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# Connecting Veterans and Their Community Through Narrative: Pilot Data on a Community Strengthening Intervention

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## Abstract

Military personnel transitioning to civilian life commonly report difficulty with establishing friendships, reconnecting with family, and a greater sense that they do not “fit in.” Personal narrative interventions have the potential to increase the community’s interest and understanding of Veterans’ experience. This study examines the impact of a narrative intervention in which Veterans used film or verbal storytelling to describe their experience of being a Veteran to civilian audiences. A total 12 Veterans participated in at least one performance, and 88 community audience members attended one of six performances of the Veterans’ narratives. Survey data indicate increase in positive attitudes towards Veterans, as well as a shift in the Veterans’ perspective of civilians as receptive and supportive. These preliminary findings suggest that narrative interventions appear to have a positive impact on civilians’ interest in Veterans and therefore, may be a valuable community reintegration intervention.

**Keywords** Veterans · Narrative therapy · Veterans reintegration · Adjustment issues · Community mental health · Community intervention

The transition from military to civilian life involves unique challenges in different domains of life, with Veterans commonly reporting struggles with social engagement (Gorman et al. 2018). Veterans in the U.S. often report a diminished sense of belonging, difficulty reestablishing friendships, and feeling as though they do not “fit in” to the civilian community after separation from the military (Demers 2011; Sayer et al. 2010). Veterans face a higher risk of decline in available social support, not only because the transition from the military to civilian life involves an exchange of

social networks (Hopewell et al. 2012), but because it also involves a cultural shift (Rahbek-Clemmensen et al. 2012). In military culture, group membership is close and relies on mutual support, collective goals, and conformity (Ainspan and Penk 2008; Junger 2016), whereas in Western civilian culture, independence and individuality are emphasized. In addition, experiencing medical and mental health problems common in Veterans may also increase Veteran isolation (Matarazzo et al. 2016). Veterans may also hold a belief that others will react in a negative manner if they seek help or disclose their distress and this may reduce help-seeking behaviors (Blais and Renshaw 2013; Britt et al. 2007). Veterans’ hesitation to share their experiences, combined with the general public’s lack of awareness about Veterans’ issues, maintains a disconnect between civilians and the Veterans in their communities (Mamon et al. 2017).

Despite an increase in practices designed to enhance community integration (Glynn et al. 2009; Drebing et al. 2018; Ainspan et al. 2018; Sherman and Larsen 2018), to the authors’ knowledge, there are no interventions that focus on using the community as a mechanism for change. Traditional interventions place an emphasis on reducing symptoms in the individual, which could reinforce the stigma

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that mental illness is a personal failing (Stier and Hinshaw 2007). Research suggests that increasing social capital in a community facilitates better health, safer communities and greater life satisfaction (Putnam 1995). Writers such as Sebastian Junger and Edward Tick, PhD, have conceptualized the mental health challenges Veterans face as a result of a failure of the communities to understand and support Veterans' reintegration into that community (Junger 2016; Tick 2014). Junger (2016) suggests that the disconnect between the civilian and Veteran community reflects the community's ambivalence about sharing the moral responsibility of war. He posits that interventions that result in a sharing of this burden will decrease Veteran isolation and the suicide rate, and will increase their sense of belonging, functioning, and quality of life.

In the broader mental health population, higher levels of community integration have been associated with gainful employment, positive mental health (Sayer et al. 2011), greater self-efficacy (Hawkins et al. 2015), decreased pain (Wu and Graham 2016), and fewer symptoms in Veterans living with traumatic brain injury (TBI; Phillips et al. 2016). Research on community integration interventions indicates that targeting stigma is an important aspect of minimizing differences and modifying negative perceptions (Chung and Slater 2013; Wood and Wahl 2006; Holmes et al. 1999). Corrigan (2000) suggests that the most effective way to combat stigma is to promote contact between the public and the stigmatized group. This contact allows for opportunities to provide accurate information about groups, to personalize and humanize the stigmatized group, and to ultimately reduce negative biases against the group (Hawke et al. 2014).

Personal narrative storytelling has been used as an educational tool to combat stigma, utilizing different media such as digital and live performances (Zeelen et al. 2010). There has been increased attention to the value of community storytelling in popular culture with programs such as "The Moth" (The Moth 2019) and "Mass Mouth" (Mass Mouth 2019). Community storytelling is also present in Veteran-specific events that are meant to increase awareness and welcome Veterans home (Barnes 2012; Earnest 2017; Forman 2018; Perona 2017). Despite the increase in public interest in such programs, there is very limited research on the impact of community storytelling on the participants and audience members. Most research in this area focuses on marginalized populations such as those living with HIV/AIDS (Zeelen et al. 2010), and LGBTQ-identifying individuals (Ramirez-Valles et al. 2014) and has found promising results, with reductions in the audience's negative attitudes at post-intervention assessments. Research using this method in a Veteran population is nascent (Mamon et al. 2017). Narrative storytelling has been hypothesized to have benefits for the storyteller as it allows for processing and organization of the individual's experience into a cohesive narrative (Olthof

2018), may support insight development, and increases a sense of agency and control over one's experience (Keats and Arvay 2004; Mullet et al. 2013).

The current study examines a community storytelling intervention that engages both Veterans and their communities. This paper will focus on the observed impact of six community-based Veterans' narrative events on community connection. The events were the culmination of two interventions aimed at reducing mental health symptoms and increasing mental health service utilization for Veterans: a Veteran filmmaking workshop and a Veteran storytelling workshop. Both interventions included elements of narrative therapy and ended with a community event in which Veterans presented their final product to a community audience. We sought to explore the impact of the community storytelling interventions on community-reintegration by assessing the impact of the community event on both the Veterans and the audience.

## Method

The current study is part of a larger study evaluating the impact of filmmaking and storytelling interventions. This study focuses on the impact of the community-based intervention, which consisted of one-time events in which Veterans, who had created a narrative film or oral story, performed that narrative to a community audience. These performances took place approximately one month after Veterans participated in either a filmmaking or storytelling workshop in which they crafted their narrative visually or orally. These workshops are briefly described below. Questionnaires were completed by the audience and Veteran participants immediately after the performances. Audience members and Veteran participants were verbally informed of the purpose of the questionnaire and reminded that completion of the survey was voluntary. Informed consent was obtained from all individual participants included in the workshops, though questionnaires collected following the performances were anonymous and no informed consent was required. This study was approved by the ENRM VA Hospital Scientific Advisory Committee and Institutional Review Board (IRB).

### I Was There: Filmmaking Workshop

The filmmaking workshop was a 20-h intensive intervention, which took place over a single weekend. Participants were post-911 Veterans volunteers, with 5–15 Veterans participating in one of five workshops. Each workshop was staffed by 3–5 filmmaking instructors and one clinical psychologist specially trained to support Veterans in developing a brief personal film of their own design. The goal of the workshop was for Veterans to work alone or in small groups composed

of one to four Veterans, to create a 5 to 12-min film of their own design. Veterans collaborated on creating a film about some aspect of their experience in the military or as a Veteran in the civilian community. The content and format of the films were developed entirely by the participants, with the film instructors helping to produce and edit the film but not to influence the core decisions about the film. The “I Was There” filmmaking workshop has been implemented in multiple Veterans organizations including Veterans Health Administration (VHA) hospitals and Department of Defense (DOD) military bases and has been described in detail (Stein and Tuval-Mashiach 2015; Tuval-Mashiach and Patton 2015).

### **Warrior's Telling: Storytelling Workshop**

The storytelling workshop was a 16.5-h intervention, though broken into eleven 90-min weekly sessions over consecutive weeks. The workshop was modeled after a storytelling intervention that was piloted at the Providence Veterans Affairs Medical Center (Mamon et al. 2017). Participants were also post-911 Veterans, though this group consisted entirely of Veterans with combat experience. The workshop was also conducted in a group setting and was staffed by two clinical psychologists with experience in narrative interventions. The goal of the workshop was to have Veterans create a 5–12 min narrative about their own military or Veteran experience, and to perform that narrative in an on-stage format. Unlike the film intervention, the storytelling intervention required each participant to create and perform their own narrative. The content of the story was also determined by the participants. Psychologists served to facilitate the development of the story but not to directly influence the core decisions about the story.

### **Post-workshop Community Events**

After each of these workshops, Veterans were given the opportunity to plan and participate in an event presenting their final product to members of the community. A total of six community-based events were held in an auditorium or large venue at a local college. The events were promoted by the Veterans who developed strategies for inviting an audience of friends, family, and community members.

The planning process was designed to establish a partnership with participants, to create an outline of the final event, and to coordinate logistics of hosting the event. An overarching goal was for the participants to feel personally invested in planning and facilitating these events. This process was achieved by including the Veteran participants in a discussion of the utility of community venues for connecting Veterans and civilians, and the potential advantages of participation for the general Veteran population and for community members.

Facilitators discussed the benefits of using film and storytelling in casual settings to initiate dialogue between Veterans and civilians, and encouraged Veteran participants to exert agency and steer decision-making throughout the planning process.

### **Coordinated a Planning Meeting**

A meeting was held within 1–2 weeks post workshop in which Veterans had the opportunity to plan the community event. Facilitators provided a variety of options for participating, including in person or via conference call. While some Veterans were not able to attend the community-based event, they were still encouraged to participate in planning the event, especially if they wanted their film or story to be represented at the event.

### **Clarified Rationale and Got Buy-In**

Some Veterans were somewhat reticent about sharing their stories with members of their community and the general public. Facilitators made efforts to provide a rationale for their participation in these events (i.e., building community networks, educating the public about Veterans' experiences, increasing the public's investment and support towards Veterans' issues, etc.). Discussion topics included principles behind community engagement events, anecdotes from past community events, and examples of successful outcomes associated with events for Veterans and community members. This discussion was meant to remind Veterans of the greater good that might come from their participation and to encourage them to engage in planning. Facilitators emphasized that this was the Veterans' event in order to increase their sense of ownership so that they planned an event that was aligned with their values, preferences, and personal style.

### **Established Goals**

Facilitators reviewed goals and objectives related to the community events. Discussion topics included themes that emerged in the filmmaking and storytelling workshops, messages that the Veterans wanted to convey to their audience, the tone they wished to set, and outcomes they wished to achieve (e.g., greater understanding or awareness of Veterans' issues, initiating new relationships between Veterans and civilians, deepening relationships between Veterans and their circle of family and friends, etc.).

### **Creation of an Outline of the Event**

#### **Planned the Format and Structure of the Event**

Facilitators worked with each Veteran group to create their own format and structure for the events. Some features that

varied between events were: *introductions* (e.g., welcome speech by pre-selected facilitators or Veterans, etc.), *order of events* (e.g., established agenda, consecutive presentations followed by audience questions/group discussion or each presentation separated by audience questions/group discussion, scheduled break/intermission, etc.), *format of delivery* (e.g., pre-selected moderator, choice of Veterans presenting as individuals or as a group, incorporation of film and/or oral narrative, etc.), *layout* (e.g., podium or table panel in front, reserved seating, table for refreshments or programs/resources, etc.), *materials/symbolism* (e.g., program or slideshow with their photos, personal biographies, or memorial/dedication to fallen comrades, etc.), *audience participation* (e.g., question and answer; meet-and-greet with audience members before or after the event, etc.), and *conclusion* (e.g., final speech by pre-selected facilitators or Veterans, relevant information or resources for audience members, etc.).

### Clarified Veterans' Roles and Increased Ownership

Veterans were offered as much choice as possible in order to empower them to be creative and to personalize the events. Veterans were encouraged to take the lead in deciding how they wanted to participate and how they wished to engage with the audience. Veterans that were not able to attend the event were encouraged to participate in the planning and were given the option of still being represented at the event however they chose (e.g., by including a biography in the program, providing a brief message they wanted to be read, etc.).

### Explored Strategies for Engaging the Audience

Facilitators supported Veterans in planning for successful audience engagement. The goal was for Veterans to feel safe and in control, to the extent possible, while participating in this event. Groups that expressed interest in allowing audience members to ask questions were coached by the facilitators on how to address questions effectively (e.g., how they might respond if they were asked a question they deemed distasteful such as through use of humor/changing the subject or educating the person, etc.). The discussion also included options for a meet-and-greet, which would allow Veterans to socialize with the audience and facilitators explored expectations with Veterans).

### Coordination of Logistics of Hosting

#### Secured a Venue

Facilitators reserved an event space in advance in order to ensure that the event could be held within a month after the

workshop. Venues included local colleges and organizations with large event spaces where the events could be embedded within the community. Spaces were all accessible to individuals with disabilities and had ample (free) parking. The events were scheduled in the evenings to accommodate most work and school schedules. Facilitators also ensured that the venues included audiovisual equipment (e.g., computers, microphones, projectors, etc.) and technical support staff was on-hand or on-call during the event.

#### Promoted the Event

Given how unusual these kinds of events are in most communities, it was important to consider different marketing strategies. Facilitators and Veterans worked conjointly to promote the event. Methods of promotion included word of mouth, social media postings, email, flyers, websites of community organizations, and relaying information to VA staff and Veterans' organizations. Veterans worked with facilitators to create a flyer or a blurb that could be written in emails or social media postings. Promotional material included notations of free admission, free parking, and the provision of light refreshments in order to attract as many audience members as possible. Facilitators encouraged Veterans to share information about the event with family, friends, classmates or co-workers, health care providers, affiliated organizations, and other members of their community.

#### Gathered Resources

Facilitators and Veterans offered resources at the events. These resources included information about future workshops, Veterans organizations, brochures for enrolling in local schools or contacting employers that aim to hire Veterans, information about self-help or referrals for healthcare in the Veterans Health Administration or in the community for Veterans and family members, and information about benefits.

#### Measures

Semi-structured self-report questionnaires were administered to workshop Veterans and audience members by research staff at the close of each event. The questionnaires assessed for demographic information, presence of relationships with Veterans, and perceptions or reactions related to the event. Questionnaire items utilized a 6-point Likert scale response format that ranged from strongly disagree (1) to strongly agree (6). In addition, open-ended qualitative questions assessed both Veterans and audience member response to the community event. For example, Veterans were asked questions including: "Can you tell us about any thoughts

and/or concerns you had about publicly sharing your [film/story]?", "Do you anticipate that participating in this [event] will impact your relationship with your family and/or friends in any way? If so, in what way?", and "Do you anticipate that participating in this [event] will change how you feel about the broader community (school, others)?" Audience members were asked questions on the impact of the event such as: "Was there anything you saw or heard at [the event] tonight that you feel was particularly impactful for you? If so, please describe" and "Did attending [the event] change your perceptions of Veterans or their military experience in any way? If yes, in what way?".

## Results

### Participants

Given that the administration of questionnaires occurred after the community events, data collection may have been limited as some of the Veterans and audience members were engrossed in their meet-and-greets and may not have completed the questionnaire (though attendance was not tracked and the response rate is unknown). Across the six post-workshop community events, a total of 88 audience members and 12 Veterans (who attended the workshop and presented at the community event) completed the questionnaire. Table 1 presents a summary of all demographic data collected. The Veterans ranged in age from 24 to 54 ( $M=37.09$ ,  $SD=9.86$ ) and they were predominantly male (91.7%) and Caucasian (72.7%). The audience ranged in age from 18 to 81 ( $M=48.91$ ,  $SD=17.03$ ) and the majority of attendees were

also male (55.7%) and Caucasian (90.4%). While workshop Veterans were given the opportunity to invite members of their personal community (i.e., family, peers, colleagues, etc.), the community-based setting of the events resulted in many audience members who attended having no personal relationship with the Veterans (63.5%). This suggests that the public was interested in attending these community events and that the responses reflect more than the views of family and friends.

The current study used a mixed methods approach, which included semi-structured questionnaires administered to both workshop Veterans and audience members. Utilizing this approach allowed us to capture the experience and meaning of the community event for individuals involved as presenters and audience members. We followed a sequential quantitative then qualitative design (Morse 2010), to first examine quantitative results and then use qualitative data to inform and contextualize our analyses. Likert scale item data from the semi-structured questionnaires were examined using nonparametric descriptive statistics and for open-ended qualitative items a thematic analysis was conducted. Table 2 summarizes the quantitative items from surveys administered to the workshop Veterans and audience members.

### Impact of Event: Quantitative Responses

All workshop Veterans either mostly (16.7%) or strongly (83.3%) agreed that presenting at the community event was helpful for them. A majority (66.6%) of the Veterans mostly (8.3%) or strongly (58.3%) agreed that participating in the event made them feel more willing to open up

**Table 1** Summary of demographic data

Demographic	Workshop veterans at community events <i>n</i> = 12	Audience <i>n</i> = 88
Age	24–54 ( $M=37.09$ , $SD=9.86$ )	18–81 ( $M=48.91$ , $SD=17.03$ )
Gender	91.7% male 8.3% female	55.7% male 44.3% female
Race/ethnicity	72.7% Caucasian/White 9.1% African American/Black 18.2% Hispanic/Latino	90.4% Caucasian/White 2.4% African American/Black 1.2% Hispanic/Latino 1.2% Asian/Asian American 4.8% Multiracial/other
Veteran status	100% Veteran	41.7% Veteran 58.3% Non-Veteran
Student status	36.4% Student 63.6% Non-student	22.5% Student 77.5% Non-student
Relationship with workshop veteran	–	63.5% No relationship 17.6% Friend 12.9% Family 5.9% Other

Data collected across six community-based events

**Table 2** Post-event questionnaire responses

Questionnaire item	Rating						Mdn	M	SD
	Strongly disagree (%)	Mostly disagree (%)	Slightly disagreed (%)	Slightly agree (%)	Mostly agree (%)	Strongly agree (%)			
<b>Workshop veterans at community events</b>									
1. I found it helpful to [present] at this event	0	0	0	0	16.7	83.3	6	5.83	0.39
2. In general, I feel connected to other Veterans in my community	0	0	8.3	8.3	41.7	41.7	5	5.17	0.94
3. Participating in this [event] made me feel like I am more willing to open up to others about my experiences as a Veteran	0	0	0	33.3	8.3	58.3	6	5.25	0.97
4. Participating in this [event] made me feel like I am more likely to seek out support from other Veterans	0	0	0	33.3	8.3	58.3	6	5.25	0.97
5. Participating in this [event] made me feel like my family and community are interested in Veterans' experiences	0	0	0	16.7	33.3	50.0	5.5	5.33	0.78
<b>Audience</b>									
1. Before [attending this event], I would say that I had a good sense of how Veterans living in my community feel	3.4	8.0	3.4	22.7	39.8	22.7	5	4.56	1.29
2. This [event] made me feel like I understand Veterans better	1.1	0	1.1	10.2	31.8	55.7	6	5.39	0.86
3. This [event] made me feel like I am more interested in Veterans' issues/care more about Veterans' issues	1.1	0	0	11.4	21.6	65.9	6	5.50	0.84
4. This [event] made me feel like I would like to learn more about Veterans' experiences	1.1	0	1.1	5.7	26.4	65.5	6	5.53	0.82
5. I am aware of the resources that are available for Veterans/I know who to reach out to if I know a Veteran who is struggling	9.2	10.3	9.2	13.8	21.8	35.6	5	4.36	1.70

[ ] indicates the part of the item that was adapted for the Filmmaking and Storytelling Community Events

1 = *Strongly Disagree* 2 = *Mostly Disagree* 3 = *Slightly Disagree* 4 = *Slightly Agree* 5 = *Mostly Agree* 6 = *Strongly Agree*

to others about their experiences. A majority (83.3%) of Veterans also indicated that participating in the event made them feel that their families and community members have an interest in Veterans' experiences. A majority (87.5%) of audience members mostly or strongly agreed that attending the community events helped them better understand the experiences of Veterans. A majority (87.5%) of audience members mostly or strongly agreed that attending the events made them feel more interested in Veterans' issues, and also more eager to learn about Veterans' issues (91.9%).

### Analysis of Qualitative Responses

A thematic analysis of the open-ended items on a semi-structured self-report measure was conducted for responses of Veterans and audience members. Three authors independently reviewed all of the open-ended responses and classified them into categories and subcategories of themes. These researchers then reviewed all proposed themes together and came to a consensus regarding all salient themes.

### Qualitative Responses from Workshop Veterans

Thematic analysis of responses of Veterans who completed the questionnaire (n = 12) yielded three main categories: feelings prior to the event, perception of the audience's response to the event, and impact of the screening event on their relationship with community and family.

Most Veterans (n = 8) reported that, although it was not easy to share their story or film with the audience, it felt helpful and important to do overall. One respondent stated, "Sharing my story has always been a little tough especially considering my background and where I come from in the Army. I have also found that sharing it can be kind of therapeutic in its own way." Veterans also reported positive responses from the audience. The majority felt that audience members seemed engaged, interested, respectful and appreciative of their willingness to share their experiences (n = 11). One Veteran wrote: "The question and answer (following the film screening) was really cool, you could *feel* the connection to the audience." In terms of the Veterans

perception of the impact on their family and the larger community, the qualitative results here were mixed. Most Veterans felt that the event might have an effect on individual connections or relationships. For example, one Veteran stated, "Yes. They can watch my film and others' and understand my thoughts better." However, most Veterans indicated that the event did not alter their overall perceptions of the larger community. As one Veteran put it: "I don't think the event will change how I feel about the broader community."

### Qualitative Responses from Event Audiences

Of the 88 audience members who completed surveys, 83 provided qualitative response data and were included in analyses. Thematic analysis yielded a total of five main themes: increased understanding of Veterans and the impact of transitioning out of the military; increased empathy towards Veterans; learning about Veterans' isolation; appreciation of Veterans' bravery and courage; and the importance of civilians listening to and supporting Veterans in their community.

#### Increased Understanding

Many audience members reported a greater understanding of how transitioning Veterans might be feeling following the community event ( $n = 17$ ; 25.7%). Respondents expressed an increased understanding of the difficulties Veterans may encounter when separating from the military. One respondent commented, "the event has opened my eyes further to the struggle and emotions these veterans deal with in everyday life." Another audience member stated: "it helped me to understand better what they actually have gone through and have to deal with in everyday life." Some audience members were Veterans themselves and felt that witnessing the community event reminded them that they were not alone in their feelings. As one audience member put it, "very powerful. As a Vet, it hit deep that its exactly the way I feel." Hearing stories told orally or through film provided audience members with knowledge about the Veteran experience that may not have been available or accessible to them previously. With this new information came an increase in understanding the plight of Veterans and led to our next theme, an increase in empathy towards the Veteran population in general.

#### Increased Empathy

Following these community events, audience members reported experiencing an increase in empathy towards Veterans and a perception that they were more relatable ( $n = 10$ ; 15%). One audience member reported, "seeing their creativity and some vulnerability was very moving and made me feel closer to these veterans who I've never met. It helped me to realize how much I have to learn".

Other audience members echoed this sentiment and stated that, after the events, Veterans seemed "more human... and much, much more relatable". Some audience members connected this experience to Veterans they personally knew, who may not have been part of the event; "Showing the amount of anxiety that a veteran has on a daily basis. I think my dad holds a lot in for what he went through". These community events served to humanize the Veteran presenters and had an emotional impact on audience members who could now feel a connection with them. One audience member summed this up concisely, stating that, "this experience allowed me to connect with veterans more deeply. Eye-opening. The experience helped me to humanize veterans even more".

#### Social Isolation

Audience members reported feeling impacted by the realization of how isolated Veterans may be or may feel after separating from military service ( $n = 10$ ; 15%). One audience member commented, "I [am] saddened to think that Veterans feel so isolated from civilians". Another audience member commented on new information they had learned about this isolation, "the perspective of Veterans expressing isolation from everyone (except in some cases, other Veterans)". The media of film and oral storytelling helped audience members to better understand the isolation Veterans might experience, even if they had heard about this issue before. One audience member said, "the isolation I have heard about is much more real and accessible now".

#### Addressing the Gap

Some audience members reported perceiving the experience as a call to action. What they witnessed in the event highlighted the need for civilians to listen and to try to better support Veterans ( $n = 8$ ; 12%). One audience member stated, "These films made me feel like I have to help more. Period", and another reported, "attending this has reinforced the importance of supporting our veterans." Some audience members talked about how the event caused them to think more about the gap between Veterans and civilians and how to foster connection between the two groups. One audience member commented, "as a civilian, how can we learn to bridge that gap. What questions are okay to ask. We want to know what you've experienced, what you think and need to feel connected. How can we civilians do better to truly welcome you home?". This theme highlights the potential of these types of events to promote dialogue and connection between Veterans and civilians.

## Bravery in Sharing

Some audience members commended presenters at the events for their bravery and courage in sharing their story and experiences with the audience ( $n = 3$ ; 0.04%). One person commented, "I love what [the Veteran] said about using transforming anger and resentment into education. That takes humility and courage, I appreciate it very much."

## Discussion

The current data provides information on community-based events designed to promote community connection between Veterans and civilian community members. Findings suggest that these events have great promise in terms of improving how community members perceive Veterans. We explored elements of the community events that may contribute to change in perception, for both the Veterans and the audience, as a way to develop this intervention further. We found that the events were received positively by both the Veterans and audience members. The audience responses confirmed the need for further contact between the two communities and education about Veteran and military experiences. The themes identified in qualitative analyses highlight the emotional impact of these community events on both Veterans and civilians. These types of events have the potential to reduce stigma and shame related to mental health challenges, social isolation, and difficult life transitions for Veterans. Most of the audience members in the community events had no personal relationship with the workshop Veterans, which suggests that the public was interested in attending these community events. In addition, these events have the potential to educate civilians about challenges Veterans face, may increase empathy and positive regard towards Veterans and motivate civilians to support Veterans in the future.

The community events themselves served as an intervention for both the workshop Veteran and the audience in multiple ways. For the Veterans, the community event provided an opportunity to share their personal story with an audience in a format chosen by the Veterans and a manner in which they felt comfortable. In our sample, the audience responses were overwhelmingly positive and may serve as a corrective experience for Veterans, as they were able to see civilians as more interested, involved, and supportive than in previous experiences. Further, taking an active approach to change the public's perspective on Veterans' issues through education and personal narratives may be meaningful and empowering for Veteran participants. Prior research suggests that many Veterans experience a lack of purpose and direction after separating from the military (Koenig et al. 2014; Quinn 2008). Events like these may help to guide

Veteran participants to find new purpose and direction in their communities.

For the audience, the events provide education about Veterans' experiences, combat stigma, and increase empathy towards Veterans by creating opportunities for connection and presenting them as relatable. Storytelling is a two-person process that includes listening and telling. Unlike, written narrative, the audience's interpretation and reactions, in a sense, shapes the story by influencing the storyteller. Creating spaces where stories are told exposes the listeners and/or viewers to a personal and relatable form of learning. Shame and isolation can be combated by building community. These events provide a forum to educate civilians about Veterans' issues. For Veterans that are in the audience, it may be a useful opportunity to learn about common Veterans' experiences and to reduce stigma and shame around their own experiences. Presenting this information in artistic and creative ways helps to keep the audience engaged and possibly more receptive to the content. Further, it allows a diverse audience to "digest" material that otherwise might have been overwhelming or vicariously traumatizing. Lastly, the hope is that the audience's reactions to the event might inform their future actions in interpersonal interactions with Veterans in the community and help to support community reintegration of Veterans. In this way, these audience members could positively contribute to the creation of a community devoted and committed to sharing the burden of military service and, even more so, of war.

The nature of pilot data denotes that our sample is a small convenience sample of Veterans and community members, who were largely male and white, which limits the generalizability of our findings. In addition, a baseline assessment of perceptions was not collected, which in retrospect may have allowed for greater understanding of the impact of the event on the audience's perceptions of the Veterans as well as the Veterans' shift in perception of the audience. We are also limited by the measures utilized in our analyses. Since this is a novel intervention, the questionnaires administered to collect data about the community events were developed by the authors and have not been validated with psychometrics.

Future studies should include pre and post measures for the audience and the Veteran presenters to better assess changes brought on by the presentation. Longitudinal investigation would also be indicated to assess the impact on audience members' actions following the event. Providing specific instructions and guiding the audience to continue this conversation could support community-building even further. For example, it could be helpful to consider an annual gathering, or a Veteran-civilian group, to make this intervention more sustainable. Lastly, implementation of controlled trial to monitor the medium of information delivery will assist in determining the underlying aspects of the intervention that relate to change.

In summary, our model offers a systemic intervention to address the isolation that many Veterans report after separation from the military. Creating a public narrative event could have an indirect impact on the Veterans' recovery and social reintegration. This alternative model may build community and also act as a mechanism of change in the individual Veteran's functioning and quality of life.

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