semi-structured interview question that will be geared to answering a series of the open-ended question based on the date and time of the interviewer and the interviewee. The next step will be to initiate a probe question that will further the current study. The complexity of the interview required comprehensive and efficient protocols for all data collection tasks. The last step will be to summarize and recap the current themes and traits, with a conclusion of the interview with a wrap-up. Then once that has been established an ice breaker session, then the interview question, and then the probing question, the researcher will be in the gathering data via of notes and other recording devices that will be transcribed later and to check for validity and reliability of the information. The documentation will explain each one of the research searches questions utilized to capture the various condition military, which military which is carrying over into their life after transitioning out of the military.

| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **RESEARCH MATERIALS, INSTRUMENTATION, OR SOURCES OF DATA**  (Minimum one to three pages) | | | | |
| **Data Collection Instruments/Materials**:  Provides a detailed discussion of the instrumentation and materials for data collection which includes validity and reliability of the data. Collection instrument or experiment.  Includes citations from original publications by instrument developers (and subsequent users as appropriate) or related studies. | 2 | 1.75 |  | X |
| **Data Collection Instruments/Materials:**  Describes the structure of each data collection instrument and data sources (tests, questionnaires, interviews, observations databases, media, etc.).  When using materials for an experiment, describes the structure of the experiment and the materials used for it. Specifies the type and level of data collected with each instrument. | 2 | 1.75 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Trustworthiness (for Qualitative Studies)

From a researcher's point of view, many methods can be employed to establish the trustworthiness of this study to create a strong conclusion based on the information gathered from the participant to establish the validity of a study. Qualitative research is the best possible way to define and support the meaning of the study by having quality information that will reflect on the study at hand. Instead of relying on the quantitative study to set the tone of the study, the qualitative study provides the best source in connecting with the credibility. Ngozwana (2018), the qualitative research approach employed in this study was deemed appropriate for the sample size and the phenomena under investigation. The specification used in this study will be put in place to address the multiple criteria of the graphic design to capture the credibility in addition to the trustworthiness of this study.

The goal of the researcher is to play a vital role in collecting information that will add to the current body of knowledge as well as the current descriptive qualitative study. The end goal of this study is to develop a certain level trustworthiness that is captured through this qualitative research (Cope, 2014). By expanding the current body of knowledge through preexisting studies and research by examining the previous descriptive design to support the real-life experience these veterans are experiencing during their time in the military by conducting an in-depth interview.

The interview protocol will guide the examination process of these lived experiences; many female veterans are transitioning with as they leave the military. The interviews protocol will be a series of events that will target multiple demographics of female veterans to explains their lived experience. Strategies performed at each stage of the research process not merely achieve the standards but also enrich the credibility and trustworthiness of the study (Polit & Beck, 2012). The interview design is utilized to explain the free flow of ideas and the response of each participant, the result of the flexibility of the study is to coexist with the interview protocol. The use of open-ended questions will encourage all the participants to think outside the box in addition to probing questions which will extract additional response to help support the findings of the study. Hunter (2012), the researcher will attempt to document the interpretations held by the research participant. The interview protocol will establish the tone for the study that will lead to substantial evidence gathered from the response to support the study. The interview protocol will be outlined in the Appendix which is critically reviewed by an expert panel.

| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **TRUSTWORTHINESS (for Qualitative Studies)**  Trustworthiness is the term used to describe the elements that establish the credibility, transferability, dependability, and confirmability of the study.  (Minimum two to four paragraphs or approximately one page) | | | | |
| **Qualitative “validity” is composed of credibility and transferability.**  Strategies generally include rigorous techniques and methods, thick description, audit trails, evident methodological processes and procedures, well-defined coding, ample examples of quotes, and findings that emerge from the data. | | | | |
| Defines the concepts of credibility, transferability  Credibility: discusses how the study represents the participants’ experiences  Transferability: discusses how the study’s findings may apply to policy, practice, future research | 2 | 1.75 |  | X |
| Describes the threats to the credibility and transferability of the study inherent in the study design, sampling strategy, data collection method/instruments, and data analysis  Addresses how these threats will be minimized | 2 | 2 |  | X |
| **Qualitative “reliability” is composed of dependability and confirmability**.  Establishes consistency and repeatability of data collection through in-depth documented methodology; detailed interview/observation/data collection protocols and guides; creation of research database; and use of triangulation. | | | | |
| Defines concepts of dependability and confirmability | 2 | 1.75 |  | X |
| * Dependability: discusses how the study documents research procedures | 2 | 2 |  | X |
| * Confirmability: discusses how the study could be confirmed or findings corroborated by others | 2 | 2 |  | X |
| Describes the threats to dependability and confirmability of the study inherent in the study design, sampling strategy, data collection method/instruments, and data analysis  Addresses how these threats will be minimized | 2 | 1.75 |  | X |
| Appendices must include copies of instruments, materials, qualitative data collection protocols, codebook(s), and permission letters from instrument authors (for validated instruments, surveys, interview guides, etc.) | 2 | 1.5 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Data Collection and Management

During this process, the people included in this study show the relevance of the study is set to address the problem statement of female veterans that have transitioned within the past years, which is not knowing how female veteran's with PTSD lives are transformed after serving in the military and how this will influence transition process. The researcher will use the data collection process as the primary instrument of choice to gather the appropriate information. Before beginning the data collection process, the researcher must receive IRB approval from Grand Canyon University. The data collected from the qualitative this study will use purposive sampling to justify the target and sample population of female veterans that have experienced some form of PTSD, which will be the parameter of the study. According to Serra et al. (2018), purposive sampling, for exploring the complex relationships between urban contextual characteristics and other variables of interest.

The evidence that is collected and gathered from the in-depth interviews, to show the connection of the similarities and differences in the response of the female veterans used to gather the appropriate information to formulate meaningful results to show the strategy, and the importance of the situation, which is transitioning female veterans. The interview process will be used to gather an excess of information from many of the female veterans that cannot participate in the in-depth interviews. First, the Pilot studies had to be present before the initial finding can lead off; therefore by using a pilot work will represent the central principle to proceed with the inquiry process. The purpose of this is to devise a timeline the focus on the big picture of the study. By, introducing the roles and limitation will allow the pilot studies to be applied to judge the feasibility of recruitment, randomization, retention, assessment procedures, new methods, and implementation of the new intervention — the pilot study all the researchers to be subjective and objective when choosing participants. A pilot study can better research in their effort in directing or control the goals of this study and through the descriptive qualitative study account for the best options for controlling the narrative. The process will begin by defining the interview protocol, which will be in Appendix C. The next step will be to the introduction of the study to the participant. Followed by an informed consent process and then acknowledgment of the recording. From a researcher's standpoint, the philosophy here is to take on the evidence further through the data collection methods, which the semi-structured, interviews to generate large amounts of data to provide valuable information.

The next step will be to initiate the interview protocol by opening up with an icebreaker, then followed by a series of semi-structured question. Then the necessary probing question to gather additional information, then a quick recap or the conclusion of the interview. While this process is taking place, raw data will be collected from the interviewee and then be transcribed will be run through a computer-generated program to check for facts or other traits, new themes, or trends. This process will be used to gather addition, evidence, as well as a variety of study used to support the methodologies. The field note will be used for later transcription to understand the participant's responses to the research to paint a vivid picture of their response to finding the common traits and trend of PTSD, which these female veterans are experiencing after their time in the military service. The value of this method is instrumental for the researcher-practitioners to get in touch with their reveries in interviews because they may convey truths about participants’ experiences and the research relationship that are otherwise inaccessible (McVey et al., 2015).

The data collection process expects to use only the sample population to collect the needed information from all participating female veterans. The data instrument must be put in place to show how the tools will be used in conjunction with the IRB review process, to protect the rights and well-being of the participant and protect the identity of the participant through the data collection instrument. During, these processes there are different methods used to interview to gather information via video recording or auto-recording. Sources of data for this phenomenological study involved the use of a demographic questionnaire, semi-structured interviews, and a researcher’s journal. The researcher interviewed ten female veterans found in the state of Alaska. Morse, (2015) and Seidman (2013), explain how earlier study and researchers will highlight qualitative studies produce significant quantities of data to support the tales; and therefore, recommended researchers maintain a sample size.

On that point are several approaches to collecting qualitative information. The data collection process steps will include current setting and boundaries of the study, by collecting information from a semi-structured interview platform based on the interview protocol. This process will help identify the purposive of the study of a pre-selecting individual who meets the criteria of the study. The researcher will also utilize field notes to support the gesture and body languages to complement the audio-recording, interview, also, the field notes will allow the researcher the ability clue in on the environmental contexts, behaviors, and nonverbal cues that may not be adequately captured through the audio-recording. This purposeful selection process will help the researcher understand the problem and the research question. The face-to-face in-person interview generates a solid foundation between the interviewer and the interviewee, it allows the participant to fill a timeline gap and replacing them historical data or information on what transpired and how did it transpire.

The informed consent will be drafted and sent to have the commitment and IRB for approval before distributing. The researcher will use audio or video recording data collection, and then the recordings will be transcribed verbatim before data analysis can begin. However, the informed content must be the first thing on the agenda before any piece of information has been released or discuss, without the consent, the information cannot be utilized in any manner. Also, the protection of individual privacy is a huge concern when discussing some past; a document will be drawn up specifying the specific detail on how the individual privacy will be safeguarded and store away in a locked room inside of lock cabinet and will be shed after a seven years' time frame. The subject field will rely heavily on semi-structured interviews with open-ended questions to elicit information surrounding their real-life experiences as female veterans who hold to begin the transition process out of the military to back into society.

The study noted the most effective qualitative study that will necessitate the use of interviews because of interviews allow for the capture of in-depth responses that may go unattainable via other information collection schemes. NVivo will be transcribing software program used to assist in the coding process to assist in the categories and thematic analysis. Afterward, the information would be bracketed based on the research questions and others from the information gathered. Notes field will be used to provide important details and context that will support the audio recording to assist in the reminder for later assessment. The information collected both on paper-based and electronic-based will be properly safeguarded and stored in a locked room with top-notched firewall and safe protocol surrounding the information gathered. And, will be store and keep for seven years' in a locked cabinet, inside of a locked office, inside of my home and when the to destroy the information, it will be properly sheltered and then burned.

| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **DATA COLLECTION AND MANAGEMENT**  (Minimum one to three pages) | | | | |
| **Quantitative Studies:** Describes the procedures for the actual data collection that would allow replication of the study by another researcher, including how each instrument or data source was used, how and where data were collected and recorded. Includes a linear sequence of actions or step-by-step of procedures used to carry out all the major steps for data collection. Includes a workflow and corresponding timeline, presenting a logical, sequential, and transparent protocol for data collection that would allow another researcher to replicate the study.  Data from different sources may have to be collected in parallel (e.g., paper-and-pen surveys for teachers, corresponding students, and their parents AND retrieval of archival data from the school district). A flow chart is ok—"linear" may not apply to all situations  **Qualitative Studies:** Provides a detailed description of the data collection process, including all sources of data and methods used, such as interviews, member checking, observations, surveys, and expert panel review. Note: The collected data must be sufficient in breadth and depth to answer the research question(s) and interpreted and presented correctly, by theme, research question and instrument. | 2 | 1.5 |  | X |
| Describes the procedures for obtaining participant informed consent and for protecting the rights and well-being of the study sample participants.  Include site authorization letter(s) and participants' informed consent (parents' consent and children's consent, as needed) in appendices. | 2 | 2 |  | X |
| Describes how raw data are prepared for analysis (i.e., transcribing interviews, conducting member checking, downloading from SPSS and check-ing for missing data).  Describes (for both paper-based and electronic data) the data management procedures adopted to maintain data securely, including the length of time data, will be kept, where it will be kept, and how it will be destroyed | 2 | 2 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 1.75 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Data Analysis Procedures

The data that is developed from this descriptive qualitative study is about walking a mile in these female veteran shoes to see the issues from their perspective. By, using the qualitative approach is one of the key factors and issues will align the information to match the data analysis to the management aspect that will provide a true snapshot of the participant history. These issues of PTSD have a significant impact on the female veteran’s community, which is displayed during the data analysis process. The thematic analysis approach of collecting data, provide a clear guideline as well as guidance to search for themes and patterns in finding the current descriptive study. The data is ready to be exhibited or displayed in the correct manner that will use a researching tool used in this qualitative study to account for the proper use and analysis of the techniques used that will highlight to the inquiry and the query of the participant of this study. The thematic analysis is the best possible solutions for this data analysis process that will align descriptive qualitative study to the current research and address each research question.

Using quality data will help produce a descriptive statistical summary to highlight the implication of the work. According to Braun and Clarke (2006), thematic analysis is a method for identifying, analyzing, and reporting patterns (themes) within the data. In this in-depth interview process will allow their voice to be heard and shed some light on the issues that create barriers and roadblock in their lives and search of current patterns and themes that will create an analysis that can be used in the future study. The information will be devised and trained for the interpretation of the data for analysis that will be exhibited during the findings. Then the transcribing of the statistical data will be run to check for common motifs and events taking place in this field.

Interpreting between the lines will explain the events at hand and used the coding techniques to generate a standard theme used to direct the research questions. The semi-structured interview will suffice as the main sources of collecting data surrounding the conversion process of female vets. Seidman (2013) explains that interviewing provides access to the context of people’s behavior and thereby offers a means for researchers to interpret the significance of that conduct.

The information, analysis process required an extended interrogation of the findings surrounding the lived experiences of female veteran and how they are making out with the current resources that enable a successful changeover from the military back into society after experiencing issues developed in the military. When developing a descriptive qualitative study, there are many suggested made to support the research questions should seek to explore a phenomenon from the individual’s period of opinion (Englander, 2012). The following research questions addressed the problem statement since it is not known how female veteran to describe their real-life experiences as they military transition out of the service and back into society and acquire techniques that will enable a successful changeover to the local community in Alaska.

The following research questions will guide the current descriptive qualitative study:

R0: How do female veterans in Alaska describes how PTSD influence their transition process from the military?

R1: How do female veterans in Alaska describe how PTSD influenced their transition process from the military concerning the idea of transition?

R2: How do female veterans in Alaska describes that how different traits of military service play a positive role in the transition process of female veterans?

R3: How do female veterans in Alaska indicate that the specific military service traits negatively influence the entire transition process for female veterans?

After all, these events have taken place in sequential order the events; the researcher will thank the participant and end the recording and begin the transcription will begin after the interview process has concluded. The only note will be transcribed on paper and then run, the information into a MAXqda and QRR NVivo for further transcriptions. The research questions, as considerably as the interview questions, will guide the direction of the data aggregation operation for this descriptive qualitative study. The current step-by-step procedure is based on the stringent methodology of the material that will be analyzed.

The element discovers in the data collection category will be based on the theme which is identified in the current literature (Braun, Clarke, Hayfield, & Terry, 2019). The thematic analysis developed by Braun and Clark consider as the method for this study. The method of the analysis will consist of the following 8 steps: preparation of data, defining the theme of analysis, developing categories and coding theme, pre-testing the coding scheme on a sample, coding all the text, assessing the consistency of coding employed, drawing inferences on the basis of coding or themes and presentation of results.

**Preparation of Data**

The first step of qualitative analysis is to ensure proper reading of the entire concept. The detailed understanding of interview structure will help to identify main themes from the content. The preparation of the data will begin the process to identify several ways to collect the qualitative data and then examine the content analysis, this process will allow the data to be transformed to help support the current research and researchers by clarifying the needs through the content and the collection process to justify the current data that will be transcribed during the analysis process.

**Defining the Theme of Analysis**

It is particular phase when it comes to proper organization of the entire data according to the actual requirements of the study. This specific step allows researcher to determine particular codes considering the meaningful prospect of main themes. The next step will be to define the current thematic analysis based on keyword, phrase or a sentence, provided by the female veterans to explain the content of the study.

The current theme of analysis should match the current literature to align the theme with the present idea and with the current theme it should be based on the current study.

**Developing Categories**

The third step of this analysis is also crucial that is come up with proper consideration of main themes of the research study. Proper consideration of initial codes helps to determine relevant theme for the study. The step in the data collection and analysis process will be to develop a category or coding scheme that will use to analyze the data by using three sources that will consist of the primary data, theories of the topic and empirical study. For the qualitative content analysis can be based on both inductive and deductive approaches, the categories and codes need to be developed based on the approach adopted (Datt, 2014).

**Developing Themes**

It is critical to check the overall effectiveness of overall themes used for the study. This part of the analysis will be assistive for researcher to consider the themes which are relevant to main feature of concern in the form of transition process of female veterans.

**Define Themes**

This certain stage allows researcher to modify initial themes according to the changing perspective of the research work. It is important to explicitly explain the entire idea of thematic approach to figure out all the relevant features. Refinement of themes relevant to main research objective is helpful to narrow down the procedure of research.

**Pre-Testing**

It is crucial to test the overall significance of the theme to select the most appropriate approach. This form of consideration helps to determine relevant themes to the main objective of the research study.

**Assessing the Consistency**

Assurance proper consistency between all the related themes is also integral to ensure the correctness of the outcomes of this study.

**Write-Up**

The final step demands researcher to start writing about the final themes considering the main objective of the study.

The qualitative study is designed to link the important details together to provide an accurate interpretation of current theories with existing theories to draw any conclusion that will help develop new theories to ensure a consistent coding process. The next step will be the pre-testing, coding scheme which will be used in conjunction with the qualitative data, but to ensure the consistency will be important, the goals are creating a research process that will be used to create a simple process that will use existing data.

The coding process is all text the will consist of important details that will be applied to the current coding process that is connected with the data. The assessing consistency will be based on the coding process, by, using a whole data proves which will use the proper valid and dependability process that will be checked according to the IRB. After conducting an extensive validation process is where the researcher can draw a conclusion basis on the coding and categories generated, by, the current theme generated to explore the various properties, dimension developed, which will be used the use to uncover current patterns that will. The current presentation will be the consequences of all of the ideas which are the conclusion of the field that will help undercover the developing procedure from the theme to increase interpretations based on the raw data which is set to create new themes. The interview guide supports consistency in the interviews and functions as a tool that relates to the research problem, research questions and recent relevant literature (Pedersen et al. 2016).

The evidence used in this study could have utilized many different designs and method, however, to carefully gather the correct information needed to support the research question and help identify the problem the best approach to this study was to use the descriptive design and analysis to help analysis all of the evidence and facts that will be gathered throughout this study, with the assistant of the thematic analysis. The real-life experience approach with the assistance of thematic analysis will highlight the issues that many of these female veterans are struggling to overcome. The justification for using the statistical data to support the study is because the study solely focuses on female veterans and is geared to explaining the current problem and issues amongst the veteran female population and non-statistical data analysis will be female that are not yet veterans or never served or the male population both active, veterans, and never served population. At this time, this study is geared toward the veteran female population and will have to be further expanded in the future to account for both male and female veterans. The data analysis will not change because the presence of antlers will interfere with the study and the overall message of the study.

| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **DATA ANALYSIS PROCEDURES**  (Minimum one to three pages) | | | | |
| Lists the problem statement or purpose statement, along with the research question(s). Also includes the null and alternative hypotheses for quantitative studies. | 2 | 2 |  | X |
| Describes in detail the relevant data collected for each stated research question and each variable within each hypothesis (if applicable).  **Quantitative Studies:** "In detail" means scales (and subscales) of specified instruments AND type of data for each variable of interest. IMPORTANT: For (quasi) experimental studies, provide a detailed description of all treatment materials per treatment condition, as part of the description of the independent variable corresponding to the experimental manipulation. | 2 | 1.5 |  | X |
| Describes, in detail, the data management practice including how the raw data were organized and prepared for analysis, i.e., ID matching of respondents who may respond to more than one survey/instrument, coding/recoding of variables, treatment of missing values, scoring, calculations, etc.  **Qualitative Studies:** (1) describes transcription process for interviews, focus groups, descriptive statistics (mean scores, percentages) calculated for surveys, observation checklists, etc. | 2 | 1.5 |  | X |
| **What:** Describes, in detail, statistical and non-statistical analysis to be used and procedures used to conduct the data analysis.  **Quantitative Studies:** (1) describe data file preparation (descriptive statistics used to check completeness and accuracy; *for files from different sources*, possibly aggregating data to obtain a common unit of analysis in all files, necessarily merging files (using the key variable defining the unit of analysis); (2) computation of statistics for the sample profile; (3) computation of (subscales and) scales; (4) reliability analysis for all scales and subscales; (5) computation of descriptive statistics for all variables of interest in the study (except those already presented in the sample profile); (6) state and justify all statistical procedures ("tests") needed to generate the information to answer all research questions; and (7) state assumptions checks for all those statistical procedures (including the tests and / or charts to be computed).  **Qualitative Studies:** This section begins by identifying and discussing the specific analysis approach or strategy, followed by a discussion of coding procedures used. Note: coding procedures may be different for Thematic Analysis, Narrative Analysis, Phenomenological Analysis, or Grounded Theory Analysis. | 2 | 1.5 |  | X |
| **Why:** Justifies each of the (statistical and non-statistical) data analysis procedures used in the study.  If a change in the analysis was made, explains what was done versus what was planned and why. | 2 | 1.5 |  | X |
| **How:** Demonstrates how the statistical and non-statistical data analysis techniques align with the research questions/design. | 2 | 2 |  | X |
| **Quantitative Analysis** - states the level of statistical significance for each test as appropriate, and describes tests of assumptions for each statistical test.  **Qualitative Analysis** - evidence of qualitative analysis approaches, such as coding and theming process, must be completely described and included the analysis /interpretation process. Clear evidence from how codes moved to themes must be presented. | 2 | 2 |  | X |
| Provides evidence that quantity and quality of data are sufficient to answer the research questions. This must be present in this section or an appendix including data samples. | 2 | 1.5 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Ethical Considerations

This descriptive qualitative study will discuss the anticipated ethical issues surrounding the research, including how human subjects and this data will protect the identity of the participants. Before continuing with the study, the researcher must complete extensive ethical training. This section should also reference necessary guidelines of the IRB and in addition to the Collaborative Institutional Training Initiative (CITI) provides researchers with basic knowledge of the requirements needed to adhere to consistent ethical standards throughout the research process before receiving the approval(s) before conducting these styles of research. According to Seidman (2013), the Belmont Report system is the preferred method or requirement to fulfill the researchers involving human participants to endure by the ethical rules of justice, respect, and beneficence. The participating recruits and subject must sign a consent form before any initial contact has been established or process, in addition to explaining how site authorization will be held if it is necessary for this study. If there is some potential life or death situation, excepted to treat the issues according, with the idea of protecting the participant identity, regardless of the position the participant identity is the main concern of this survey. Lastly, permission must be secured from the Grand Canyon University IRB before starting the data collection process.

The current bias of this study will bring a new lasting impact to the current body of knowledge as well as to the scientific approach to the literature. By warding off the overarching appearance of prejudice based on gender, female veteran personality was not employed in this work. An extra step required by the researcher to address the perceptual experience of bias was the practicing of the concept of bracketing. Moustakas (1994) will explain the importance of the bracketing system in how the initial measure was needed to alleviate biases because it involves the power to abstain from developing judgment based on real-life experience of these female veterans and how this issue bears on their lives even after the warfare is over, or their commitment is down.

Before submitting any transcription of the interview session, the researcher will use a software program to transcribe the recording or obtained a non-disclosure agreement from the company rendering services, if a professional transcription service is used. Planning to protect the privacy of the topics must be included to ensure the documents such as consent forms and demographic questionnaires in a filing cabinet that will only be accessible to the current researcher. The electronic data and journal notes will also remain secured in the researcher's password-protected computer. The data will be retained for seven years, after which all electronic copies will be permanently deleted from a computer’s hard drive and all hardcopy documentation it will be destroyed by crosscutting shredding.

**IRB Alert**

**Please be aware that GCU doctoral learners may not screen, recruit, or collect any data until they receive Institutional Review Board (IRB) approval and obtain a signed D-50 form. IRB review occurs after the proposal is approved by AQR and the proposal defense is completed. Learners are responsible for knowing, understanding, and following the IRB submission and review processes. Screening, recruiting participants, and collecting data in advance of IRB approval is a serious research ethical violation, with legal and federal regulatory implications to the University. If a learner chooses to screen or recruit study participants, or collects data in advance of obtaining IRB approval (IRB approval letter and D-50 form), s/he will be subject to serious academic disciplinary action by the Institutional Review Board and Code of Conduct committee. This may include collecting new data or requiring the learner to start over with a new research study. In addition, the Code of Conduct committee will issue a disciplinary action that may include warning, suspension, or dismissal from the program.**

**Note: Learners should NEVER proceed with any aspect of participant screening, recruiting, interacting with participants, or collecting data in advance of receiving the IRB approval letter and the signed D-50 form. The chairs and committee members are trained on these requirements; however, the learner is ultimately responsible for understanding and adhering to all IRB requirements as outlined in the University Policy Handbook and Dissertation Milestone Guide.**

*Figure 2*. IRB alert.

| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **ETHICAL CONSIDERATIONS**  (Minimum three to four paragraphs or approximately one page) | | | | |
| Provides a discussion of ethical issues, per Belmont Report and IRB guidelines, related to the study and the study population of interest.  Explains which principles/issues are relevant to the study.  Identifies the potential risks for the harm that are inherent in the study. |  | 1.75 |  | X |
| Describes the procedures for obtaining informed consent and for protecting the rights and well-being of the study sample participants. | 2.5 | 2.5 |  | X |
| Addresses key ethical criteria of anonymity, confidentiality, privacy, strategies to prevent coercion, and any potential conflict of interest. | 2.5 | 2.5 |  | X |
| Describes the data management procedures adopted to store and maintain paper and electronic data securely, including the length of time data will be kept, where it will be kept, and how it will be destroyed.  Explains what he/she planned to do/did to implement each of the principles/issues that are relevant to the study data management, data analysis, and publication of findings.  **Note:** Learners are required to securely maintain and have access to raw data/records for a minimum of three years. If asked by AQR reviewer or CDS representative, the learner must provide all evidence of data including source data, Excel files, interview transcripts, evidence of coding or data analysis, or survey results, etc. No dissertation will be allowed to move forward in the review process if data are not produced upon request. | 2 | 2 |  | X |
| Includes a copy of IRB Informed Consent (Proposal) and IRB Approval letter (Dissertation) in an Appendix.  All approvals, consent forms, recruitment, and data collection materials are mentioned in the Data Collection section and included in separate appendixes (with appropriate in-text references). |  | 1.75 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2 | 2 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Limitations and Delimitations

Chapter 3 will address the broad, overall limitations and delimitations of the field. This section describes any limitations and delimitations related to the methods, sample, instrumentation, data collection process and analysis. At that place were several limitations presented in this current qualitative phenomenological study. Other methodological limitations and delimitations of the study may include issues regarding the study design, sample regarding size, population and procedure, instrumentation, data collection processes, and data analysis. Maiccao & Smith (2016), recognized that the inquiry is limited despite this fact, study participants readily remembered their experiences. Limitations factors of this study might suggest a limiting factor in the field.

The restriction of the subject would be the smallest size and the emplacement of the subject since the subject is only distributed to ten female veterans in one general area. With such a limited sample size the study may create a further gap in the field. The information collection process expects to use the sample size and the prey population to pick up the needed info from all participating female veterans; the researcher has no control over, such as bias develop from the response gathered through the consultation procedure. Those who lack knowledge of, or acquaintance with military help, may not fully understand this subject. This section also contains an explanation of why the existing limitations are unavoidable and are not expected to affect the results negatively.

The delimitations factors that take place in the study are required items constant control as the researchers, to explain the step-by-step instruction that provides insight into the study based on size and demographics. The descriptive qualitative study presented a delimitation factor to this study because the sample population was just restricted to female veteran instead of both male and female veterans. The journals will be used to transcribe the participant's responses to the research to paint a vivid picture of their response to locating the common trends or issues that these female veterans have experienced things over which the researcher has control, such as the location of the study. In accession to the delimited facts of this study female veteran issue became a famous gap in the current literature because there is no evidence showing how these events are impacting the larger growing the segment in the veteran community — most of the literature related to understanding a woman’s experience (Baechtold & De Sawal, 2009).

| **Criterion**  **\*(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **LIMITATIONS AND DELIMITATIONS**  (Minimum two to three paragraphs) | | | | |
| Reiterates those limitations listed in Ch. 1 and explains why the existing limitations are unavoidable.  Describes any delimitations related to the methodology, sample, instrumentation, data collection process, and analysis.  Note: This section must be updated as limitations emerge in the data collection/analysis, and then incorporated in Chapter 5 the limitations overall and how the study results were affected. | 2 | 2 |  | X |
| States consequences of each limitation and delimitation in terms of data quantity, quality, and validity / generalizability of the findings.  Discusses strategies to minimize and mitigate the negative consequences of limitations and delimitations. | 2 | 2 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

## Summary

Chapter 3 provided an extensive overview of the current methodology of this descriptive qualitative study. This study aimed to describes the experience that PTSD has on the female veteran community and how it will impact their ability to have a successful transition out of the military. The transition process varies from person to person and having the correct coping skill in place to reintegrate back into society has yet to be incorporated into the transition process for many of these female veterans. Thus, hindering their process to cope with society in the state of Alaska. The qualitative phenomenological will be correctly aligned with the ten strategic points, which will help explore the real-life experience of female vets who are suffering from various issues developed in the military.

The developmental issues discovered during the initial study are set to explore the unknown which is how female veterans' lives are altered after leaving the service after suffering from the issue created by the military. The research question aligned with the problem statement, as it was not known how female veteran describe their real-life experiences of the military and how that influences their out of the military to maintain a successful life outside of the service.

Dichter and True (2014) resisted participants of qualitative studies could take into account the female veterans the opportunity to speak without restrictions express because of the shared experiences versus the constraints of predetermined categories developed by using the quantitative methods. Therefore, the phenomenological design was the best approach to explain real-life experiences for these female veterans. The descriptive qualitative design was appropriate because the first effort of a descriptive qualitative study is to provide a broad description of the real-life experience of these female veterans. The semi-structured interviews will align correctly with the research questions to capture need responses surrounding the real-life experiences of the female veterans. The researcher-maintained adherence to ethical standards while leading this survey. Additionally, to protect participants’ identity, the researcher codes to all identifiable pieces of data. Chapter 4 includes an explanation of the predominant themes that come forth from rich descriptions of the real-life experiences of a female veteran.

| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| --- | --- | --- | --- | --- |
| **CHAPTER 3 SUMMARY**  (Minimum one to two pages) | | | | |
| Summarizes key points presented in Chapter 3 using authoritative, empirical sources/citations. | 2.5 | 2.5 |  | X |
| The document shows the alignment of title, problem statement, purpose statement, RQs and hypotheses, methodology, design, data collection and instruments, and analysis. | 2.5 | 2.5 |  | X |
| Ends Chapter 3 with a transition discussion to focus for Chapter 4. | 2.5 | 2.5 |  | X |
| The Chapter is correctly formatted to dissertation template using the Word Style Tool and APA standards. Writing is free of mechanical errors. | 2.5 | 2.5 |  | X |
| All research presented in the Chapter is scholarly, topic-related, and obtained from highly respected academic, professional, sources. In-text citations are accurate, correctly cited and included in the reference page according to APA standards. | 2.5 | 2.5 |  | X |
| The section is written in a well structured way, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. | 2.5 | 2.5 |  | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions Maybe Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

# References

Ahern, J., Worthen, M., Masters, J., Lippman, S.A., Ozer, E.J., & Moos, R. (2015). The challenges of Afghanistan and Iraq veterans’ transition from military to civilian life and approaches to reconnection. PLOS ONE, 10(7), 1-13. doi: 10.1371/journal.pone.0128599

American Psychiatric Association. (1980). Diagnostic and statistical manual of mental disorders-III-R. Retrieved from http://www.dsm.psychiatryonline.org

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (text revision). 5th ed. Arlington, TX: American Psychiatric Association.

Anderson, M. L., & Goodman, J. (2014). From military to civilian life: Applications of Schlossberg's Model for Veterans in Transition. Career Planning & Adult Development Journal, 30(3), 40-51.

Atieno, O. P. (2009). AN ANALYSIS OF THE STRENGTHS AND LIMITATION OF QUALITATIVE AND QUANTITATIVE RESEARCH PARADIGMS. Problems Of Education In The 21St Century, 1313-18.

Baechtold, M., & De Sawal, D. M. (2009). Meeting the needs of women veterans. NEW DIRECTIONS FOR STUDENT SERVICES, (126). 35

Bastian, L.A., Hayes, P.M., Haskell, S.G., Atkins, D., Reiber, G.E., LaCroix, A.Z., & Yano, E.M. (2016). Improving our understanding of health issues in older women veterans. Gerontologist, 56(Suppl 1), S10-S13. doi:10.1093/geront/gnv672

Bartlett, B. A., Iverson, K. M., & Mitchell, K. S. (2018). Intimate partner violence and disordered eating among male and female veterans. Psychiatry Research, 260, 98–104. https://doi-org.lopes.idm.oclc.org/10.1016/j.psychres.2017.11.056

Bean-Mayberry, B., Yano, E. M., WA, D. L., Goldzweig, C., Batuman, F., Huang, C., Shekelle, P.G. (2011). Systematic review of women veterans’ health: Update on successes and gaps. Women’s Health Issues, 21 (Suppl.), S84 S97.http://dx.doi.org/10.1016/j.whi.2011.04.022

Blaauw-Hara, M. (2016). The military taught me how to study, how to work hard”: Helping student-veterans transition by building on their strengths. Community College Journal of Research and Practice, 40(10), 809-823. doi:10.1080/10668926.2015.1123202

Blackwell, A. F., Eckert, C. M., Bucciarelli, L. L., & Earl, C. F. (2009). Witnesses to Design: A Phenomenology of Comparative Design. Design Issues, 25(1), 36-4

Blais, R. K., Geiser, C., & Cruz, R. A. (2018). Specific PTSD symptom clusters mediate the association of military sexual trauma severity and sexual function and satisfaction in female service members/veterans. Journal of Affective Disorders, 238, 680–688. <https://doi-org.lopes.idm.oclc.org/10.1016/j.jad.2018.05.052>

Blatner, A. (1991). Role dynamics: A comprehensive theory of psychology. Journal Of Group Psychotherapy, Psychodrama & Sociometry, 44(1), 33.

Blonigen, D. M., Bui, L., Britt, J. Y., Thomas, K. M., & Timko, C. (2016). Internalizing and externalizing personality subtypes predict differences in functioning and outcomes among veterans in residential substance use disorder treatment. Psychological Assessment, 28(10), 1186-1197. doi:10.1037/pas000025

Bowling, U., & Sherman, M. (2008). Welcoming them home: Supporting service members and their families in navigating the tasks of reintegration. Professional Psychology: Research and Practice, 39(4), 451-458

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. QUALITATIVE RESEARCH IN PSYCHOLOGY, (2), 77. Retrieved from <https://lopes.idm.oclc.org/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=edsbl&AN=RN186664230&site=eds-live&scope=site>

Braun, V., Clarke, V., Hayfield, N., & Terry, G. (2019). Thematic analysis. *Handbook of Research Methods in Health Social Sciences*, 843–860.

Breiding, M.J., Smith, S.G., Basile, K.L., Walters, M.L., Chen, J., & Merrick, M.T. (2014). Prevalence and characteristics of sexual violence, stalking, and intimate partner violence victimization – National Intimate Partner and Sexual Violence Survey, United States, 2011 Surveill. 63 pp. 1-18

Breiding, M. J., Basile, K. C., Smith, S. G., Black, M. C., & Mahendra, R. R. (2015). Intimate partner violence surveillance: Uniform definitions and recommended data elements, version 2.0. Atlanta, GA: Centers for Disease Control and Prevention.

Brue, K. L., & Brue, S. A. (2016). Experiences and Outcomes of a Women's Leadership Development Program: A Phenomenological Investigation. Journal of Leadership Education, 15(3), 75-97

Buckner, J. C., Bassuk, E. L., & Zima, B. T. (1993). Mental health issues affecting homeless women: Implications for intervention. American Journal of Orthopsychiatry, 63, 385–399. doi:10.1037/h0079445

Bureau of Labor Statistics (2014c). The employment situation of veterans – April 2014. Retrieved from [www.bls.gov/news.release/pdf/empsit.pdf](http://www.bls.gov/news.release/pdf/empsit.pdf)

Buttner, M. M., Godfrey, K. M., Floto, E., Pittman, J., Lindamer, L., & Afari, N. (2017). Combat exposure and pain in male and female Afghanistan and Iraq veterans: The role of mediators and moderators. Psychiatry Research, 7. https://doi-org.lopes.idm.oclc.org/10.1016/j.psychres.2017.07.001

Byrne, M. M. (2001). Understanding life experiences through a phenomenological approach to research. Association of Operating Room Nurses. AORN Journal, 73 (4), 830-832.

Caelli, K., Ray, L., & Mill, J. (2003). ‘Clear as Mud’: Toward Greater Clarity in Generic Qualitative Research. International Journal of Qualitative Methods, Vol 2, Iss 2, Pp 1-13 (2003), (2), 1. https://doi-org.lopes.idm.oclc.org/10.1177/160940690300200201

Canfield, J., & Weiss, E. (2015). Integrating Military and Veteran Culture in Social Work Education: Implications for Curriculum Inclusion. Journal Of Social Work Education, 51S128-S144.

Caplan, P. J. (2013). Sexual Trauma in the Military: Needed Changes in Policies and Procedures. Women's Policy Journal Of Harvard, 81-90.

Carter, N., Bryant-Lukosius, D., DiCenso, A., Blythe, J., & Neville, A.J. (2014). The use of triangulation in qualitative research. Oncology Nursing Forum, 41(5), 545-547. doi:10.1188/14.ONF.545-547

Cassidy, C., Bishop, A., Steenbeek, A., Langille, D., Martin-Misener, R., & Curran, J. (2018). Barriers and enablers to sexual health service use among university students: a qualitative descriptive study using the Theoretical Domains Framework and COM-B model. BMC Health Services Research, Vol 18, Iss 1, Pp 1-12 (2018), (1), 1. https://doi-org.lopes.idm.oclc.org/10.1186/s12913-018-3379-0

C'de Baca, J., Nason, E., Castillo, D. T., Keller, J., Chee, C. L., & Qualls, C. (2016). Examining Relationships Among Ethnicity, PTSD, Life Functioning, and Comorbidity in Female OEF/OIF Veterans. Journal of Loss & Trauma, 21(5), 350-359. doi:10.1080/15325024.2015.1084851Cichowski, S. B., Rogers, R. G., Clark, E. A., Murata, E., Murata, A., & Murata, G. (n.d). Military Sexual Trauma in Female Veterans is Associated with Chronic Pain Conditions. Military Medicine, 182(9-10), E1895-E1899.

Chapman, S. L. C., & Wu, L.-T. (2014). Suicide and substance use among female veterans: a need for research. Drug & Alcohol Dependence, 136, 1–10. https://doi-org.lopes.idm.oclc.org/10.1016/j.drugalcdep.2013.11.009

Clemens, E.V., & Milsom, A.S. (2008). Enlisted service members' transition into the civilian world of work: A cognitive information processing approach. The Career Development Quarterly, 56(3), 246-256. doi:10.1002/j.2161-0045.2008.tb00039.x

Cloitre, M., Jackson, C., & Schmidt, J. A. (2016). Case Reports: STAIR for Strengthening Social Support and Relationships Among Veterans with Military Sexual Trauma and PTSD. Military Medicine, 181(2), e183-e187. doi:10.7205/MILMED-D-15-00209

Cooper, L., Caddick, N., Godier, L., Cooper, A., Fossey, M., & Engward, H. (2017). A model of military to civilian transition: Bourdieu in action. Journal of Military, Veteran and Family Health 3:2, 53-60. https://doi.org/10.3138/jmvfh.4301

Cope, D. G. (2014). Methods and Meanings: Credibility and Trustworthiness of Qualitative Research. Oncology Nursing Forum, 41(1), 89-91. doi:10.1188/14.ONF.89-91

Cortini, M. (2014). Mix-method research in applied psychology. *Mediterranean Journal of Social Sciences*, *5*(23), 1900.

Creech, S. K., Macdonald, A., Benzer, J. K., Poole, G. M., Murphy, C. M., & Taft, C. T. (2017). PTSD symptoms predict outcome in trauma-informed treatment of intimate partner aggression. Journal of Consulting and Clinical Psychology, 85(10), 966-974

Creswell, John W. 2007. Qualitative Inquiry & Research Design: Choosing among Five Approaches. Thousand Oaks, CA: Sage.

Crompvoets, S. (2011). The health and wellbeing of female veterans: A review of the literature. Journal of Military & Veterans’ Health, 19(2), 25–31. Retrieved from <https://lopes.idm.oclc.org/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=72321363&site=eds-live&scope=site>

Crowne, S. S., Juon, H.-S., Ensminger, M., Burrell, L., McFarlane, E., & Duggan, A. (2011). Concurrent and long-term impact of intimate partner violence on employment stability. Journal of Interpersonal Violence, 26, 1282–1304. <http://dx.doi.org/10.1177/0886260510368160>

Curtis, S.A. (2012). Support from behind the lines: 10 steps to becoming a military-ready employer. Retrieved from <http://www.shrm.org>

Daniels, R. R. (2016). Training, Training, and More Training. Army Sustainment, 48(5), 54-57.

Dardis, C. M., Amoroso, T., & Iverson, K. M. (2017). Intimate partner stalking: Contributions to PTSD symptomatology among a national sample of women veterans. Psychological Trauma: Theory, Research, Practice, And Policy, 9(Suppl 1), 67-73. doi:10.1037/tra0000171

Darawsheh, W. (2014). Reflexivity in research: Promoting rigour, reliability and validity in qualitative research. International Journal of Therapy & Rehabilitation, 21(12), 560-568.

Datt, S. (2016), 8-step procedure to conduct qualitative content analysis in a research. theses, dissertations and presentations. Project Guru

Daywalt, T. (2014). THE REALITY OF VETERAN UNEMPLOYMENT: The National Guard and Federal Reserve. Career Planning & Adult Development Journal, 30(3), 114-122.

Decker, K. P., Peglow, S. L., Samples, C. R., & Cunningham, T. D. (2017). Long-Term Outcomes After Residential Substance Use Treatment: Relapse, Morbidity, and Mortality. Military Medicine, 182(1), e1589-e1595. doi:10.7205/MILMED-D-15-00560

Department of Defense. (2012). Annual report on military services sexual assault, available at [http://www.sapr.mil/public/docs/reports/FY12\_ DoD\_SAPRO\_Annual\_Report\_on\_Sexual\_Assault-volume\_one.pdf](http://www.sapr.mil/public/docs/reports/FY12_%20DoD_SAPRO_Annual_Report_on_Sexual_Assault-volume_one.pdf) (accessed 24 October 2015).

Department of Veterans Affairs. (2014). Projected veteran population: 2013 to 2043. Retrieved from <http://www.va.gov/vetdata/docs/quickfacts/Population_slideshow.pdf>

Dichter, M. E., Cerulli, C., & Bossarte, R. M. (2011). Intimate partner violence victimization among women veterans and associated heart health risks. Women's Health Issues, 21 (4 Suppl), S190–S194. doi:10.1016/j.whi.2011.04.008

Dichter, M. E., & Marcus, S. C. (2013). Intimate partner violence victimization among women veterans: Health, health care service use, and opportunities for intervention. Military Behavioral Health, 1, 107–113. <http://dx.doi.org/10.1080/21635781.2013.830062>

Dichter, M. E., Wagner, C., Borrero, S., Broyles, L., & Montgomery, A. E. (2017). Intimate partner violence, unhealthy alcohol use, and housing instability among women veterans in the Veterans Health Administration. Psychological Services, 14(2), 246-249. doi:10.1037/ser0000132

Dichter, M.E., & True, G. (2014). “This is the story of why my military career ended before it should have”: Premature separation from military service among U.S. women veterans. Affilia, 30(2), 187-199. doi:10.1177/0886109914555219

Di Leone, B. L., Vogt, D., Wang, J. M., & Kressin, N. (2016). Women's Veteran Identity and Utilization of VA Health Services. Psychological Services, 13(1), 60-68.

DiRamio, D., Ackerman, R., & Mitchell, R. L. (2008). From Combat to Campus: Voices of Student-Veterans. NASPA Journal, 45(1), 73-102.

DiRamio, D., Jarvis, K., Iverson, S., Seher, C., & Anderson, R. (2015). Out from the shadows: female student veterans and help-seeking. College Student Journal, (1), 49.

DeLucia, J. M. (2016). Art Therapy Services to Support Veterans' Transition to Civilian Life: The Studio and the Gallery. Art Therapy: Journal of The American Art Therapy Association, 33(1), 4-12.

Duggan, M. H., & Jurgens, J. C. (2007). Veterans after they serve their country. In Career interventions and techniques: A complete guide for human service professionals (1st ed., pp. 389-413). Needham Heights, MA: Allyn & Bacon.

Eichler, M., &Smith-Evans, K. (2018). Gender in Veteran reintegration and transition: a scoping review. Journal of Military, Veteran and Family Health 4:1, 5-19. <https://doi.org/10.3138/jmvfh.2017-0004>

Englander, M. (2012). The interview: Data collection in descriptive phenomenological human scientific research. Journal of Phenomenological Psychology, 43, 14-35. doi:10.1163/156916212x632943

Firmin, R. L., Luther, L., Lysaker, P. H., & Salyers, M. P. (2016). Veteran identity as a protective factor: A grounded theory comparison of perceptions of self, illness, and treatment among veterans and non-veterans with schizophrenia. American Journal of Psychiatric Rehabilitation, 19(4), 294–314. https://doi-org.lopes.idm.oclc.org/10.1080/15487768.2016.1231642

Floto, E., Buttner, M. M., Godfrey, K. M., Floto, E., &. Afari, N. (2017). Combat exposure and pain in male and female Afghanistan and Iraq veterans: The role of mediators and moderators. Psychiatry Research, 2577-13.

Flowers, R.D., Luzynski, C., & Zamani-Gallaher, E.M. (2014). Male transfer student athletes and Schlossberg’s transition theory. Journal for the Study of Sports and Athletes in Education, 8(2), 99-120. doi:10.1179/1935739714z.00000000021

Fox, A. B., Walker, B. E., Smith, B. N., King, D. W., King, L. A., & Vogt, D. (2016). Understanding how deployment experiences change over time: Comparison of female and male OEF/OIF and Gulf War veterans. Psychological Trauma: Theory, Research, Practice, And Policy, 8(2), 135-140. doi:10.1037/tra0000033

Franklin, C. L., Raines, A. M., Chambliss, J. L., Walton, J. L., & Maieritsch, K. P. (2018). Examining various subthreshold definitions of PTSD using the Clinician Administered PTSD Scale for DSM-5. Journal Of Affective Disorders, 234256-260.

Fullerton,C.S., Ursano,R.J., Epstein,R.S., Crowley,B., Vance,K., Kao,T.-C., Baum,A.(2001).Gender differences in posttraumatic stress disorder after motor vehicle accidents. American Journal of Psychiatry,158 (9),1486–1491

Gehrke, E., Noquez, A., Ranke, P., & Myers, M. (2018). Measuring the psychophysiological changes in combat Veterans participating in an equine therapy program. Journal of Military, Veteran and Family Health 4:1, 60-69. https://doi.org/10.3138/jmvfh.2017-0015

Gerlock, A., Szarka, J., Cox, K., & Harel, O. (2016). Comparing Intimately Violent to Non-violent Veterans in Treatment for Posttraumatic Stress Disorder. Journal Of Family Violence, 31(6), 667-678. doi:10.1007/s10896-016-9814-2

Giannitrapani, K., Huynh, A., Schweizer, C., Hamilton, A., & Hoggatt, K. (2018). Patient-centered substance use disorder treatment for women veterans. Journal of Military, Veteran and Family Health 4:2, 8-17

Gibson, C. J., Gray, K. E., Katon, J. G., Simpson, T. L., & Lehavot, K. (2016). Gender-Based Violence: Sexual Assault, Sexual Harassment, and Physical Victimization during Military Service across Age Cohorts of Women Veterans. Women's Health Issues, 26225-231. doi:10.1016/j.whi.2015.09.013

Gillums, S. J. (2016). Paving access for veteran’s employment through holistic transition: Practice implications when working with veterans. Journal of Applied Rehabilitation Counseling, 47(1), 4-6

Gobin, R. L., Green, K. E., & Iverson, K. M. (2015). Alcohol Misuse Among Female Veterans: Exploring Associations With Interpersonal Violence and Mental Health. Substance Use & Misuse, 50(14), 1765–1777. Retrieved from https://lopes.idm.oclc.org/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=s3h&AN=111871208&site=eds-live&scope=site

Goldstein, L. A., Dinh, J., Donalson, R., Hebenstreit, C. L., & Maguen, S. (2017). Impact of military trauma exposures on posttraumatic stress and depression in female veterans. Psychiatry Research, 249281-285. doi:10.1016/j.psychres.2017.01.009

Goodman, J., & Anderson, M. L. (2012). Applying Schlossberg’s 4-S Transition Model to Retirement. Career Planning & Adult Development Journal, 28(2), 10–20. Retrieved from https://lopes.idm.oclc.org/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=ehh&AN=93999037&site=eds-live&scope=site

Gordon, K. V. (2014). Experiences in the war zone, shared narratives, and shifting identities: systematic review of qualitative research. The Humanistic Psychologist, 42(4), 331-353.

Green,B.(2003).Post-traumatic stress disorder:Symptom profiles in men and women. Current Medical Research and Opinion, 19 (3),200–204.

Green, H. E. (2014). Use of theoretical and conceptual frameworks in qualitative research. Nurse Researcher, 21(6), 34-38. doi:10.7748/nr.21.6.34. e1252

Green, J. D., Annunziata, A., Kleiman, S. E., Bovin, M. J., Harwell, A. M., Fox, A. M. L., … Marx, B. P. (2017). Examining the diagnostic utility of the DSM-5 PTSD symptoms among male and female returning veterans. Depression and Anxiety, (8), 752. https://doi-org.lopes.idm.oclc.org/10.1002/da.22667

Gregg, B. T., Howell, D. M., & Shordike, A. (2016). Experiences of Veterans Transitioning to Postsecondary Education. American Journal Of Occupational Therapy, 70(6), 1-8. doi:10.5014/ajot.2016.021030

Griffin, K. A., & Gilbert, C. K. (2015). Better transitions for troops: An Application of Schlossberg's Transition Framework to Analyses of Barriers and Institutional support structures for student veterans. Journal of Higher Education, 86(1), 71-97

Gutierrez, P. M., Brenner, L. A., Rings, J. A., Devore, M. D., Kelly, P. J., Staves, P. J., & Kaplan, M. S. (2013). A Qualitative Description of Female Veterans' Deployment-Related Experiences and Potential Suicide Risk Factors. Journal of Clinical Psychology, 69(9), 923-935. doi:10.1002/jclp.21997

Hachey, K., Sudom, K., Sweet, J., MacLean, M., & VanTil, L. (2016). Transitioning from military to civilian life: the role of mastery and social support. Journal of Military, Veteran and Family Health 2:1, 9-18. https://doi.org/10.3138/jmvfh.3379

Hagedorn, H. J., Noorbaloochi, S., Bangerter, A., Stitzer, M. L., & Kivlahan, D. (2017). Health care cost trajectories in the year prior to and following intake into Veterans Health Administration outpatient substance use disorders treatment. Journal Of Substance Abuse Treatment, 7946-52. doi:10.1016/j.jsat.2017.05.013

Hamilton, A. B., Poza, I., & Washington, D. L. (2011). “Homelessness and trauma go hand-in-hand”: Pathways to homelessness among women veterans. Women’s Health Issues, 21 (4 suppl), S203–S209. doi:10.1016/ j.whi.2011.04.005

Harris, J. I., Meis, L., Cheng, Z. H., Voecks, C., Usset, T., & Sherman, M. (2017). Spiritual distress and dyadic adjustment in veterans and partners managing PTSD. Spirituality in Clinical Practice, 4(4), 229-237. doi:10.1037/scp0000143

Haun, J. N., Duffy, A., Lind, J. D., Kisala, P., & Luther, S. L. (2016). Qualitative Inquiry Explores Health-Related Quality of Life of Female Veterans with Post-Traumatic Stress Disorder. Military Medicine, 181(11), e1470–e1475. <https://doi-org.lopes.idm.oclc.org/10.7205/MILMED-D-16-00064>

Hawkins, B., & Crowe, B. (2018). Injured female Veterans’ experiences with community reintegration: a qualitative study. Journal of Military, Veteran and Family Health 4:2, 18-27. https://doi.org/10.3138/jmvfh.2017-0020

Hawley, C. E., Armstrong, A. J., Czarnota, J., & Fields, K. (2016). Factors Influencing the Quality of Life of OEF/OIF Veterans. Journal Of Applied Rehabilitation Counseling, 47(4), 28-35.

Hayes, P. J. (2016). From homelessness to employment perceptions of OEF and OIF veterans with Posttraumatic Stress Disorder. Rehabilitation Counseling Bulletin, 0034355216660841.

Hazle, M., Wilcox, S., & Hassan, A.M. (2012). Helping veterans and their families fight on! Advances in Social Work, 13(1), 229-242.

Herman, J. (1997). Trauma and recovery. New York, NY: Basic Book

Heyman, R. E., Slep, A. S., & Foran, H. M. (2015). Enhanced Definitions of Intimate Partner Violence for DSM-5 and ICD-11 May Promote Improved Screening and Treatment. Family Process, (1), 64. doi:10.1111/famp.12121

Hickey, T. R., Feinleib, J., Kirwin, P. D., & Gardner, E. C. (2017). Patient-Centered Perioperative Care for a Victim of Military Sexual Trauma. Military Medicine, 182(5), e1807-e1811. doi:10.7205/MILMED-D-16-00242

Hoge, C.W., Castro, C.A., Messer, S.C., McGurk, D., Cotting, D.I., & Koffman, R.L. (2004). Combat duty in Iraq and Afghanistan, mental health problems, and barriers to care. New Eng-land Journal of Medicine, 351,13-22

Hone-Blanchet, A., & Fecteau, S. (2014). Review: Overlap of food addiction and substance use disorders definitions: Analysis of animal and human studies. Neuropharmacology, 8581-90. doi: 10.1016/j.neuropharm.2014.05.019

Hurt, R.L., & McLaughlin, E.J. (2012). An applied introduction to qualitative research methods in academic advising. NACADA Journal, 32(1), 63-71. doi:10.12930/0271-9517-32.1.63

Hunter, M. G. (2012). Creating qualitative interview protocols. International Journal of Sociatechnology and Knowledge Development, 4(3), 1-16. doi:10.4018/jskd.2012070101

Ingelse, K. &. (2016). Rural Women Veterans' Use and Perception of Mental Health Services. Archives of psychiatric nursing, 30(2), 242-248.

Iverson, K. M., Stirman, S. W., Street, A. E., Gerber, M. R., Carpenter, S. L., Dichter, M. E., & ... Vogt, D. (2016). Female veterans' preferences for counseling related to intimate partner violence: Informing patient-centered interventions. General Hospital Psychiatry, 4033-38. doi:10.1016/j.genhosppsych.2016.03.001

Jain, S., McLean, C., Adler, E., & Rosen, C. (2016). Peer Support and Outcome for Veterans with Posttraumatic Stress Disorder (PTSD) in a Residential Rehabilitation Program. Community Mental Health Journal, 52(8), 1089-1092.

Johnson, J. S. (2015). Qualitative sales research: an exposition of grounded theory. Journal Of Personal Selling & Sales Management, 35(3), 262-273. doi:10.1080/08853134.2014.954581

Johnston, S., Fletcher, E., Ginn, G., & Stein, D. (2010). Retirement transitions from the military to the civilian workforce: The perspective of Marine Corps noncommissioned officers. Career Planning & Adult Development Journal, 26(1),74-95.

Katz L.S., Bloor L.E., Cojucar G., Draper T. (2007): Women who served in Iraq seeking mental health services: relationships between military sexual trauma, symptoms, and readjustment. Psychol Serv 2007; 4: 239–49.

Keeling, M. (2018). Stories of transition: US Veterans’ narratives of transition to civilian life and the important role of identity. Journal of Military, Veteran and Family Health 4:2, 28-36. doi: 10.3138/jmvfh.2017-0009

Kehle-Forbes, S. M., Harwood, E. M., Spoont, M. R., Sayer, N. A., Gerould, H., & Murdoch, M. (2017). Experiences with VHA care: a qualitative study of U.S. women veterans with self-reported trauma histories. BMC Women's Health, 171-8. doi:10.1186/s12905-017-0395-x

Ketcheson, F., Cyr St., K, King, L., & Don Richardson, J., (2018). Influence of PTSD and MDD on somatic symptoms in treatment-seeking military members and Veterans. Journal of Military, Veteran and Family Health 2018 4:2, 101-109. doi.org/10.3138/jmvfh.2017-0029

Kiessling, T., & Harvey, M. (2005). Strategic global human resource management research in the twenty-first century: an endorsement of the mixed-method research methodology. International Journal Of Human Resource Management, 16(1), 22-45. doi:10.1080/0958519042000295939

Kimerling, R., Gima, K., Smith, M.W., Street, A., Frayne, S., The Veterans Health Administration and military sexual trauma Am. J. Public Health, 97 (2007), pp. 2160-2166

Kintzle, S., Schuyler, A. C., Ray-Letourneau, D., Ozuna, S. M., Munch, C., Xintarianos, E., &. Castro, C. A. (2015). Sexual trauma in the military: Exploring PTSD and mental health care utilization in female veterans. Psychological Services, 12(4), 394-401. doi:10.1037/ser0000054

Kivelitz L, Härter M, Mohr J, Melchior H, Goetzmann L, Warnke MH, … Dirmaier J. (2018). Choosing the appropriate treatment setting: which information and decision-making needs do adult inpatients with mental disorders have? A qualitative interview study. Patient Preference and Adherence, Vol Volume 12, Pp 823-833 (2018), 823. Retrieved from https://lopes.idm.oclc.org/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=edsdoj&AN=edsdoj.9e5e6a4838bd49f39ed006b476e18ba3&site=eds-live&scope=site

Kleespies, P. M. (2016). 12 Evaluating and Managing Suicide Risk in Veterans. The Oxford Handbook of Behavioral Emergencies and Crises.

Kranke, D., Gin, J., Saia, R., Heslin, K., & Dobalian, A. (2015). A qualitative investigation that applies an ecological strengths-based perspective to veterans' experience of reintegration into civilian life. Military Behavioral Health. doi:10.1080/21635781.2015.1119771

Lamb, K., Cobb, C., Brown, C., & Gonzales, C. (2018). Understanding Motivations and Barriers of CRNAs Involved in Global Health: A Qualitative Descriptive Study. AANA Journal, 86(5), 371–378. Retrieved from <https://lopes.idm.oclc.org/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=132213421&site=eds-live&scope=site>

Lambert, V. A., & Lambert, C. E. (2012). Editorial: Qualitative Descriptive Research: An Acceptable Design. Pacific Rim International Journal of Nursing Research, 16(4), 255–256. Retrieved from <https://lopes.idm.oclc.org/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=ccm&AN=104410195&site=eds-live&scope=site>

LaMotte, A., Taft, C., Weatherill, R., Scott, J., & Eckhardt, C. (2016). Posttraumatic Stress Disorder Symptoms, Traumatic Reminders, and Partner Aggressive Tendencies Among Veterans. Journal Of Family Violence, 31(4), 461-466. doi:10.1007/s10896-015-9776-9

Larson, G. E., & Norman, S. B. (2014). Prospective prediction of functional difficulties among recently separated veterans. Journal of Rehabilitation Research and Development,51 (3), 415–428. doi:10.1682/JRRD.2013.06.0135

Latham, J.R. (2014). The research canvas: A framework for designing and aligning the “DNA” of your study. Monument, CO: Leadership Plus Design.

Latta, R., Elwy, A., Ngo, T., & Kelly, M. (2016). Intimate Partner Violence Screening in a Women Veterans' Health Clinic: Assessing Feasibility. Journal Of Family Violence, 31(5), 595-606. doi:10.1007/s10896-016-9798-y

Lee, H., Fawcett, J., & DeMarco, R. (2016). Original Article: Storytelling/narrative theory to address health communication with minority populations. Applied Nursing Research, 3058-60. doi: 10.1016/j.apnr.2015.09.004

Lincoln, Y.S., & Guba, E.G. (1985). Naturalistic inquiry. Newbury Park, CA: Sage

Lovejoy, T. I., Dobscha, S. K., Turk, D. C., Weimer, M. B., & Morasco, B. J. (2016). Correlates of prescription opioid therapy in Veterans with chronic pain and history of substance use disorder. Journal Of Rehabilitation Research & Development, 53(1), 25-36. doi:10.1682/JRRD.2014.10.0230

MacGregor, C., Hamilton, A. B., Oishi, S. M., & Yano, E. M. (2011). Original article: Description, Development, and Philosophies of Mental Health Service Delivery for Female Veterans in the VA: A Qualitative Study. Women’s Health Issues, 21(Supplement), S138–S144. <https://doi>.org.lopes.idm.oclc.org/10.1016/j.whi.2011.04.006

MacLean, M., VanTil, L., Sweet, J., Poirier, A., & McKinnon, K. (2018). Factors associated with work satisfaction among Veterans. Journal of Military, Veteran and Family Health 4:1, 33-41. <https://doi.org/10.3138/jmvfh.2017-0013>

Maguen, S., Ren, L., & Bosch, J. O. (2010). Gender Differences in Mental Health Diagnoses Among Iraq and Afghanistan Veterans Enrolled in Veterans Affairs Health Care. American Journal Of Public Health, 100(12), 2450-2456.

Maia, A., McIntyre,.T, Pereira, M.G., Ribeiro E., (2011). War exposure and post-traumatic stress as predictors of Portuguese colonial war veterans' physical health anxiety Stress Coping, 24 (2011), pp. 309-325

Maiocco, G., & Smith, M. J. (2016). The Experience of Women Veterans Coming Back from War. Archives of Psychiatric Nursing Volume 30, Issue 3, 393–399.

Marek, L. & Moore, L. (2015). Coming home: the experiences and implication of reintegration for military families. Journal of Military, Veteran and Family Health 1:2, 21-31. <https://doi.org/10.3138/jmvfh.3119>

Maskin, R. M., Iverson, K. M., Vogt, D., & Smith, B. N. (2018). Associations between intimate partner violence victimization and employment outcomes among male and female post-9/11 veterans. Psychological Trauma: Theory, Research, Practice, and Policy. https://doi-org.lopes.idm.oclc.org/10.1037/tra0000368

Matheson, C. (2016). A new diagnosis of complex Post-traumatic Stress Disorder, PTSD – a window of opportunity for the treatment of patients in the NHS?. Psychoanalytic Psychotherapy, 30(4), 329-344. doi:10.1080/02668734.2016.1252943

McVey, L., Lees, J., & Nolan, G. (2015). Practitioner-based research and qualitative interviewing: Using therapeutic skills to enrich research in counseling and psychotherapy. Counselling & Psychotherapy Research, 15(2), 147-154. doi:10.1002/capr.12014

Mercado, R., Ming Foynes, M., Carpenter, S. L., & Iverson, K. M. (2015). Sexual intimate partner violence as a form of MST: An initial investigation. Psychological Services, 12(4), 348-356. doi:10.1037/ser0000056

Meredith, L. S., Azhar, G., Okunogbe, A., Canelo, I. A., Darling, J. E., Street, A. E., & Yano, E. M. (2017). Primary Care Providers with More Experience and Stronger Self-Efficacy Beliefs Regarding Women Veterans Screen More Frequently for Interpersonal Violence. Women's Health Issues, 27(5), 586-591. doi:10.1016/j.whi.2017.06.003

Miles, R. H., & Petty, M. M. (1975). Relationships between role clarity, need for clarity and job tension and satisfaction for supervisory and nonsupervisory roles. Academy of Management Journal, 18(4), 877-883. doi:10.2307/255386

Mobbs, M. C., & Bonanno, G. A. (2018). Beyond war and PTSD: The crucial role of transition stress in the lives of military veterans. Clinical Psychology Review, 59137-144. doi:10.1016/j.cpr.2017.11.007

Monteith, L. L., Bahraini, N. H., Matarazzo, B. B., Gerber, H. R., Soberay, K. A., & Forster, J. E. (2016). The influence of gender on suicidal ideation following military sexual trauma among Veterans in the Veterans Health Administration. Psychiatry Research, 244257-265. doi:10.1016/j.psychres.2016.07.036

Moore, B. (2015). A literature review of inhibitors and enablers for veterans to complete a higher education. Current Issues in Education, 18(2), 1-14.

Morin, R. (2011). The difficult transition from military to civilian life. Retrieved from [http://www.pewsocialtrends.org/2011/12/08/the-difficult-transition-from military-to-civilian-life/](http://www.pewsocialtrends.org/2011/12/08/the-difficult-transition-from%20military-to-civilian-life/)

Morse, J.M. (2015). Critical analysis of strategies for determining rigor in qualitative inquiry. Qualitative Health Research, 25(9), 1212-1222. doi:10.1177/1049732315588501

Moustakas, C. (1994). Phenomenological research methods. Thousand Oaks, CA: SAGE.

Murphy, D., Palmer, E., Hill, K., Ashwick, R., & Busuttil, W. (2017). Living alongside military PTSD: a qualitative study of female partners’ experiences with UK Veterans. Journal of Military, Veteran and Family Health 3:1, 52-61. https://doi.org/10.3138/jmvfh.4011

Naphan, D., & Elliot, M. (2015). Role exit from the military: Student veterans’ perceptions of transitioning from the US military to higher education. The Qualitative Report, 20(2), 36-48

Nelson, C. B. (2016). Veteran Mental Health and Employment: The Nexus and Beyond. In War and Family Life, 239-260 Springer International Publishing.

Ngozwana, N. (2018). Ethical dilemmas in qualitative research methodology: Researcher’s reflections. International Journal of Educational Methodology,4(1), 19-28. doi: 10.12973/ijem.4.1.19

Office of the Deputy Assistant Secretary of Defense (Military Community and Family Policy), 2014. 2013 Demographics Report. Author. <http://download.militaryonesource.mil/12038/MOS/Reports/2013-Demographics> Report.pdf〉

Painter, J. M., Brignone, E., Gilmore, A. K., Lehavot, K., Fargo, J., Suo, Y., & ... Gundlapalli, A. V. (2018). Gender differences in service utilization among Operations Enduring Freedom, Iraqi Freedom, and New Dawn Veterans Affairs patients with severe mental illness and substance use disorders. Psychological Services, 15(1), 11-20. doi:10.1037/ser0000144

Parise, M. D. (2016). Female Student Veterans' Resiliency in their Role Transitions (Doctoral dissertation, EASTERN MICHIGAN UNIVERSITY).

Pedersen, B., Delmar, C., Falkmer, U., & Grønkjær, M. (2016). Bridging the gap between interviewer and interviewee: developing an interview guide for individual interviews by means of a focus group. Scandinavian Journal Of Caring Sciences, 30(3), 631-638. doi:10.1111/scs.12280

Pedersen, E. R., Huang, W., Cohen, A. N., & Young, A. S. (2018). Alcohol use and service utilization among veterans in treatment for schizophrenia. Psychological Services, 15(1), 21-30. doi:10.1037/ser0000109

Pease, J. L., Billera, M., & Gerard, G. (2016). Military Culture and the Transition to Civilian Life: Suicide Risk and Other Considerations. Social Work, 61(1), 83-86. doi:10.1093/sw/swv050

Pierce, M. E., & Pritchard, L. M. (2016). Lower stress-reactive cortisol in female veterans associated with military status but not PTSD. Stress: The International Journal on the Biology of Stress, 19(5), 486-491. doi:10.1080/10253890.2016.1217841

Polit, D.F., & Beck, C.T. (2012). Nursing research: Generating and assessing evidence for nursing practice. Philadelphia, PA: Lippincott Williams and Wilkins.

Ramchand, R., Rudavsky, R., Grant, S., Tanielian, T., Jaycox L. (2012). Prevalence of, risk factors for, and consequences of posttraumatic stress disorder and other mental health problems in military populations deployed to Iraq and Afghanistan Curr. Psychiatry Rep., 17 (2015), p. 1

Rebeira, M., Grootendorst, P., & Peter Coyte, P. (2017). Factors associated with mental health in Canadian Veterans. Journal of Military, Veteran and Family Health, 3:1, 41-51. https://doi.org/10.3138/jmvfh.4098

Reppert, M. L., Buzzetta, M., & Rose, T. (2014). Implication for practice. Assisting Female Veterans in their Career Development. Career Planning & Adult Development Journal, 30(3), 80-91

Ridder, H. (2017). The theory contribution of case study research designs. Business Research, 10(2), 281-305. doi:10.1007/s40685-017-0045-z

Roberts, T. (2013). Understanding the research methodology of interpretative phenomenological analysis. British Journal of Midwifery, 21(3), 215-218. doi:10.12968/bjom.2013.21.3.215

Robertson, H.C., & Brott, P.E. (2013). Male veterans’ perceptions of midlife career transition and life satisfaction: A study of military men transitioning to the 214 teaching profession. Adultspan Journal, 12(2), 66-79. doi:10.1002/j.2161- 0029.2013.00016.x

Robinson, M. (2016). Exploring Transition Factors Among Female Veterans of Operation Enduring Freedom/Operation Iraqi Freedom(OIF/OEF).

Robinson, O. C. (2014). Sampling in Interview-Based Qualitative Research: A Theoretical and Practical Guide. Qualitative Research In Psychology, 11(1), 25-41. doi:10.1080/14780887.2013.801543

Rogers, R. G., Clark, E. A., Murata, E., Cichowski, S. B., Murata, A., & Murata, G. (2017). Military Sexual Trauma in Female Veterans is Associated With Chronic Pain Conditions. Military Medicine, 182(9), e1895-e1899. doi:10.7205/MILMED-D-16-00393

Rossman, G., & Rallis, S.F. (1998). Learning in the filed: An introduction to qualitative research. Thousand Oak, CA: Sage

Rosellini, A. J., Street, A. E., Ursano, R. J., Wai Tat, C., Heeringa, S. G., Monahan, J., & ... Kessler, R. k. (2017). Sexual Assault Victimization and Mental Health Treatment, Suicide Attempts, and Career Outcomes Among Women in the US Army. American Journal of Public Health, 107(5), 732-739.

Rubin, H., & Rubin, I. (1995). Qualitative interviewing: The art of hearing data. Thousand Oaks, CA: Sage Publications, Inc.

Rukmana, D. (2010). Gender differences in the residential origins of the homeless: Identification of areas with high risk of homelessness. Planning, Practice & Research, 25, 95–116. doi:10.1080/ 02697451003625422

Sailakumar, S., & Naachimuthu, K. P. (2017). A phenomenological approach to understand the nature-based experiences and its influence on holistic development. Indian Journal of Positive Psychology, 8(2), 186.

Sairsingh, H., Solomon, P., Helstrom, A., & Treglia, D. (2018). Depression in Female Veterans Returning from Deployment: The Role of Social Factors. Military Medicine, 183(3/4), e133–e139. <https://doi>org.lopes.idm.oclc.org/10.1093/milmed/usx065

Sandelowski, M. (2000). Whatever happened to qualitative description? Research in Nursing & Health, 23, 334–340.

Schlossberg, N.K. (2009). Revitalizing retirement: Reshaping your identity, relationships, and purpose. Washington, DC: American Psychological Association.

Schlossberg, N.K. (2011). The challenge of change: The transition model and its applications. Journal of Employment Counseling, 48(4), 159-162. doi:10.1002/j.2161-1920.2011.tb01102.x

Seidman, I. (2013). Interviewing as qualitative research: A guide for researchers in education and the social sciences (4th ed.). New York, NY: Teachers College.

Sellers, B. (2017). Chapter 535: Women Veterans Continue to Fight Battles on the Home Front. The University of the Pacific Law Review Journal 48 (3) Article 20.

Serra, M., Psarra, S., & O’Brien, J. (2018). Social and Physical Characterization of Urban Contexts: Techniques and Methods for Quantification, Classification and Purposive Sampling. Urban Planning, Vol 3, Iss 1, Pp 58-74 (2018), (1), 58. https://doi-org.lopes.idm.oclc.org/10.17645/up.v3i1.1269

Smith, D. L. (2014). The relationship between employment and veteran status, disability and gender from 2004-2011 Behavioral Risk Factor Surveillance System (BRFSS). Work, 49(2), 325-334. doi:10.3233/WOR-131648

Stana, A., Flynn, M. A., & Almeida, E. (2017). Battling the Stigma: Combat Veterans' Use of Social Support in an Online PTSD Forum. International Journal Of Men's Health, 16(1), 20-36. doi:10.3149/jmh.1601.20

Street, A.E., Gradus, J.L., Giasson, H.L., Vogt, D., & Resick P.A. (2013). Gender differences among veterans deployed in support of the wars in Afghanistan and Iraq

Story, K. M., & Beck, B. D. (2017). Guided Imagery and Music with female military veterans: An intervention development study. The Arts In Psychotherapy, 5593-102. doi:10.1016/j.aip.2017.05.003

Surís, A., Lind, L., Kashner, T. M., Borman, P. D., & Petty, F. (2004). Sexual assault in women veterans: An examination of PTSD risk, health care utilization, and cost of care. Psychosomatic Medicine, 66, 749–756. <http://dx.doi.org/10.1097/01.psy.0000138117.58559.7b>

Linna Tam-Seto, Terry Krupa, Heather Stuart, Alice B. Aiken, Patricia Lingley-Pottie, and Heidi Cramm. Identifying military family cultural competencies: experiences of military and Veteran families in Canadian health care. Journal of Military, Veteran and Family Health 4:2, 48-60. <https://doi.org/10.3138/jmvfh.2017-0030>

Tanielian, T., Jaycox, L.H. (2008) Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery. Santa Monica, Calif.: RAND Corporation

Tsai, J., Rosenheck, R. A., & McGuire, J. F. (2012). Comparison of Outcomes of Homeless Female and Male Veterans in Transitional Housing. Community Mental Health Journal, 48(6), 705-710

Tsai, J., Rosenheck, R. A., & Kane, V. (2014). Homeless Female US Veterans in a National Supported Housing Program: Comparison of Individual Characteristics and Outcomes with Male Veterans. Psychological Services, 11(3), 309-316

U.S. Department of Veterans Affairs. Women Veterans: Past, Present and Future.Washington D.C.: U.S. Department of Veterans Affairs, 2007.

U.S. Department of Veterans Affairs. (2013). Veteran population projections: FY2010 to FY2040. Retrieved from http://www.va.gov/VETDA-TA/docs/Quickfacts/Population-slideshow.pdf

Vance, C.D. (2015). Decision-making considerations for mid-career army officers to pursue masters degrees. Adult Learning, 26(3), 109-115. doi:10.1177/1045159515583260

Vasterling, J.J., Proctor, S.P., Amoroso, P., Kane, R., Heeren, T., & White, R.F. (2006). Neuropsychological outcomes of army personnel following deployment to the Iraq war. Journal of the American Medical Association, 296,519-529.

Verlezza, M. (2015). What is Canada doing that produces better outcomes for Veterans? Journal of Military, Veteran and Family Health 1:1, 9-10. https://doi.org/10.3138/jmvfh.1.1.9

Watson, E. C., Cosio, D., & Lin, E. H. (2014). Mixed-method approach to veteran satisfaction with pain education. Journal Of Rehabilitation Research & Development, 51(3), 503-514. doi:10.1682/JRRD.2013.10.0221

Wehner, L. E., & Thies, C. G. (2014). Role Theory, Narratives, and Interpretation: The Domestic Contestation of Roles. International Studies Review, 16(3), 411-436. doi:10.1111/misr.12149

Westwood, M. J., McLean, H., Cave, D., Borgen, W., & Slakov, P. (2010). Coming Home: A Group-Based Approach for Assisting Military Veterans in Transition. Journal for Specialists In Group Work, 35(1), 44-68.

Williams, J. L., McDevitt-Murphy, M. E., Murphy, J. G., & Crouse, E. M. (2017). Postconcussive Symptoms, PTSD, and Medical Disease Burden in Treatment-Seeking OEF/OIF/OND Veterans. Military Medicine, 182(3/4), e1645-e1650. doi:10.7205/MILMED-D-16-00221

Yalch, M. M., Hebenstreit, C. L., & Maguen, S. (2018). Influence of military sexual assault and other military stressors on substance use disorder and PTS symptomology in female military veterans. Addictive Behaviors, 8028-33. doi:10.1016/j.addbeh.2017.12.026

Yau De, W., & Han Jen, N. (2010). Multiple Roles of Human Resource Department in Building Organizational Competitiveness -- Perspective of Role Theory. International Management Review, 6(2), 13-19.

Yehuda, R., Vermetten, E., McFarlane, A. C., & Lehrner, A. (2014). PTSD in the military: Special considerations for understanding prevalence, pathophysiology and treatment following deployment. European Journal Of Psychotraumatology,

Yilmaz, K. (2013). Comparison of Quantitative and Qualitative Research Traditions: epistemological, theoretical, and methodological differences. European Journal Of Education, 48(2), 311-325. doi:10.1111/ejed.12014

Zlotnick, C., Zimmerman, M., & Wolfsdorf, B.( 2001).Gender differences in patients with posttraumatic stress disorder in a general psychiatric practice. American Journal of Psychiatry, 158, 1923–1925.

Zlotnick, C., Franklin, C.F., & Zimmerman, M. (2002) Does “subthreshold” posttraumatic stress disorder have any clinical relevance? Compr. Psychiatry, 43 (2002), pp. 413-419

Zoli, C., Maury, R., & Fay, D. (2015). Missing perspectives: Servicemembers' transition from service to civilian life.Syracuse, NY: Syracuse University, Institute for Veterans and Military Families.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criterion**  \***(Score = 0, 1, 2, or 3)** | **Learner Score** | **Chair Score** | **Methodologist Score** | **Content Expert Score** |
| **QUALITY OF SOURCES & REFERENCE LIST**  For every in-text citation a reference entry exists; conversely, for every reference list entry there is an in-text citation. Uses a range of references including founding theorists, peer-reviewed empirical research studies from scholarly journals, and government/foundation research reports. The majority of all references must be scholarly, topic-related sources published within the last 5 years. Websites, dictionaries, and publications without dates (n.d.) are not considered scholarly sources and should not be cited or present in the reference list. In-text citations and reference list must comply with APA 6th Ed. | | | | |
| Ensures that for every in-text citation a reference entry exists. Conversely, for every reference list entry there is a corresponding in-text citation. Note: The accuracy of citations and quality of sources must be verified by learner, chair and committee members. |  |  | X | X |
| Uses a range of references including founding theorists, peer-reviewed empirical research studies from scholarly journals, and government /foundation research reports.  **Note:** **A minimum of 50 peer-reviewed, empirical research articles are required for the literature review.** |  |  | X | X |
| Verifies that 75% of all references are scholarly sources within the last 5 years. The 5-year time frame is referenced at the time of the proposal defense date and at the time of the dissertation defense date.  **Note:** Websites, dictionaries, publications without dates (n.d.), are not considered scholarly sources and should not be cited or present in reference list. |  |  | X | X |
| Avoids overuse of books and dissertations.  **Books:** Maximum of 10 scholarly books that present cutting edge views on a topic, are research based, or are seminal works.  **Dissertations:** Maximum of 5 published dissertations. |  |  | X | X |
| Section is written in a way that is well structured, has a logical flow, uses correct paragraph structure, uses correct sentence structure, uses correct punctuation, and uses correct APA format. |  |  | X | X |
| **\*Score each requirement listed in the criteria table using the following scale:**  0 = Item Not Present or Unacceptable. Substantial Revisions are Required.  1 = Item is Present. Does Not Meet Expectations. Revisions are Required.  2 = Item is Acceptable. Meets Expectations. Some Revisions May be Suggested or Required.  3 = Item Exceeds Expectations. No Revisions are Required. | | | | |
| **Reviewer Comments:** | | | | |

# Appendix A. Site Authorization Letter(s)

This is a required Appendix for Level 2 and Level 5 Reviews.

For purposes of confidentiality, this will be removed prior to Dean’s signature and the following text will be inserted:

Site authorization(s) on file at Grand Canyon University.

# Appendix B. IRB Approval Letter

# Appendix C. Infromed Constent

|  |
| --- |
| **INFORMED CONSENT FORM** |
| A study on female veterans and their life after serving in the military |
| **INTRODUCTION** |
| The purposes of this form are to provide you (as a prospective research study participant) information that may affect your decision as to whether or not to participate in this research and to record the consent of those who agree to be involved in the study. |
| **RESEARCH** |
| Anthony L. Robinson Doctoral student College of Principal Investigator has invited your participation in a research study.  I am completing this research as part of my doctoral degree in Management |
| **STUDY PURPOSE** |
| The purpose of the research is to add to the current body of knowledge in direct connection to female veterans and their life after serving in the military. |
| **ELIGIBILITY** |
| You are eligible to participate in this research if you:  1. Female veterans who served since September 11, 2001  2. All branch of service in Alaska  You are not eligible to participate in this research if you:  1. Male veterans  2. Veterans outside the state of Alaska |
| **DESCRIPTION OF RESEARCH ACTIVITY** |
| If you decide to participate, then as a study participant you will be asked to:  1.There will be a series of interview conduct in private setting such as a library or private office to safeguard the participant identity.  2. Each section will last about an hour to capture the real-life experience of these veterans.  3. The activity will consist of icebreaker section follow by open-ended question with a summary of the interview to discuss the critical point and followed by an open forum to discuss issues that were not discussed during the open-ended session.  Approximately (10) of subjects will be participating in this research study. |
| **RISKS** |
| If you decide to participate in this research study, then you may face some risks such as some of the risks that may transpire is opening up an old wound or reliving events that have altered their life after leaving the service.  To decrease the impact of these risks, you can:  I will allow the participants to skip any question they are not conformable discussing, all the participant to stop at any time and provide outside counseling if required.  If additional counseling is needed, I will refer them to the locate VA treatment facility for emotional stress if necessary. |
| **BENEFITS** |
| If you decide to participate direct benefits to you are: It will assist in female veterans feeling more comfortable about sharing their experience inside and outside the military. It will add value to the growing female veterans’ community; it will also add to the current body of knowledge that many of these female a veterans are afraid to discuss.    If you decide to participate indirect benefits to you are: The indirect benefits is to raise awareness to the overlook issues that are taking place in America amongst the female veterans community. All the female veterans voice to be heard without judgment or reprisal. To capture the attention of military as well as civilian leader that there are an issue that are often overlooked inside the female veterans community. |
| **CONFIDENTIALITY** |
| All information obtained in this study is strictly confidential unless disclosure is required by law. The results of this research study may be used in reports, presentations, and publications, but the researchers will not identify you. To maintain the confidentiality of your records, Anthony L. Robinson will keep the name of the participants confidential and will not be discussed with anyone without the participant consent. The confidentiality will be maintained throughout this process.  The people who will have access to your information are: myself, and, my dissertation chair, and/or, other researchers, and/or, my dissertation committee.  Audio recording:  I would like to use a voice recorder to record your responses. You (can, or, cannot) still participate if you do not wish to be recorded. Briefly describe how the participants’ identity will be protected. The participant identity will be kept confidential because of the sensitivity of the study the participants will only be identified by the interview number and the primary demographic characteristic.    Video recording: N/A  I will secure your information with these steps: By locking my office and filing cabinet and will provide a triple layer of securing to my office and computer by using encryption password and pin number to gain access to the information in my office as well as my computer.  I will keep your data for 3 years. Then, I will delete electronic data and destroy paper data. |
| **WITHDRAWAL PRIVILEGE** |
| It is okay for you to decline to participate in this research study. Even if you say yes now, you are free to say no later and stop participating at any time, there will be no penalty to you.  If you decide to stop participation, you may do so by: If the participation decides not to complete the interview or would like to withdrawal from the study. I will give them the opportunity to do without any hesitation, and I would say ask them if they would like me to use there if it acceptable for the study.If the participant grants me permission to used their information I may or may utilize the information if it does not support the study and if the information is not useful, it will adequately safeguard inside of my office for 3 years.  Your decision will not affect your relationship with Grand Canyon University or otherwise cause a loss of benefits to which you might otherwise be entitled.  No member of my current inner circle will be a participant in this study.  I may stop your participation, even if you did not ask me to if the participant show sign of emotional break down from the question or sign of distress will I conclude the interview process to eliminate any potential discomfort or emotional setback. |
| **COSTS AND PAYMENTS** |
| There is no financial cost to you as a participant in this study, nor is their payment for your participation.  -Alternatively,-  There is no financial cost to you as a study participant, however, as a thank you for your willingness to participate, you will be given I will provide participants 25 dollar gift card for participants in this interview. |
| **COMPENSATION FOR ILLNESS AND INJURY** |
| If you agree to participate in the study, then your consent does not waive any of your legal rights. However, no funds have been set aside to compensate you in the event of injury. If more than minimal risk of foreseeable injury is anticipated, describe the facilities, medical treatment or services which will be made available in the event of injury or illness to a subject. Description may include on and off-campus services. |
| **VOLUNTARY CONSENT** |
| Any questions you have concerning the research study or your participation in the study, before or after your consent, will be answered by (Anthony L. Robinson, ARobinson96@my.gcu.edu, 773-648-9006  If you have questions about your rights as a subject/participant in this research, or if you feel you have been placed at risk, you can contact the Chair of the Human Subjects Institutional Review Board, through the College of Doctoral Studies at [IRB@gcu.edu](mailto:IRB@gcu.edu); (602) 639-7804.  This form explains the nature, demands, benefits and any risk of the research study. By signing this form you agree knowingly to assume any risks involved. Remember, your participation is voluntary. You may choose not to participate or to withdraw your consent and discontinue participation at any time without penalty or loss of benefit. In signing this consent form, you are not waiving any legal claims, rights, or remedies. A copy of this consent form will be given (offered) to you.  Your signature below indicates that you consent to participate in the above study.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_  Subject's Signature Printed Name Date  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_  Other Signature Printed Name Date  (if appropriate) |
|  |
| **INVESTIGATOR’S STATEMENT** |
| "I certify that I have explained to the above individual the nature and purpose, the potential benefits and possible risks associated with participation in this research study, have answered any questions that have been raised, and have witnessed the above signature. These elements of Informed Consent conform to the Assurance given by Grand Canyon University to the Office for Human Research Protections to protect the rights of human subjects. I have provided (offered) the subject/participant a copy of this signed consent document."  (Your signature indicates that you have ensured the participant has read, understood, and has had the opportunity to ask questions regarding their participation).  Signature of Investigator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# Appendix D. Interview Protocol

A study on female veterans and their life after serving in the military

Introductory Information

First off, I would like to take this time and say thank you for participating in this research. At your request, I would like for you to take part in this pre-doctoral research study. The purpose of this study is to examine and understand the transitional military experience of female veterans and their life after serving in the military. Your involvement in this study will strictly be a random selection of participants who have volunteered through the advertisement solicitation process of social media and local networking outreach. Your participation is extremely vital to this study and greatly appreciated in assisting with future studies. This study is set to investigate the common traits and themes that may be perceived to be relevant to this study, which will help identify issues that are impacting female veterans after they leave the services. This study is voluntary based, which will be conducted by the researcher. For your privacy and concerns, your identity will not be revealed and will remain confidential. At any moment doing this interview, you may choose to stop the interview at any time and if you choose to stop all information gathered will be discarded. This study will be led by Anthony Robinson, a DBA candidate at Grand Canyon University.

During this process, I read some basic information to about this study and will request your consent for participation prior to the beginning of this interview. If you decide to the participant on this interview, you will be asked to take part in completing an assessment, followed by a series of demographic, and subject matter question relating to this current study. This interview process will take approximately 30-60 minutes.

The participation for this research study will be strictly on a voluntary basis. This interview will be recorded by the researcher for future review and analysis and may be utilized at a later date and time, this information gathered will be published as raw data. During this process, please do not use your name or other specific names during this interview to maintain full anonymity throughout this study. If there are any questions that you do not feel comfortable with please let me know, in addition to that for any reason you can terminate the interview at any time.

- Do you have any question at this point about the interview protocol before we begin?

Statement of Consent

- Will, the participant, read and agreed to the Informed Consent Waiver before consent to a voluntary based participation process to take part in this interview? [Yes or No] If no, there will a waiver form available.

Description of Participant

The participant for this interview must meet certain and specific qualification factors and prerequisites.

- The military member must be a female veteran;

- The military member much have Served on active duty or in the Reserves or National Guard on or After September 11, 2001;

- AND Have begun the process of transition or have transitioned out of the service;

- AND Have they ever been a medical diagnosis or firmly believe that diagnosis is a need warranted of PTSD;

- AND their experience with the Transition Airmen Program (TAP), where it was a positive or negative experience.

The verification process of the participant prerequisites has occurred? [Yes or No] If no, the verification process will begin after the participant has signed the Informed Consent Waiver.

MSPSS Assessment

Will, the participant, completed the MSPSS Assessment? [Yes or No] If no, the assessment process will be conducted (via of paper, or in-person, read out loud or even sent through the electronic channel before the interview begins).

Transcript Outline

-Begin the recording

Introduction to Interview

Researcher: First, off hello and good morning/afternoon. My name is Anthony L. Robinson. I am currently a doctoral candidate at Grand Canyon University. I am currently conducting a study on the impact military service has on female veterans lives after serving in the military. This interview process is being conducted at \_\_\_\_\_\_\_AM/PM on \_\_\_\_\_\_\_\_(date) at/near \_\_\_\_\_\_\_\_\_\_\_(location). This interview is being captured and recorded by an approved device by the researcher, in addition to the recording field notes will be taken; and both forms of data may be used for future analysis and published as raw data.

In order, to protect the identity of the current participant, no name or personally identifiable markers will be used nor requested at any point during the interview process, unless the participant voluntarily requested that their information is used. For this study, the participant will be labeled and identified by the researcher only as “Participant.”

Participant, have you previously received or agreed to the informed consent form to provide information for this research study?

Participant: [Yes/No]. If yes, will begin or continue with the interview. If no, we must complete the statement of consent before we proceed.

Researcher: At this point, we have recorded your consent, I will begin the interview. Remember at any time; you may end this interview without any consequence. All the questions are voluntary and may be skipped by the participant if requested. The beginning process of the interview will be conducted to gather some demographics protocol. Then the next step of the interview process will be used to an analyze a possible connection with demographics with the subject matter of the research study.

Demographics

Researcher: Participant, What is your current age?

Participant: [Answer]

Researcher: What branch of service did you sever in before leaving the military?

Participant: [Answer]

Researcher: What is the highest rank did you achieve in the military?

Participant: [Answer]

Researcher: How long did your service before for leaving the military?

Participant: [Answer]

Researcher: What made you decide to join the military

Participant: [Answer]

Researcher: Describe your transitional experience from the military back into society after leaving the military?

Participant: [Answer]

Researcher: During your military service, if you ever deploy to combat or dangerous area?

Participant: [Answer]

Researcher: What issues did you experience while serving in the military that will prepare for your transition back into society?

Participant:[Answer]

Researcher: Please describe what challenges that you faced during your transition from the military?

Participant: [Answer]

Researcher: During your military service, did you suffer medical issues such as PTSD from combat or other dangerous areas within the service?

(A). If so how are your coping with the issues and what resource do you have available to ensure your transition back into society successful?

Participant: [Answer]

Researcher: What has been your sources or outlets during your transition process from the military service?

Participant: [Answer]

Researcher: During your time in the military, did your PTSD impact your work performance?

Participant: [Answer]

Researcher: Thank you for responding to the question, this will conclude the section on the demographic portion of the interview. The following question asked will assist in connecting key concepts that is directly related to the study. These question will be open-ended and will allow you to express your concerns and share any information that will be valuable to the study. If any question is not clear, please asked for clarification of the question. We can begin whenever you are ready to continue?

Participant: [Yes/No] If no, please let me know when you are comfortable and ready to continue.

Subject Matter (Probing question listed)

Researcher: Do you consider or identify your as veterans?

(A) If so, what does that mean to you as a veteran?

(B) If not, can you please explain why?

Participant: [Answer]

Researcher: Has the PTSD affected your relationship with family and friends?

Participant: [Answer]

Researcher: Has PTSD impact your social life where it difficult to interact with the public.?

Participant:[Answer]

Researcher: What are the some of the positive thing that has transpired during your transition phase?

Participant: [Answer]

Researcher: What are the some of the negative thing that has transpired during your transition phase?

Participant: [Answer]

Researcher: What are something you have learns about yourself after experiencing PTSD or any other form of trauma that has taken during your time in the service?

Participant: [Answer]

Researcher: Have you reached out for help to assist in coping with some of the issues that PTSD has brought into your life?

Participant: [Answer]

Researcher: As female veterans have you notice a difference in treatment based on your gender compare to male veterans who have experienced the same issue of PTSD?

Participant: [Answer]

Researcher: Being a female do you believe it made it easier to seek treatment for PTSD or harder?

Participant: [Answer]

Researcher: If any what suggestion would you give female veterans that are transitioning from the military who suffer from PTSD/

Participant: [Answer]

Researcher: Is there any other information you like to share that you believe that will be valuable to this study of future study in connection with PSTD and transition process for female veterans as they re-enter society?

Participant: [Answer]

Conclusion

Researcher: This will conclude the scheduled interview question portion of this study. As of right now do you have any question, comments, or concerns for me at this time and if not we will end the interview process?

Participant: [Answer]

Researcher: Alrighty. I want to be the first to say thank you again for your participation in this interview process. The information you provide will only be used for this study and you be provided with contact information for the researcher and the Institutional Review Board for Grand Canyon University, just in case you have any question or concerns during this research process. At this point will we conclude the interview process and now I will stop the recording device.

-Turn off the recorder

Review Field Notes and Member Checking

I will now do a quick recap of the information that was collected to ensure accurate and clarity of the data gathered for exact interpretation.

[Conduct review of field note for clarity and ensure accurate interperation]

Wrap-up

This will conclude the interview portion of the reaches study. The researcher, Anthony L.Robinson, I would like to extend my thank you for assisting me in this study to better understand the life of female veterans as after serving in the military.

Researcher: Anthony L. Robinson

Captain, United States Air Force

Please feel free to contact me at Arob0982@gmail.com, if you have any questions or concerns that may arise at the end of this study. Also as a reminder, you may also contact Grand Canyon University IRB Chair Dr. Christopher M. Linski III at Linski3@hotmail.com for any issues in regards to ethical concerns. Once again thank you, for your time and dedication to participation in this study it was greatly appreciated.

This is a required Appendix.

# Appendix E. Power Analyses for Sample Size Calculation (Quantitative Only)

Required for both proposal and dissertation:

* Proposal must include the *a priori* computation of the sample size;
* The dissertation must include the *a priori* computation of sample size, and, if the recruited sample size is smaller than the *a priori* sample size, it must also include a *post hoc* computation of the effect size at power level 0.80.
* Include a screen shot (graphic image) of the G\*Power output.

# Appendix F. Additional Appendices

Additional appendices may include statistical results, interview transcripts, raw data (as appropriate), or other critical information pertinent to the dissertation. Consult with the chair on additional appendices appropriate for the dissertation.