



BOB WOODRUFF
FOUNDATION

**Community Collaboration
For America's Veterans:
Insights From The Bob Woodruff
Foundation's Local Partner
Self-Assessment Tool**

JUNE 2020

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Introduction & Summary

Nearly 18 million veterans of the U.S. military live in the United States today, making up 7.1 percent of the nation's population.¹ Each year, roughly 250,000 men and women separate or retire from military service, joining the ranks of earlier veterans as they reintegrate into civilian society.² Veterans thrive as parents, neighbors, workers, entrepreneurs, and leaders. But like all Americans, some also struggle from time to time.

More than 6,500 organizations across the country provide direct support to veterans and their families. As many as 40,000 additional organizations that provide services to other populations support veterans, service members, and their families as well.³ The Bob Woodruff Foundation (BWF) navigates that maze of organizations to find, fund, and shape excellent programs to serve the veteran population and to ensure that all current and former service members, their families, and caregivers have the opportunity to thrive.

BWF's work with leading organizations addresses the current and emerging needs of veterans and their families. But the communities into which veterans transition also play a fundamental role in their reintegration and well-being. Accordingly, BWF has invested significantly to increase local communities' capacity to organize and collaborate for greater impact in the lives of veterans than any single organization could make on its own. By identifying, supporting, and providing strategic learning, funding, and technical assistance programs to community-based veterans' collaboratives, the Bob Woodruff Foundation manages the largest national nongovernmental network of stakeholders in veterans' wellness. We facilitate these BWF "Local Partners" (LPs) meeting and learning together regularly as a national community of practice.

BWF's Community Partnerships team engaged with Local Partner leaders to assess the most pressing issues facing veterans and their families at the community level. Guided by a commitment to use data to inform how we best build the capacity of Local Partner collaboratives to serve veterans, BWF surveyed LP collaboratives between October 2019 and January 2020, to establish a baseline understanding of what veterans need, and how well community leaders are able to identify and deploy resources that address those needs.

The survey responses offer critical insights of how best to support the population that BWF serves. And if those insights were important before, they are even more so now—as the COVID-19 outbreak strains local infrastructure, erodes vital services, and reintroduces or exacerbates issues that were being addressed well at the local level before the outbreak.

This report presents the results of BWF's Local Partner Self-Assessment Tool (LPSAT). It offers the first data-driven view of the landscape of local organizations around the country that serve veterans and their families. The survey results point to important ways in which those organizations—in collaboration with BWF—can increase their collective capacity to support America's veterans.

In what follows, we describe the structure, history, and funding of BWF's Local Partner collaboratives; the diverse needs of the veteran and military-affiliated populations they serve; the collaboratives' capacity to address those needs; and the challenges they face in doing so. The report also examines how Local Partners conduct outreach to inform the target populations in their communities about their services. Finally, the report describes Local Partners' governance structures, how member organizations collaborate with each other to address veterans' needs, and the extent to which they use data and technology to set goals and monitor their impact.

BWF's Local Partners and the Collective Impact Model

In communities across the nation, groups of people and organizations from many sectors are coming together to form collaboratives to leverage resources and address an array of social issues and challenges—including those that concern veterans. BWF has identified, recruited, and engaged more than 100 veteran-focused collaboratives as Local Partners, which include at least 3,000 member organizations in all. Local Partners join the BWF network after meeting specific criteria and agreeing to specific commitments.

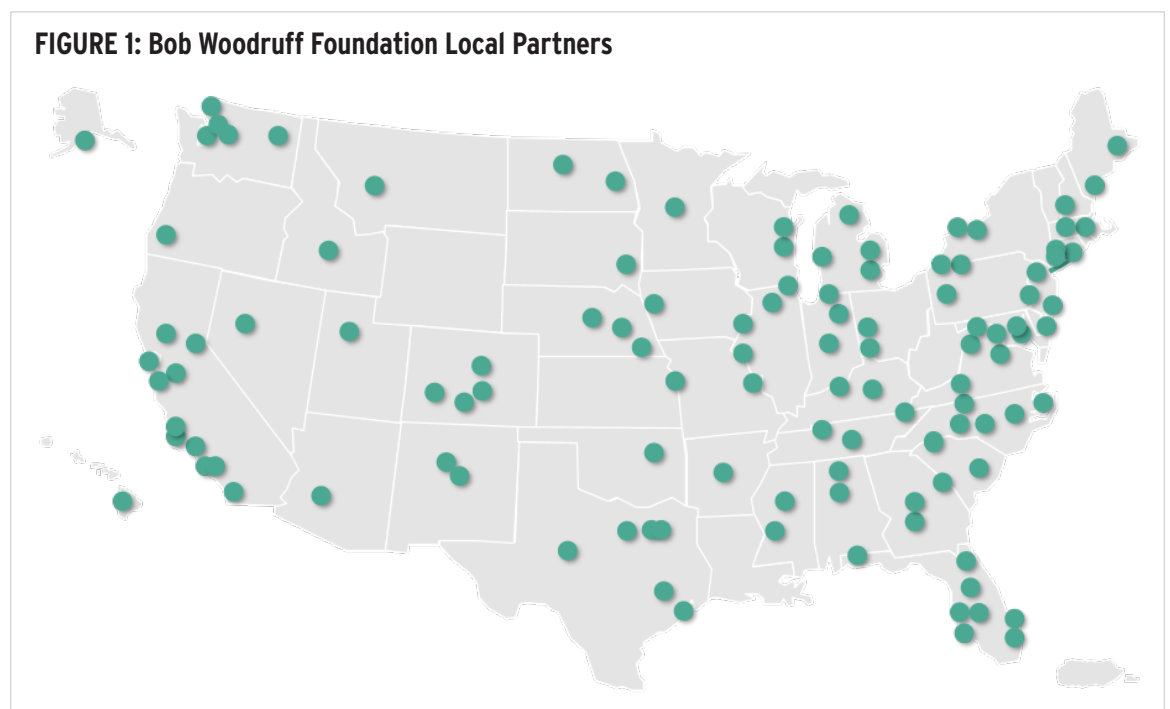
BWF encourages Local Partners to pursue a “collective impact” approach—defined as groups of people from different sectors working together to address a specific issue using a structured form of collaboration. The conditions of that collaboration include a shared common agenda; shared measurement systems; mutually reinforcing activities; continuous communication; and a strong backbone organization that provides infrastructure to plan, manage, and support the collaborative initiative.⁴

As members of the BWF network, Local Partner collaboratives have free access to a curated portfolio of expert-led resources, tools, and opportunities for technical assistance that help build their capacity for collective impact.⁵ The collaboratives also engage in programs, conferences, and conversations that facilitate shared learning with their peers who serve veterans in communities across the country. BWF’s respect for local leadership, values, and culture facilitates a “big tent” approach with a nationwide network of organizations that vary considerably in size, structure, and resources but that share a commitment to structured collaboration to make an impact on the lives of veterans.

The Local Partner Self-Assessment Tool

The Bob Woodruff Foundation is committed to using up-to-date, expert information to help its Local Partners and other community-based groups improve their capability to serve veteran and military-affiliated populations. BWF is also committed to making empirically informed investments in the broader landscape of services for veterans. To those ends, BWF designed a survey called the Local Partner Self-Assessment Tool (LPSAT) to identify strengths and areas for improvement among its community-based Local Partner collaboratives.

The LPSAT aims to draw insights about the needs of veterans—and about communities’ ability to meet those needs—from BWF’s large, engaged, and diverse network of over 100 Local Partner collaboratives, which cover almost every state in the nation (Figure 1). The survey can also help BWF shape and support the collaboratives’ growth and capacity for measurable impact.



In October 2019, BWF sent the LPSAT to the Local Partners. Eighty-eight Local Partners completed the survey within the six-week launch period, out of the 109 in the network at that time, for a response rate of 81 percent.

The LPSAT consists of three sections: background information about the Local Partner respondent and the collaborative to which it belongs, a self-assessment of the LP collaborative's impact, and a section of open-ended questions to identify specific concerns and provide information about how BWF might best support communities that are collaborating to make an impact on the lives of veterans and military-affiliated populations.

Key Findings from the LPSAT

The Local Partner collaboratives that responded to the survey represent communities that include more than 11.5 million veterans, almost two-thirds of the U.S. veteran population. This snapshot of the collaboratives' operations offers valuable information for community organizers, service providers, funders, researchers, and policymakers interested in improving the well-being of veteran and military-affiliated populations—not only during this time of increased need but also over the long term. For people interested in how the collective impact model applies to the delivery of social services in general, this report provides an assessment of how organizations are using that model to serve veteran and military-affiliated populations, including where current approaches best align with the components of the collective impact model and where they face challenges.

The main findings from the LPSAT include the following:

- BWF's Local Partners recognize that supporting veterans also means supporting the people around them; almost 70 percent of LP collaboratives provide services to veterans' families, survivors, and caregivers, as well as to service members in the active and reserve components of the military.
- The community-based model for cross-sector collaboration in support of veterans is relatively new; most Local Partner collaboratives were established in the past 5 to 10 years.
- Local Partners engage community-based collaborators extensively; nearly 80 percent of LPs have more than 10 member organizations, and more than 25 percent include more than 50 member organizations.
- BWF's Local Partner network reflects significant diversity, not only in the types of member organizations that make up each collaborative but also in the infrastructure and financial resources available to them. More than two-thirds of the backbone organizations of LP collaboratives have operating budgets of \$25,000 a year or less, and half run on volunteer power alone, with no paid staff dedicated to the collaborative's work.
- Collaboratives attempt to address a wide range of needs—from physical and mental health to employment, social services, and family-related issues—but their capacity to meet those needs varies.
- Traditional outreach, awareness, and referral methods are the main ways in which Local Partners try to reach the people they aim to serve. Some Local Partners reported that outreach to veterans is one of their greatest challenges.
- Most collaboratives rely on data to set goals and identify their clients' needs, but they are less likely to use data to evaluate their performance. Increasing the use of data-driven evaluation is an area that offers significant opportunities for collaboratives to continue growing and enhancing their effectiveness.

The Impact of COVID-19

BWF collected these LPSAT data before the novel coronavirus became a significant problem in the United States. Thus, the findings in this report provide a baseline picture of veterans' needs—and the capacity of Local Partner collaboratives to address those needs—before the public health crisis. Where the data indicate sufficiency, we recognize that they represent a best-case scenario. Where they indicate gaps, we are increasingly concerned.

As this analysis was under way, the coronavirus became an immediate global threat, so BWF shifted its focus to release a report about the impact of the pandemic on veterans ([Veterans and COVID-19: Projecting the Economic, Social, and Mental Health Needs of America's Veterans](#)). That report shared recent updates from Local Partners to highlight the types of support structures for veterans that are being strained significantly during the pandemic.

The findings and implications we identified for American veterans in that report continue to worsen. Although conditions such as sickness, unemployment, and the stress of stay-at-home orders (especially for people with young children) are real to all of us, they may be especially challenging for veterans who were affected physically or emotionally by their military service.

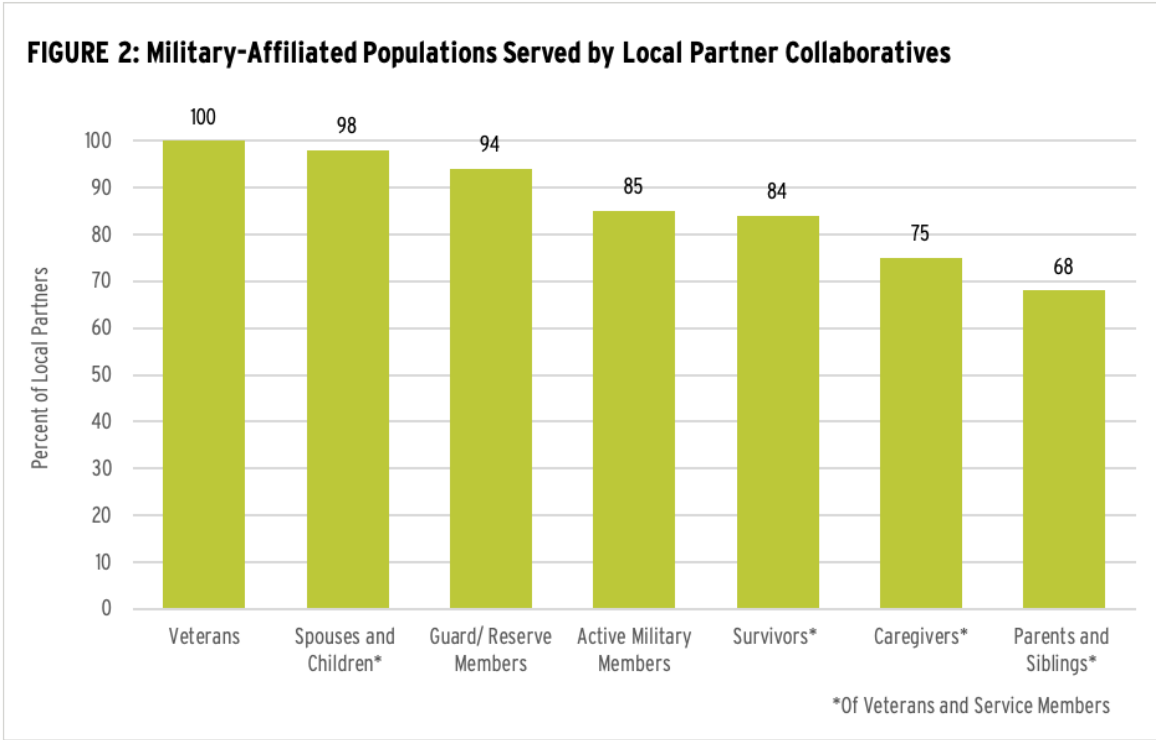
As we release this report, BWF highlights and applauds the Local Partner collaboratives that are serving their communities' veteran and military-affiliated populations. We also applaud the many veterans who are emerging as national and local leaders in America's response to the COVID-19 pandemic.

Findings Of BWF's Local Partner Self-Assessment Tool

Local Partner Collaboratives Serve Veterans, Service Members, and Military Families

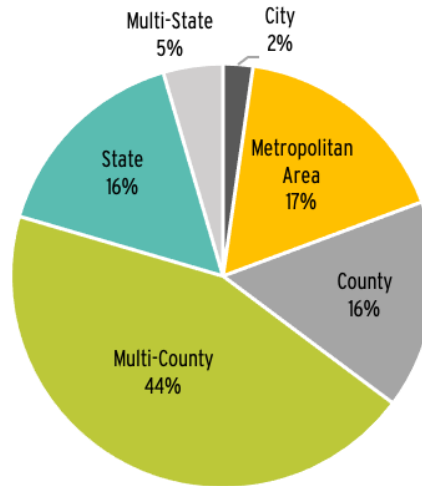
Whether directly or through its member organizations, each Local Partner collaborative provides or coordinates comprehensive services to the veterans and members of other military-affiliated populations in its community. All 88 of Local Partner collaboratives that responded to the LPSAT serve veterans and all but one serve at least one other military-affiliated population (Figure 2). Almost all serve veterans' spouses and children and members of the National Guard and Reserve. The vast majority also serve members of the active military and survivors (people who lost a service member or veteran to any cause of death).

Three-fourths of Local Partner collaboratives serve caregivers, and many also serve siblings and parents of service members and veterans. In addition, at least one LP collaborative serves military recruits, and one serves former interpreters from Iraq and Afghanistan who are living in the United States on special immigrant visas.



BWF's Local Partner collaboratives operate at the community level as well as across counties and states (Figure 3). Two-thirds of LPs serve broad geographic regions, such as multiple counties, entire states, or multiple states. The remainder are almost evenly split between serving a specific metropolitan area or a county. Few serve single cities.

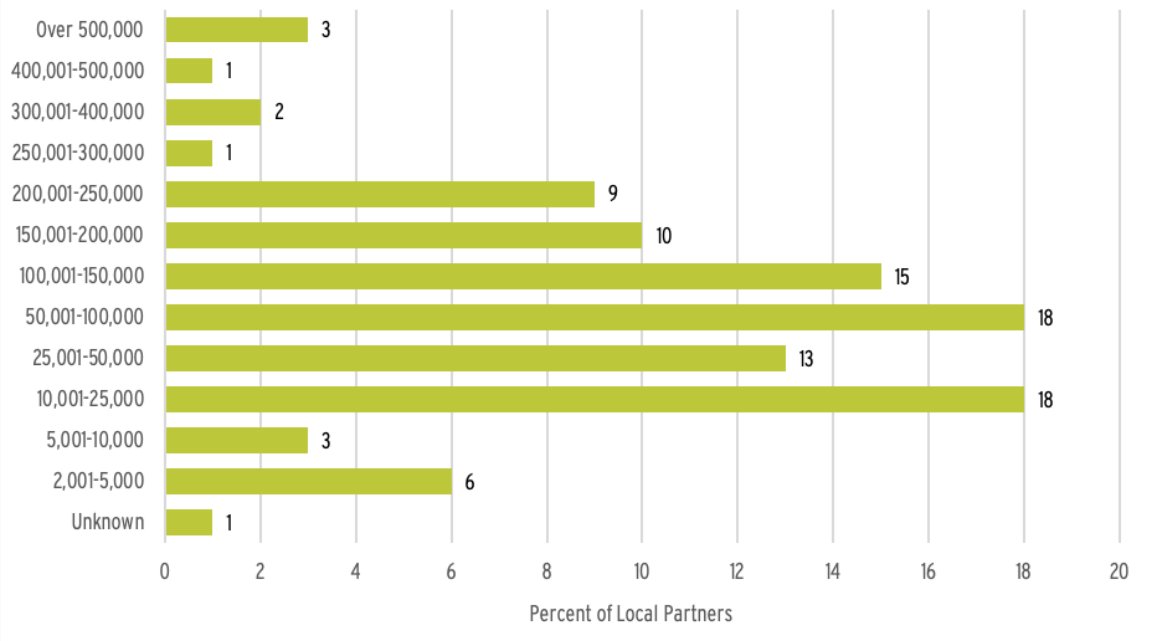
FIGURE 3: Service Areas of Local Partner Collaboratives



Local Partner collaboratives vary widely in the number of veterans and service members known to be living in their service areas (Figure 4). Those numbers probably underrepresent the total population that the collaboratives serve, which often includes family members and survivors.

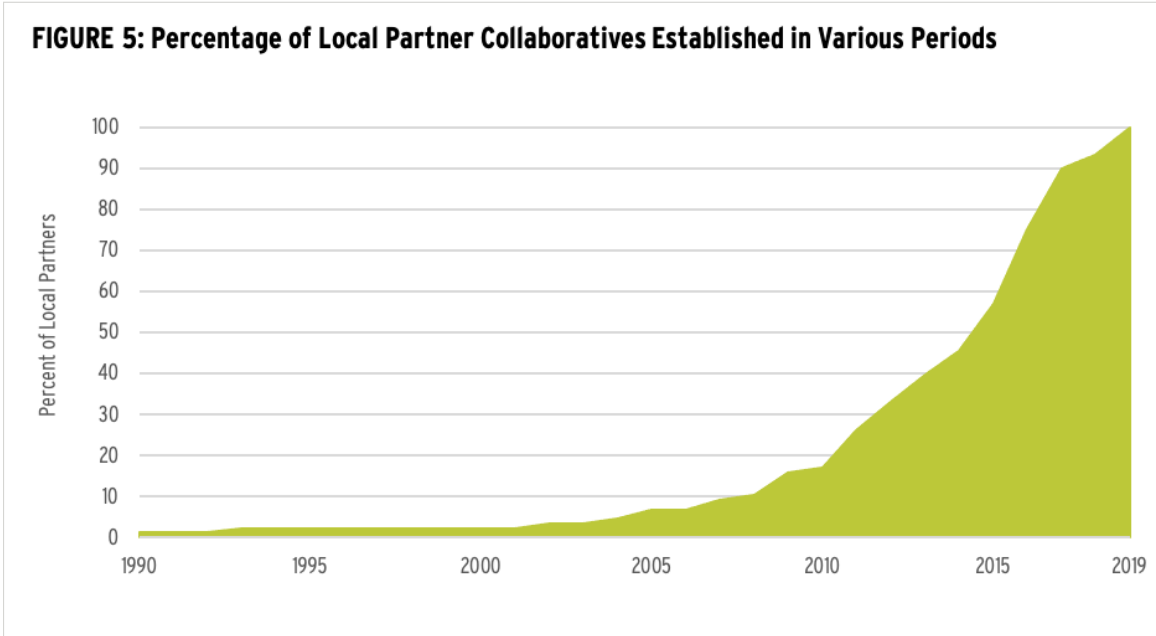
Most collaboratives (64 percent) serve areas that have between 10,000 and 150,000 veterans and service members. Fewer than 10 percent serve smaller areas, and a quarter serve areas that contain more than 150,000 veterans and service members. **In all, BWF’s network of Local Partner collaboratives serves areas that are home to at least 11.5 million veterans.**

FIGURE 4: Number of Veterans and Service Members Living in the Service Areas of Local Partner Collaboratives



Local Partner Collaboratives Are Relatively Young and Include a Diversity of Organizations

BWF’s Local Partner collaboratives represent cross-sector groups of people and organizations that collaborate and leverage resources to make an impact on the lives of veteran and military-affiliated populations at the local level. Community-based collaborative models for veterans’ services are a relatively recent phenomenon,⁶ so the Local Partner collaboratives are a fairly young group. Almost half were established within the past 5 years and most within the past 10 years (Figure 5).



The size of the collaboratives, as defined by the number of member organizations they contain, varies (Figure 6). The largest segment (25 percent of collaboratives) consists of formal partnerships with 11 to 25 organizations.⁷ But almost 20 percent of LP collaboratives contain five or fewer members, whereas nine percent (eight collaboratives) include more than 100 member organizations.

We estimate that, in total, BWF’s network of Local Partner collaboratives has a collective membership of between 3,000 and 3,800 organizations. In some cases, those members include local chapters or affiliates of larger, national organizations.

FIGURE 6: Number of Organizations in Local Partner Collaboratives



Most Local Partners are either nonprofit organizations themselves or ad hoc initiatives housed within larger “backbone” entities to provide structure to a collaborative. However, some collaboratives were established by public-private partnerships, grantmaking organizations, City Halls, small businesses, and other entities that play a convening or other leadership role in their community.

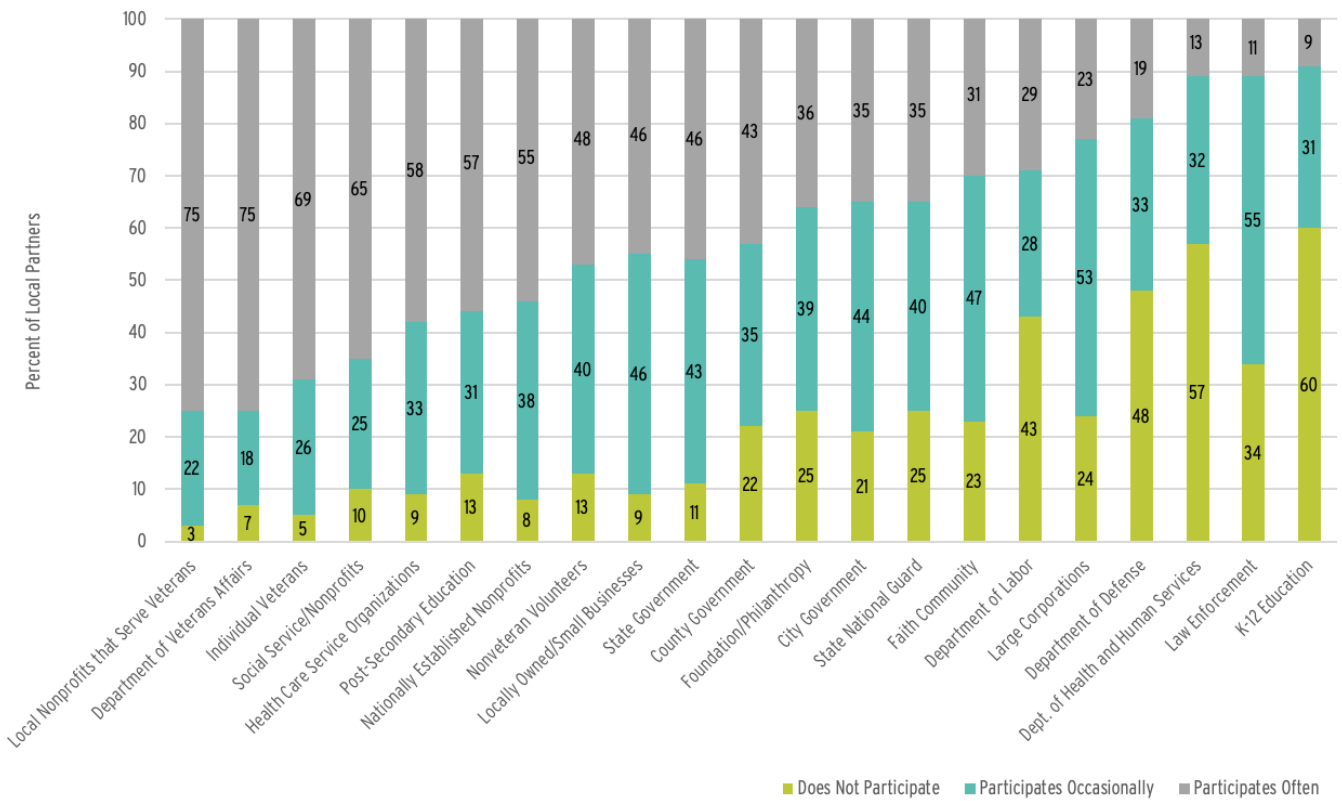
The membership of each Local Partner collaborative includes leaders from a range of fields and services generally thought to be of fundamental concern in the lives of veterans. The extent to which different fields are represented as members in each collaborative varies, as do the levels of participation by those members.

Most commonly, the membership of Local Partner collaboratives includes representatives from the Department of Veterans Affairs (VA) and local nonprofits that serve veterans (Figure 7). Both social service agencies and health care organizations that serve the general population are also well represented, as are individual veterans not identified with any particular agency who step up to serve as volunteer leaders in their communities. National nonprofit organizations that serve veterans also appear to be involved in most community-based LP collaboratives.

Roughly half of the collaboratives include representatives from federal agencies whose mission, programs, and services touch the lives of veteran and military-affiliated populations. Local Partner backbone organizations that responded to the survey mentioned representation by the Departments of Labor, Defense, and Health and Human Services, but there may be additional affiliates of those departments that participate with collaboratives as well. For example, the Substance Abuse and Mental Health Services Administration, which is part of the Department of Health and Human Services, has partnered with the VA to facilitate the Governor’s and Mayor’s Challenges to Prevent Suicide Among Service Members, Veterans, and their Families in states and local communities, and some collaboratives are involved in those efforts.

More than half of the Local Partner collaboratives report that representatives of post-secondary educational institutions and the health care industry (such as local clinics, hospitals, and service organizations) participate “often” in their work. Participation by the small-business community, nonveteran volunteers, local governments, organized philanthropies, and the faith community is “occasional” but common among collaboratives. Only 40 percent of collaboratives include representatives from the field of K-12 education.

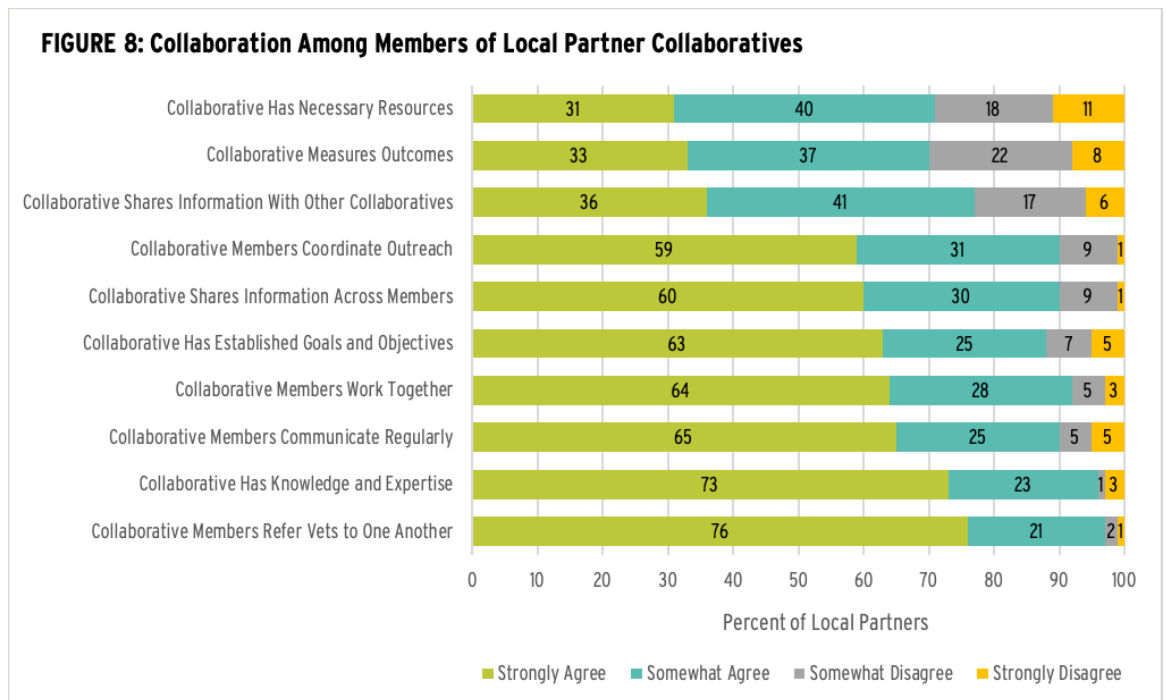
FIGURE 7: Organizations, Professions, and Sectors That Participate in Local Partner Collaboratives



Local Partners Forge Strong Collaborative Relationships

Collaboration is a critical element of collective impact, and **Local Partners indicate strong collaboration among their members.** More than half of the respondents “strongly agree”—and 90 percent agree more broadly—with 7 of the 10 statements in the LPSAT that measure active collaboration (Figure 8).

However, the responses also indicate some compelling areas for improvement in collaborative capacity. **Almost one-fourth of the collaboratives, for example, do not share information with other collaboratives, nearly one-third do not measure the outcomes of their collaborative efforts, and almost one-third lack the resources necessary to optimize their collaborative capacity.** Those are all areas that many veteran-serving collaboratives could work on to improve their collective impact. This said, BWF acknowledges there are a number of barriers to achieving these milestones.



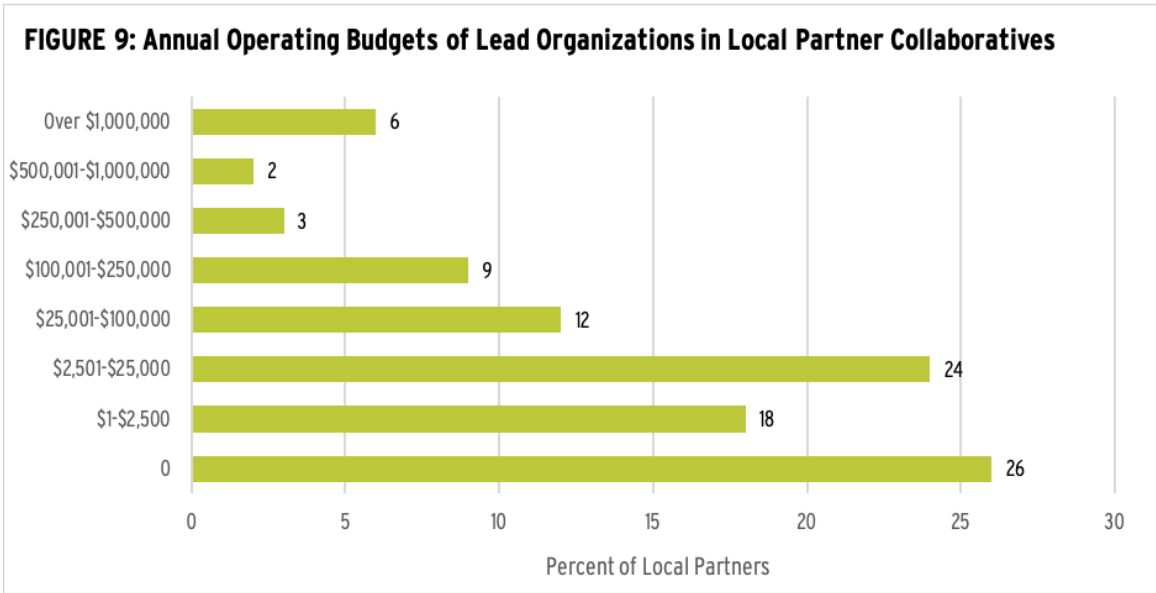
Some Local Partners, especially newer ones, also described challenges to working collaboratively. For instance, one Local Partner indicated, “We are also still building trust: veterans are still seen as a commodity to be protected, and ... I don’t think organizations are comfortable sharing ‘their’ veterans with others.” That statement suggests the importance of building and maintaining trust among member organizations.

Local Partner Collaboratives Have Vastly Different Financial Resources

Accurately portraying the budgets and resources of collaboratives can be complicated because many members are part of larger organizations that may not account for the collaborative's activities separately from other budgeted programs and services. Certainly, the range of practices for accounting for collaboratives' activities varies widely. For this report, we focus on the budget of the individual Local Partner that performs the backbone function for a collaborative. If that lead organization's mission and services extend beyond guiding the collaborative, we show only the dollar amount specifically allotted to the collaborative's activities rather than the overall budget of that organization.

Just over one-quarter of Local Partner collaboratives operate with no dedicated budget for their activities, and another two-fifths operate on budgets of \$25,000 a year or less (Figure 9). The remaining one-third are almost evenly split between annual operating budgets of \$25,001 to \$100,000, \$100,001 to \$250,000, and more than \$250,000.

Budgets, however, tell only part of the story: **Fifty-two percent of Local Partner collaboratives have no paid staff dedicated to the collaborative.** Among those without paid staff, more than 90 percent operate on annual budgets of \$25,000 or less. One of the five conditions of collective impact is "independent, funded staff dedicated to the initiative,"⁸ suggesting that as many as half of the Local Partner collaboratives may not be achieving their full potential for collective impact.



Collaboratives Address a Wide Range of Needs, but with Varying Capacity to Meet Them

Local Partner collaboratives provide a range of programs for the veteran and military-affiliated communities, including job and career training, case management, mental and physical health and wellness services, food and nutrition support, transportation resources, legal services, recreational activities, and opportunities for social interaction. In some cases, the member organizations of a collaborative provide such services directly to their clients. In other cases, the collaborative's backbone organization both coordinates resources and services among the members and also provides direct services.

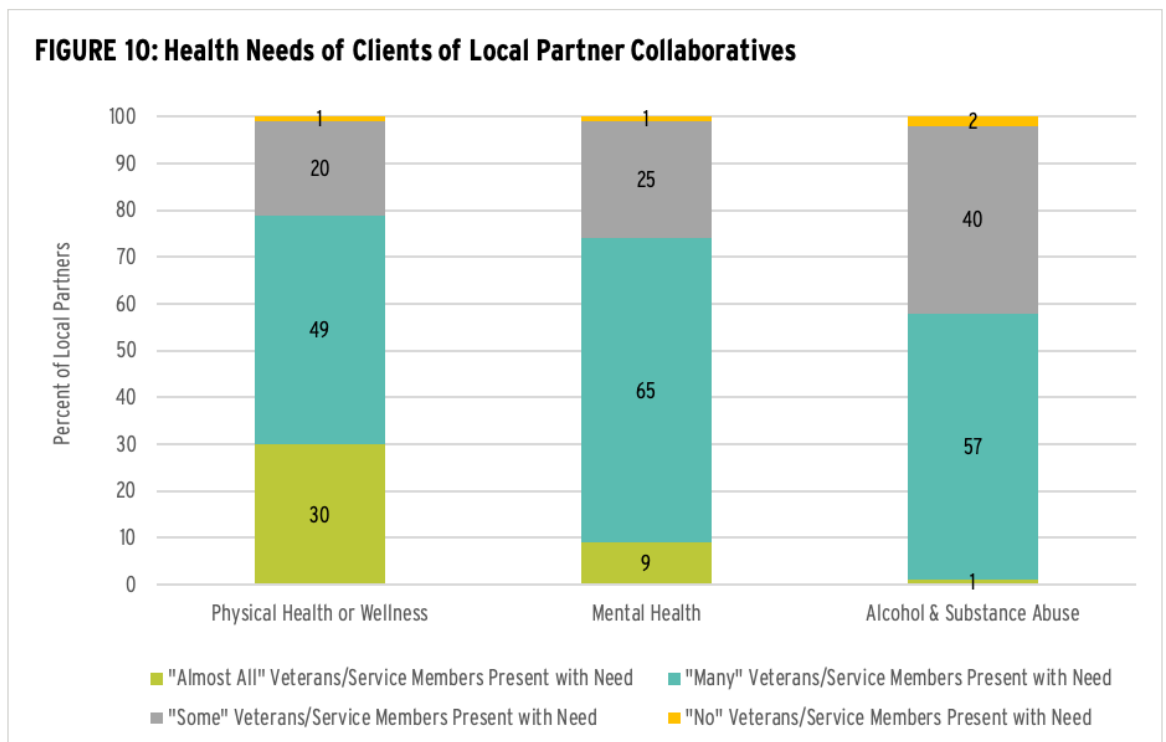
According to LPSAT respondents, half of the backbone organizations provide services directly to veterans, either as part of their primary mission or to address the needs of a client when other member organizations are not available or are not appropriate to address the issue. For example, one backbone organization indicated that it first attempts to link a new client with a collaborative member. But if no such resource is available to resolve the issue, or other circumstances prevent a solution, that organization tries to resolve the veteran's issue directly.

Because Local Partner collaboratives work daily with veterans reintegrating into civilian society, they possess unique insights into the specific needs of veterans in their community and into their community's capacity to meet those needs. In responding to the survey, BWF's Local Partners discussed how many veterans and military-affiliated individuals presented with a given need or concern, quantified their collaborative's capacity to meet that demand, and indicated their greatest challenges in addressing some of those needs.

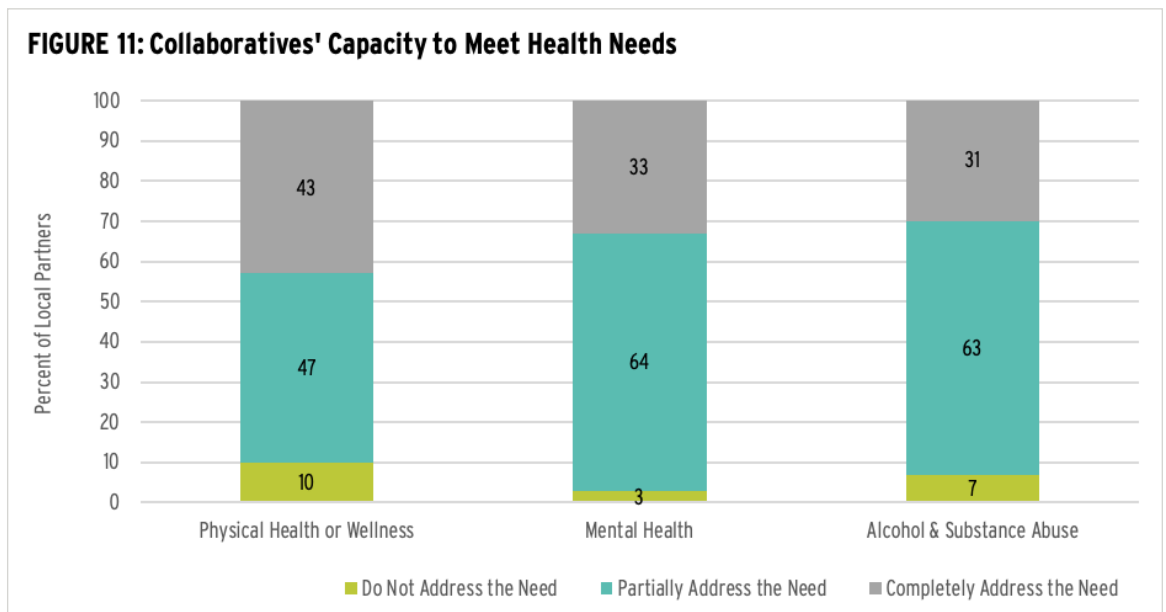
As a reminder, these findings describe the needs and capacities that existed before the COVID-19 outbreak. Since data collection from the LPSAT concluded, Local Partners have continued to provide BWF with updated information through quarterly Regional Cohort meetings of Local Partner leaders and BWF-organized online forums. Where appropriate, this report includes that information to complement the LPSAT data.

Health Needs

Between 70 percent and 80 percent of collaboratives report that “many” or “almost all” of the veterans they serve present with physical or mental health needs (Figure 10). In addition, 58 percent say that “many” or “almost all” of their veteran clients need help with substance or alcohol abuse.



Over 90 percent of Local Partner collaboratives say they can at least partially address the health needs of the people they serve (Figure 11). But whereas 43 percent of collaboratives say they can “completely” address needs related to general physical health, only 31 percent to 33 percent can “completely” address the need for services related to mental health or alcohol and substance abuse. Those findings raise significant concerns about the provision of mental health and substance abuse services—and the resources needed to fund and sustain them—at the community level.



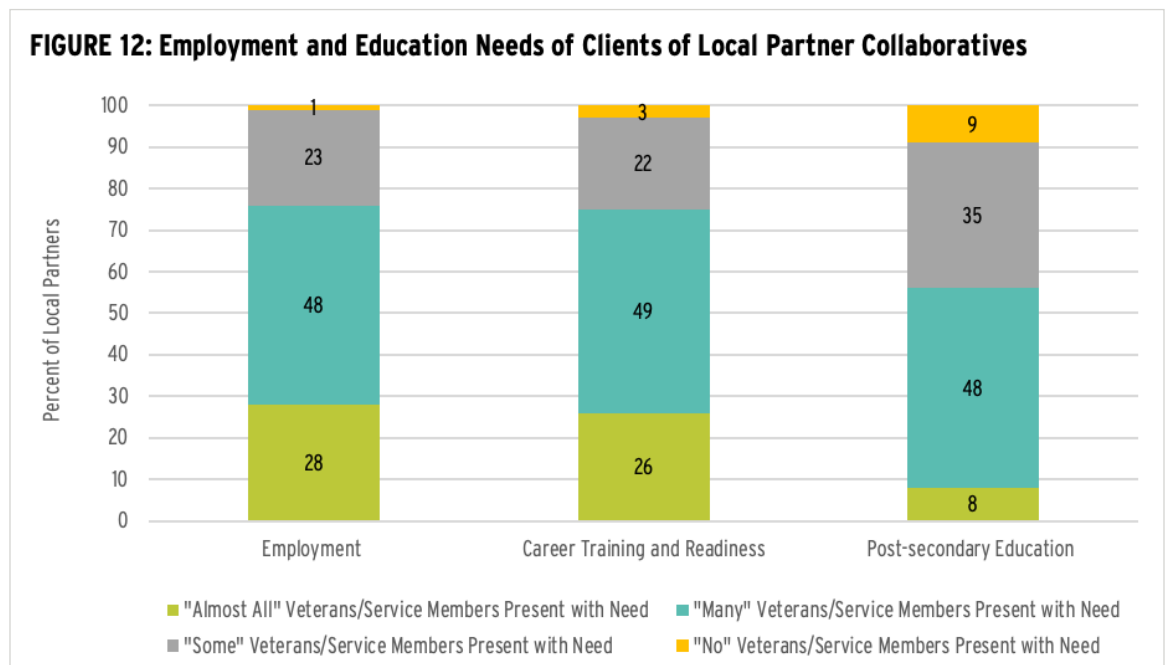
Some Local Partners indicated that mental health and substance abuse problems are their most difficult needs to address, largely because of a lack of providers or available appointments in their communities. Local Partners stated, “We don’t have enough capacity in the state for mental health providers” and “there are not enough Docs or beds!” Others referred to a “lack of depth and fragmentation of mental health resources” as well as insufficient funding for mental or behavioral health issues. However, a third of LPs indicated they have sufficient capacity to address mental health needs. These comments suggest systemic issues in some communities’ delivery of mental health treatment, and inconsistent levels of resources across communities more generally.

In addition to insufficient mental health services, some Local Partners cited stigma as a barrier to mental health care. Said one, **“It’s a very private and hidden problem. Most veterans will not admit to having mental difficulties or seek treatment for it.”** Another stated, “The stigma of needing to ask for help is difficult, along with the fear that receiving help will go on their record and have negative results later.” Local Partners thus struggle with both structural and attitudinal barriers to facilitating or providing necessary mental or behavioral health care.

Employment and Career Needs

Over 90 percent of Local Partner collaboratives report serving veterans who need career training or other employment services. For more than a quarter of collaboratives, “almost all” of the veterans they serve have such needs, and for nearly half of collaboratives, “many” of their veteran clients do (Figure 12).

Collaboratives appear to fare better in meeting employment-related needs than health needs. Between 45 percent and 49 percent said they could “completely” address the employment and career needs of the veterans they serve (Figure 13), compared with 31 percent to 43 percent who said the same thing about various health needs (Figure 11). However, BWF administered the LPSAT before the COVID-19 crisis, when the unemployment rate for veterans was roughly 3.5 percent.⁹ By April 2020, that rate had skyrocketed to 11.7 percent.¹⁰ It is likely that far fewer collaboratives can completely address the demand for employment services now than could before the COVID-19 pandemic.



Only one Local Partner mentioned that the challenge with employing veterans was a lack of available jobs. More frequently, Local Partners discussed the difficulties that new veterans faced in translating their military experience to civilian jobs and the inability of employers to appreciate competencies and expertise gained in the military. For example:

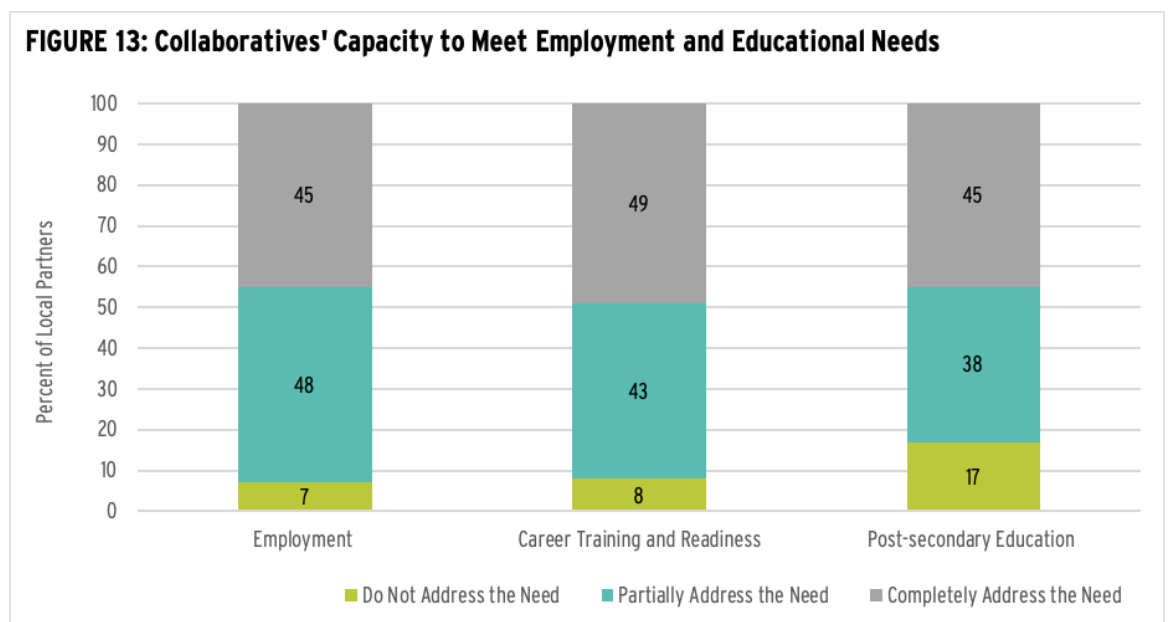
Veterans are having difficulty translating the skills and experiences they obtained while on active duty; they do not fully understand what is involved in relaunching one's career and how to manage their expectations regarding the salary and responsibility level they will enter the civilian workplace with. Employers don't really understand the responsibilities and accomplishments a veteran has had while serving and how to recognize the value a veteran can bring to their organizations. The lack of HR professional competency around the veteran experience is presenting challenges to veterans' being hired in civilian workplaces.

Local Partners indicated other barriers to employment as well, particularly challenges that specific veterans or military-affiliated populations face. They see veterans with posttraumatic stress disorder, substance abuse problems, or unstable housing situations struggle to complete job training programs. Local Partners also note that the "fractured career paths" of service members' and veterans' spouses inhibit their abilities to present themselves as stable and qualified job candidates.

Post-secondary Education Needs

As with employment and career needs, over 90 percent of LP collaboratives serve clients who need help with post-secondary education. Although only 8 percent of collaboratives indicated that "almost all" of their veteran clients have that need, 48 percent noted that "many" of the veterans they serve present with needs related to higher education (Figure 12).

Almost half of LP collaboratives say they can "completely" address their clients' needs for post-secondary education (Figure 13). But 17 percent of collaboratives do not address such needs at all. Those findings may suggest a compelling opportunity for community-based veterans' organizations to collaborate more effectively with community colleges and other education institutions as well as to partner more closely and efficiently with counselors and other advocates familiar with G.I. Bill eligibility and benefits.



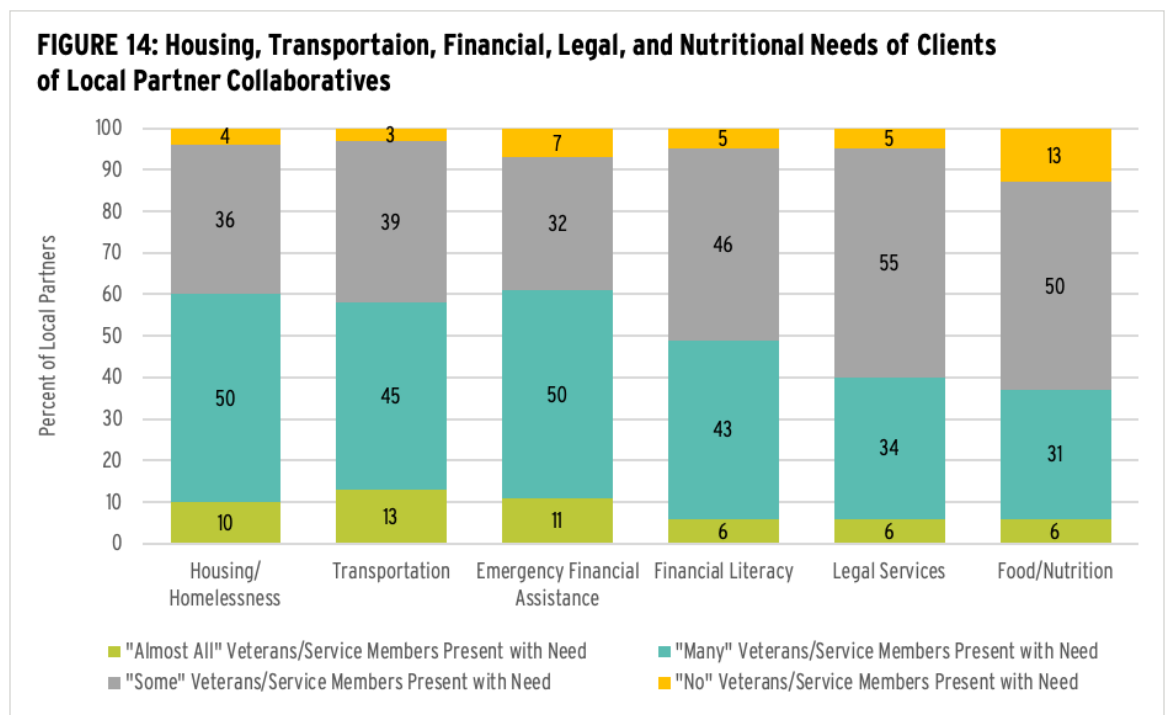
Housing Needs

More than 90 percent of Local Partner collaboratives serve veterans with housing needs (Figure 14). But only 23 percent say they can “completely” address those needs, and despite robust effort, 68 percent can only “partially” meet those needs (Figure 15).

The availability of affordable housing and the cost of living for veterans are among the hardest challenges that many collaboratives face. Local Partner respondents noted, **“There do not seem to be enough houses or apartments to go around when you need one,”** and “The cost of housing and the availability of housing in areas close to bus lines or transportation make this effort a bit taxing.” Another Local Partner indicated, “The housing costs in our area have priced out many people, and finding affordable housing is difficult.” Local Partners also reported that housing shortages in their communities prevent full use of housing assistance resources, such as Veterans Affairs Supportive Housing (VASH) vouchers.

Some policy barriers inhibit veterans in need from procuring housing or restrict developers from providing affordable housing. One Local Partner wrote, “Conflicting laws at the municipal and state level make it hard to incentivize developers to produce affordable units. We have attempted several landlord engagements strategies, but it is an ongoing challenge.” Some Local Partners are trying to develop affordable housing themselves, but that too is challenging: “We are exploring innovative solutions ... to develop affordable housing for veterans, but this ... is very slow-moving and will be implemented first as a pilot, thus not immediately serving imminent demand.” LP collaboratives are trying to identify creative solutions to housing shortages, but they still face an acute need that they struggle to address.

Finally, one Local Partner observed that, “Our collaborative works with local rapid rehousing partners and Supportive Services for Veteran Families (SSVF) facilities and organizations to place veterans in homes *and to dispel myths about returning veterans for landlords* [emphasis added].” That statement suggests that, at least in one community, stigma against veterans makes it harder for them to secure housing.



Transportation Needs

Nearly all Local Partner collaboratives serve veteran and military populations who need help with transportation, and more than half indicated that either “many” or “almost all” of their veteran clients have that need (Figure 14). Generally speaking, an equal share of LP collaboratives (approximately 20 percent) either “completely” address their clients’ transportation needs or do not address them at all. The remaining 61 percent of collaboratives are able to address transportation needs at least partially (Figure 15).

Collaboratives’ challenge with transportation echoes the obstacle they face in meeting housing and mental health needs: a lack of options. According to one Local Partner, “In our area, public transportation is very limited. A majority of our veterans don’t have cars, and at times it prevents them from being successful.”

The need for transportation is more pronounced in rural areas, where one Local Partner explained that the “tyranny of geography” is a barrier to veterans’ success. Another Local Partner stated, “We are geographically remote to many of the services most geographies take for granted. Most medical specialists are 2-3 hours away. The dispersed nature of the county also makes it difficult to get services to the veteran, or to get the veteran to the services.” That statement demonstrates how readily difficulties with transportation exacerbate other areas of need, such as health care.

Financial Needs

At least 93 percent of Local Partner collaboratives serve clients with financial needs, including the need for emergency financial assistance and education about financial literacy (Figure 14). For 49 percent of LP collaboratives, “many” or “almost all” of such clients need greater financial literacy; for 61 percent of collaboratives, “many” or “almost all” of those clients need emergency financial assistance.

When the survey was conducted in late 2019, one-fourth of collaboratives said they could “completely” address the financial needs of the veteran and military populations they serve, whereas 24 percent did not address financial literacy at all, and 14 percent did not offer emergency financial assistance (Figure 15). Based on what BWF has learned from its Local Partners since then, the gap between financial needs and the services and resources available to address them at the community level is probably much wider now, as the impact of the COVID-19 crisis is felt across the veteran population.

Local Partners encounter a variety of obstacles in addressing veterans’ financial needs. One Local Partner emphasized external factors, stating, “We are an area that historically is hit by a major storm almost every year. These storms increase the needs of veterans who may be just meeting their financial needs. Storm recovery can be the final straw, and the veteran may have to decide between work and getting help.” Another Local Partner attributed veterans’ financial challenges to a lack of financial literacy: “Because they do not ask for financial education and they do not budget well, they wait until they are in crisis, making the situation more difficult to resolve.” Thus, Local Partners’ perceptions of the causes of veterans’ financial problems range from the economic impact of external factors to such “cultural” factors as the need for better financial literacy as people transition from military to civilian life.

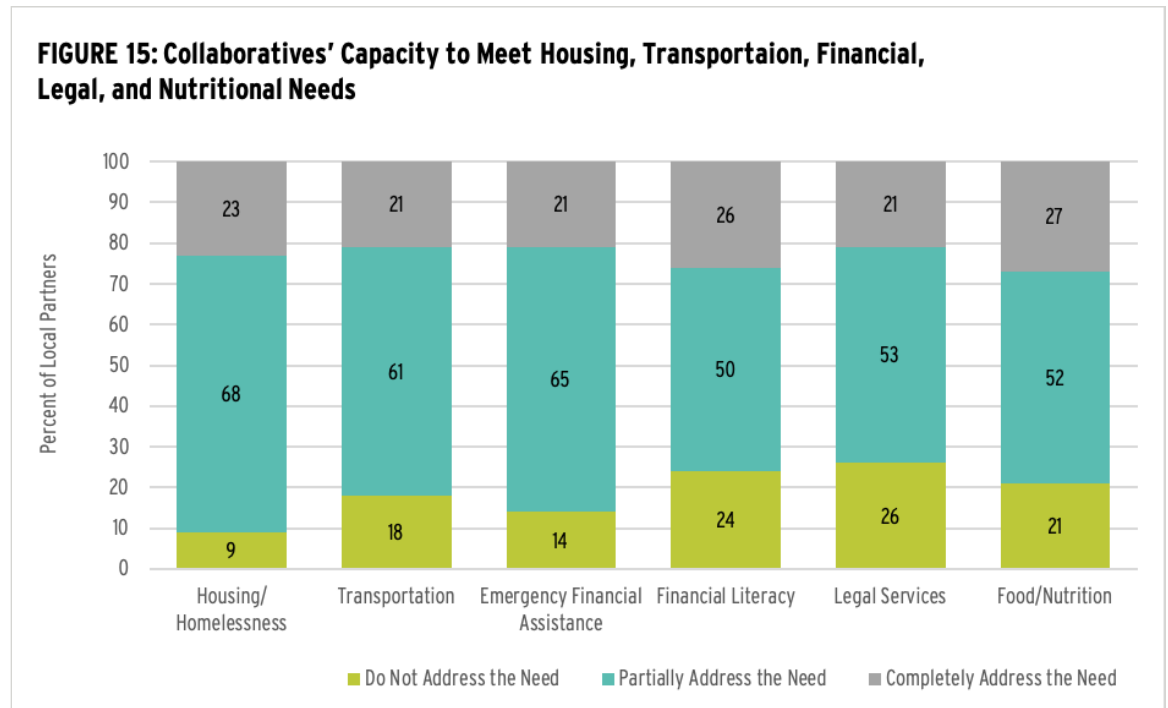
Local Partners were also quick to identify the lack of available resources for emergency financial assistance. One Local Partner explained of its own organization, “The project typically runs out of funds in the late fall of each year—before we have raised funds for the next cycle.” Another echoed that predicament: “Limited funds for collaborative agencies has created a barrier to providing services to veterans or family members seeking assistance with mortgage/rent, utilities, car payments, etc.”

Other Local Partners highlighted administrative challenges to accessing emergency financial aid. One said, “Many veterans are just above the income guidelines to qualify for emergency funding from the Veterans Affairs or general assistance funds.” Another indicated, “There are few organizations that provide this assistance, and they have limits on individual veterans’ requests.” In summary, organizations that offer emergency financial assistance struggle to meet the entirety of the need.

Legal and Nutritional Needs

Almost all Local Partner collaboratives serve veterans and military populations who need legal assistance. Although 55 percent of collaboratives say that only 40 percent note that “many” or “almost all” such clients face legal concerns (Figure 14). Twenty-one percent of LP collaboratives reported that they can “completely” address their clients’ legal needs, but 26 percent do not address those needs at all (Figure 15).

Food or nutritional needs are also problems for many of the veterans served by Local Partner collaboratives. Fifty percent of collaboratives say that “some” of their veteran clients need assistance with food or nutrition, and 37 percent say that “many” or “almost all” of such clients have those needs (Figure 14). Twenty-seven percent of LP collaboratives report that they can address food-related needs “completely,” but 21 percent do not address those needs at all (Figure 15). **Recent meetings with Local Partner leaders have identified food insecurity as the most urgent impact of the COVID-19 pandemic on veterans.**



Social Needs

In addition to the array of needs discussed above, many Local Partner collaboratives encounter veterans who have social needs, such as a desire for social interaction, peer or mentor support, opportunities to volunteer or become a community leader, and recreational activities.

A majority of collaboratives reported that “many” or “almost all” of the veterans they serve present with a need for social interaction or for support from peers or mentors (Figure 16). In all, about 90 percent of Local Partners say they can address those two needs: 35 percent to 40 percent can do so “completely,” and 51 percent to 54 percent can do so “partially” (Figure 17).

Less prevalent, but still common, social needs are a desire to serve as a volunteer or community leader and a desire for recreation. Half of LP collaboratives report that “many” or “almost all” of their veteran clients express a need for volunteer or leadership opportunities. Eighty-five percent of collaboratives say they have some capacity to address that need, but only 39 percent can do so completely. The latter finding may make a compelling case for collaboratives to promote veterans’ skills and leadership to other players in the local nonprofit or broader civic landscape.

Only one-third of LP collaboratives indicate that “many” or “almost all” of their veteran clients present with a need for recreational activities. Three-quarters of collaboratives say they can address that need, at least partially.

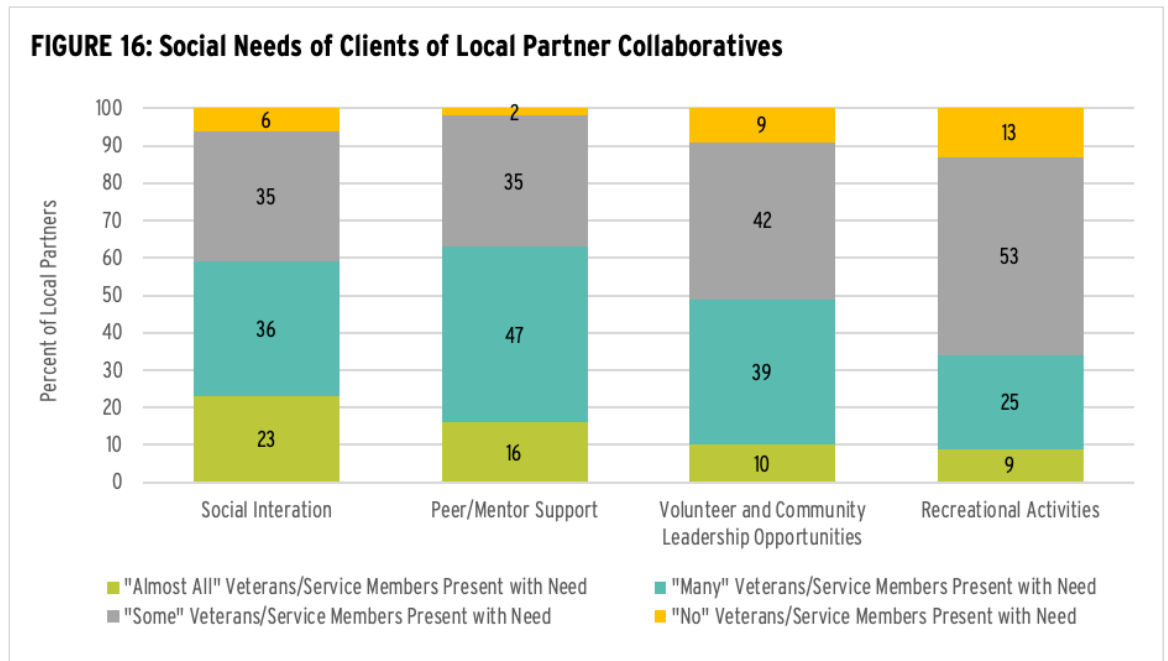
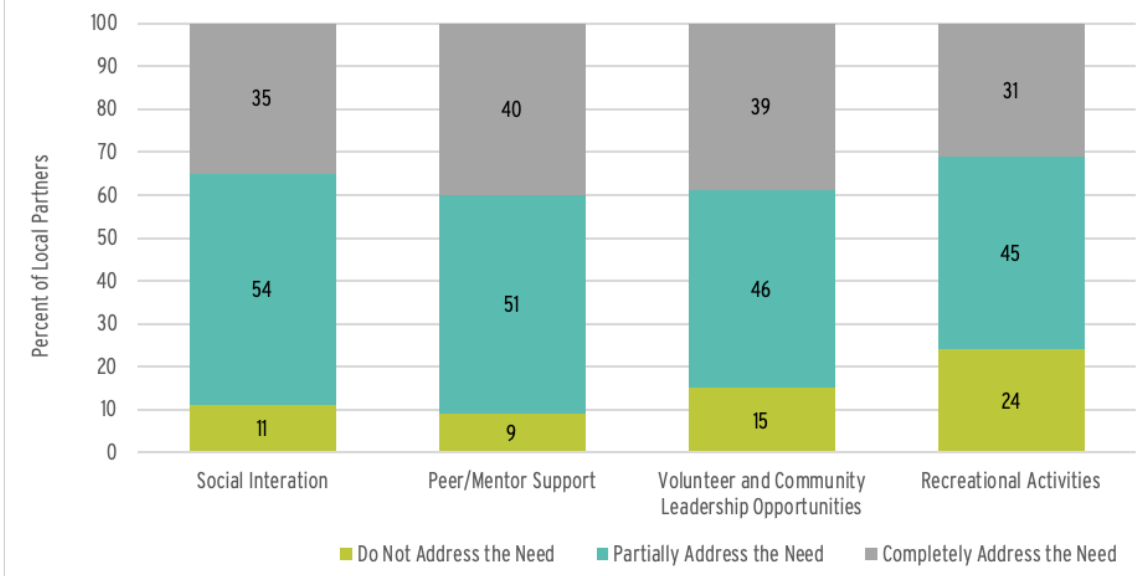


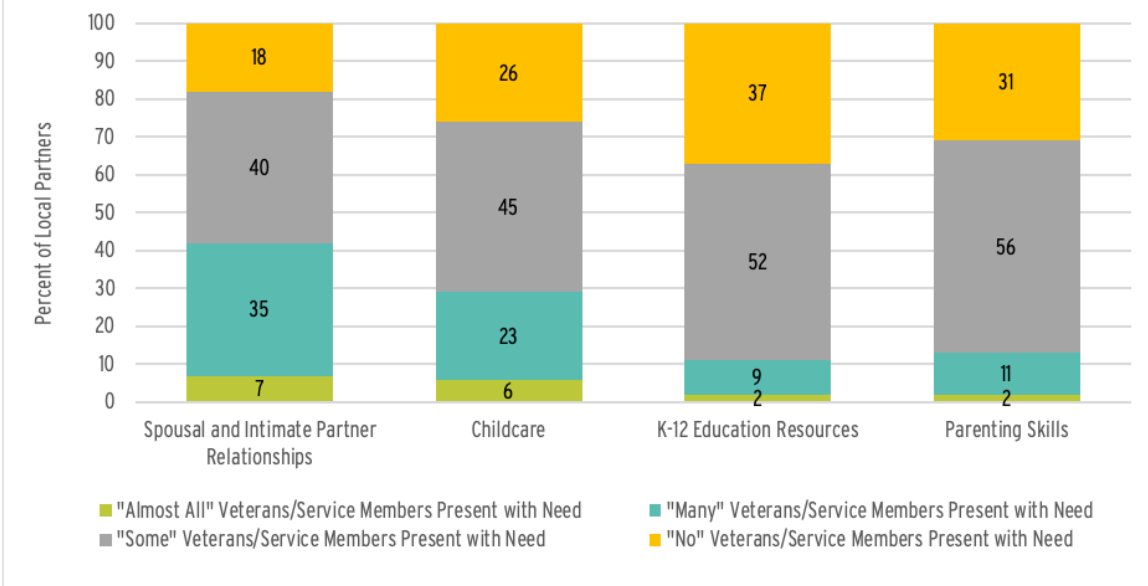
FIGURE 17: Collaboratives' Capacity to Meet Social Needs



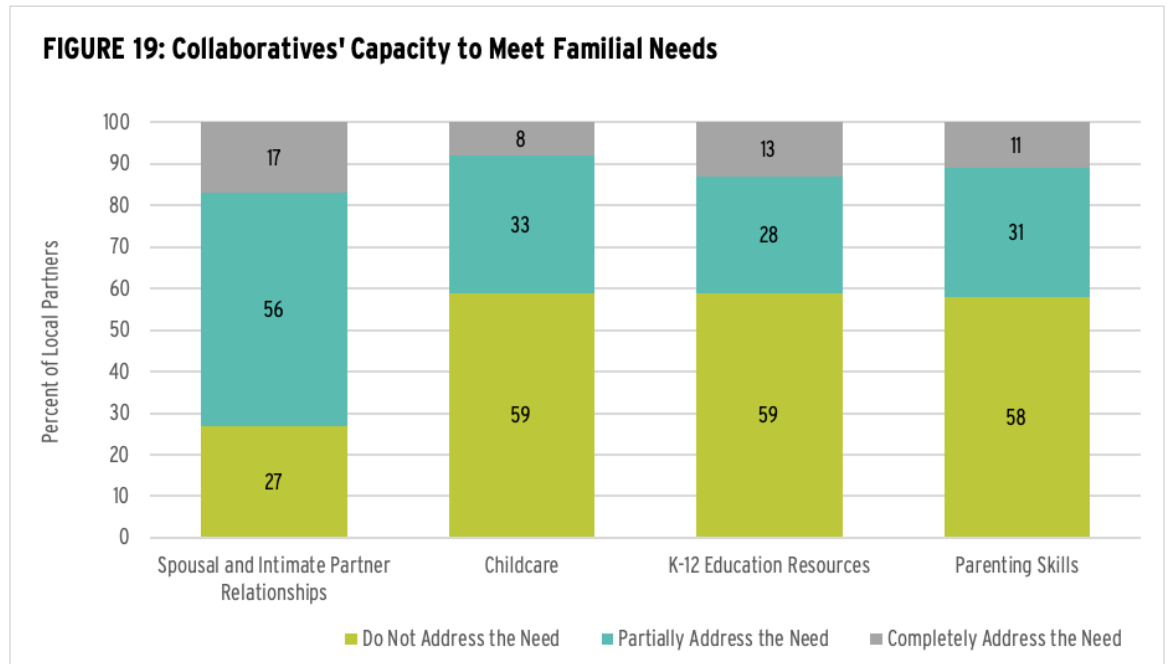
Familial Needs

Family-related needs—which include help with spouse or intimate partner relationships, childcare, K-12 educational resources, and parenting skills—are among the least commonly identified needs of the veteran and military populations that Local Partner collaboratives serve. Even so, 42 percent of collaboratives indicate that “many” or “almost all” of their veteran clients present with the need to improve a relationship with a spouse or intimate partner (Figure 18). Fewer collaboratives, just 29 percent, respond similarly about the number of veterans they see who need childcare. And less than 15 percent of collaboratives indicate that “many” or “almost all” of the veterans they serve need help finding K-12 educational resources or improving their parenting skills.

FIGURE 18: Familial Needs of Clients of Local Partner Collaboratives

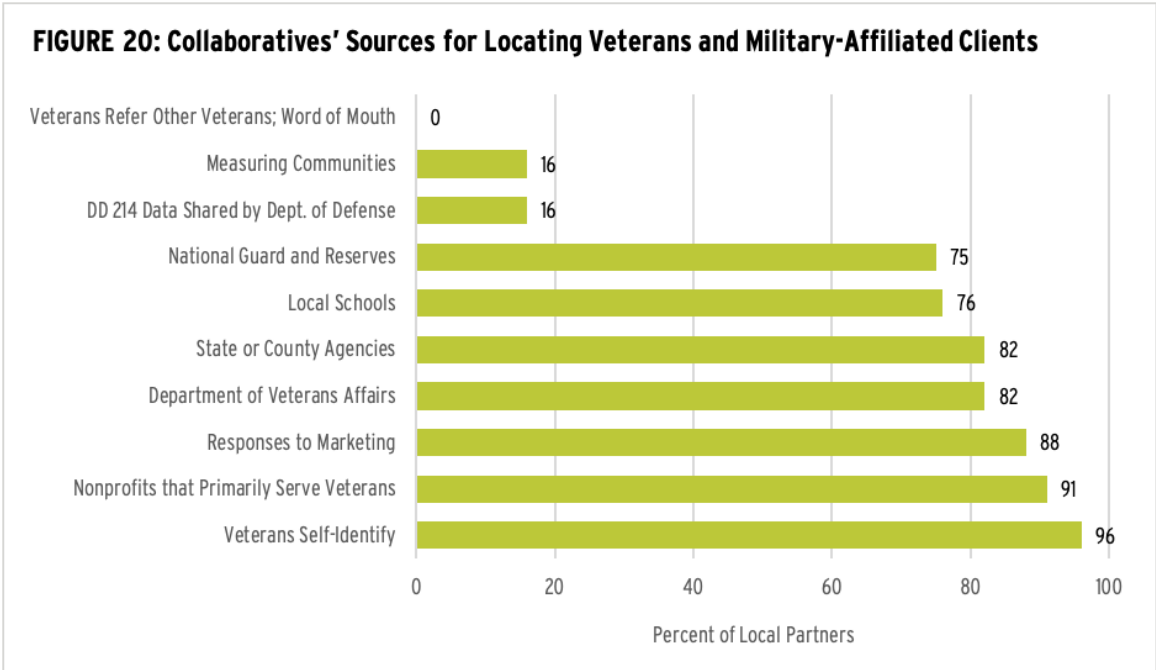


Local Partners may underestimate familial needs because organizations that focus on those needs are underrepresented in collaboratives. For instance, only 40 percent of LP collaboratives have members from the field of K-12 education (Figure 7). Likewise, only about 40 percent of collaboratives say they can address—either “completely” or “partially”—veterans’ needs for childcare, K-12 educational resources, or parenting skills (Figure 19). On the one hand, the current observations about veterans’ low need for help in those areas may not warrant investment in improving collaboratives’ capabilities to provide such help. On the other hand, the lack of members addressing those needs may prevent collaboratives from accurately assessing demand.



Collaboratives Rely on Referrals and Online Marketing to Reach Veterans

The most common way in which Local Partner collaboratives find veteran clients is when veterans come forward to identify themselves and request support (Figure 20). In addition, over 90 percent of LP collaboratives receive clients through referrals from nonprofits that serve veterans. The majority of Local Partners also locate potential clients through marketing (such as outreach efforts, special events, and emails); referrals from the Department of Veteran Affairs; state or county agencies; local colleges and universities; and the National Guard and Reserves. In addition to the sources shown in the figure, some collaboratives also mention referrals from private industry or from nonprofits that serve the general population. Surprisingly, no collaboratives appear to rely on veterans’ referring their peers (word-of-mouth referrals).



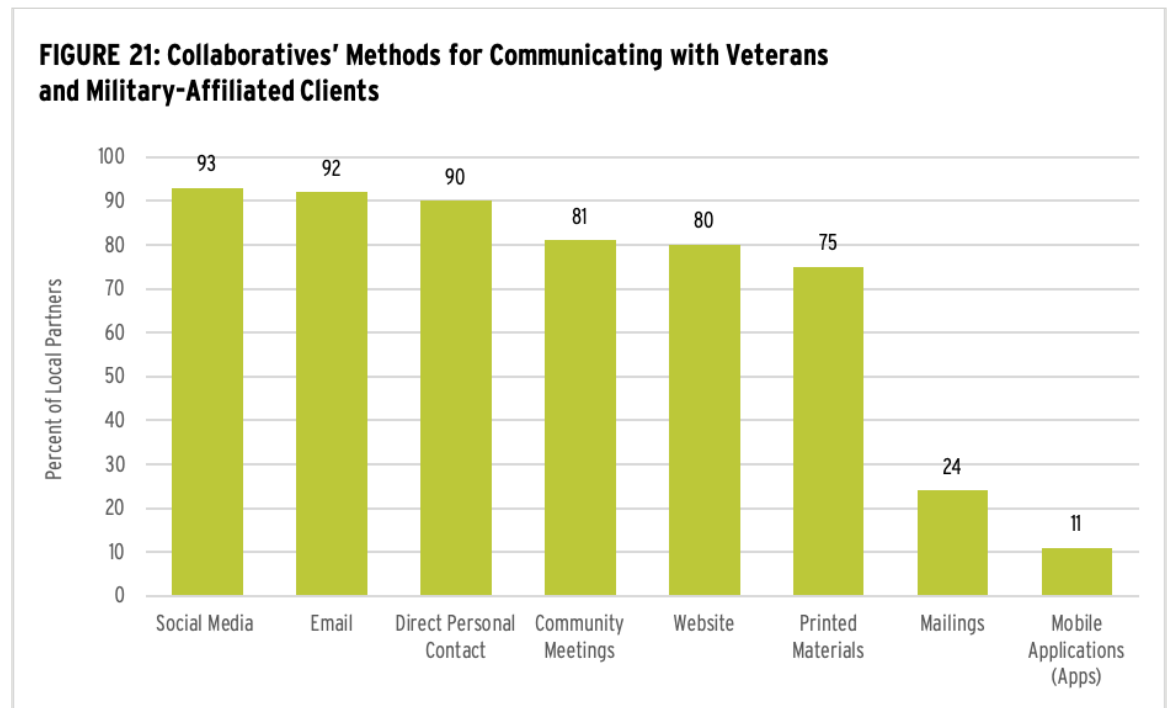
NOTE: DD 214 is the Department of Defense Certificate of Release or Discharge from Active Duty. Measuring Communities is an online social indicators project designed to strengthen community efforts to support military and veteran families (measuring-communities.org).

For some Local Partners, outreach to veterans is one of the greatest challenges they face: “Getting the word out remains our biggest hurdle,” one said. The number of communication options overwhelms some Local Partners: “There are so many outlets for communication and it is so piecemeal that it is difficult to find effective means of communication.” One Local Partner said that it lacks resources for marketing: “All our members are volunteers, and we receive no funds for material activities aimed at reaching out to inform and influence our veteran population.” Another Local Partner reported:

The newspaper didn't run our announcement, and while we did a lot of advertising via social media and word of mouth, the results could have been better. The resources, subject matter experts, and handouts were there—just needed greater coverage. Part of it is we are new. Part of it is educating our local paper (and community) about what it is we do and why, so they will run our announcements.

Thus, outreach is a challenge, and LP collaboratives are continually working to improve their communication strategies. These insights also suggest that some Local Partners might consider how they can encourage the veterans they already serve to promote the collaborative and its services in the veterans' own social networks. As indicated in Figure 20, that word-of-mouth referral strategy is currently underused.

In addition to their methods for finding clients, LP collaboratives use different ways to communicate with veterans and military-affiliated individuals in their community (Figure 21). Social media, email, and direct personal contact are the most common approaches that collaboratives employ to reach veterans. Many collaboratives also rely on community meetings, websites, and printed materials for communication. However, only one-fourth of LP collaboratives use mailings, and only about one-tenth use mobile applications (apps). A small number of collaboratives also use traditional media (such as radio and television), and some rely on communication efforts managed by member organizations.

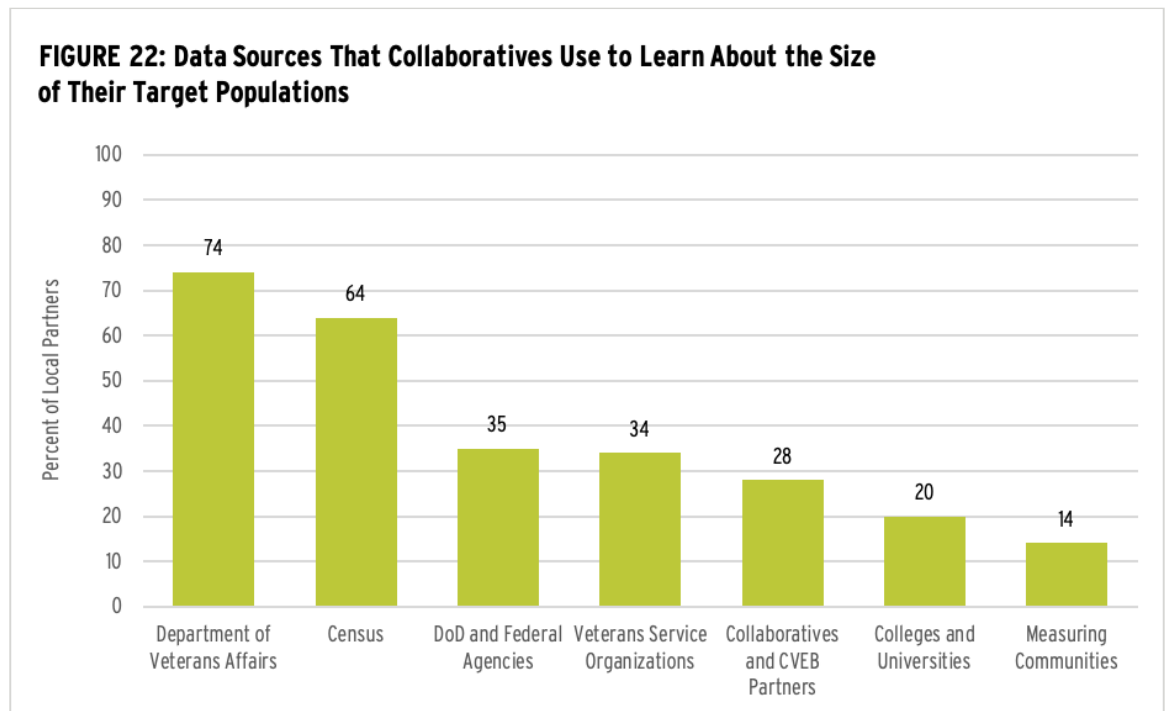


Local Partner Collaboratives Use Data to Identify Needs and Set Goals, But Less So to Evaluate Their Work

“Learning” is a fundamental component of ensuring collective impact. Learning includes using data to identify the needs of the people whom the collaborative aims to serve, setting goals based on the data, and continuously evaluating the collaborative’s performance in meeting those goals.

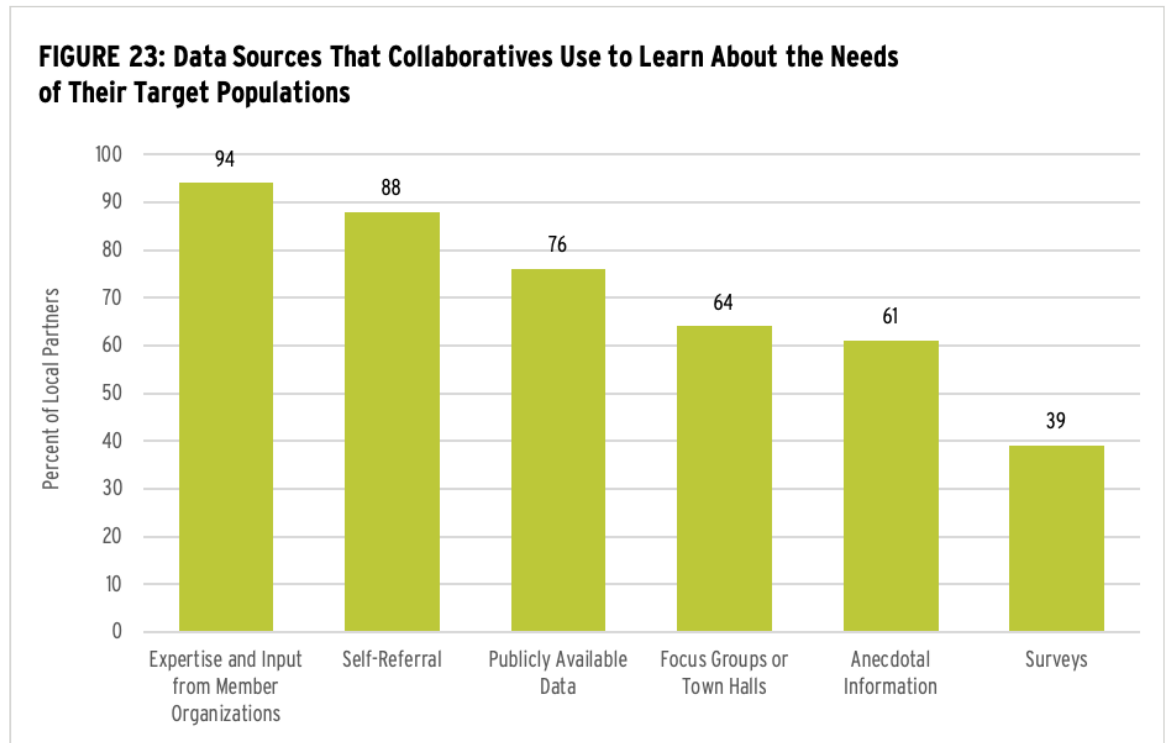
Local Partner collaboratives are inconsistent in their data use. Although the vast majority rely on data to learn about veterans, a much smaller share of collaboratives use data to monitor and assess the impact that they and their member organizations have on the lives of their clients.

Earlier, we presented LPSAT data about how many veterans and service members live in the area served by each Local Partner collaborative (Figure 4). The majority of collaboratives rely primarily on VA and Census for that data, with other sources less widely used (Figure 22). The reliance on VA may result from the ease of access to, and comprehensive nature of, the VA’s National Center for Veteran Analysis and Statistics.¹¹ Similarly, the Census Bureau provides easily accessible data on characteristics of the veteran population.¹² Some collaboratives also use data from state agencies in addition to the sources shown in Figure 22.

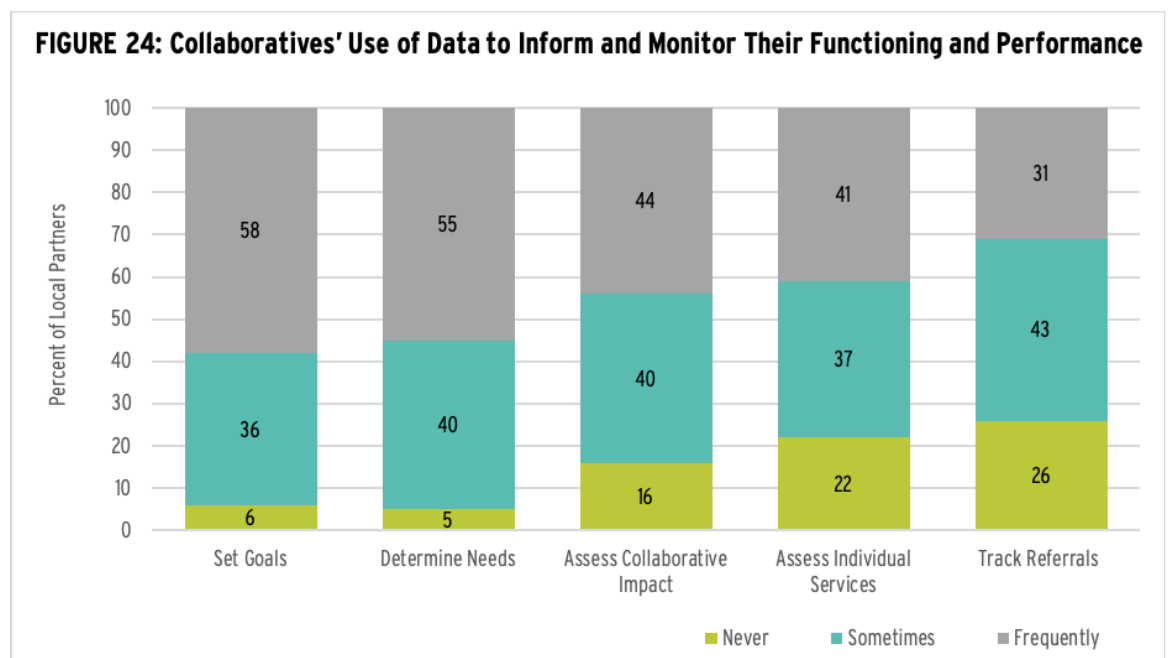


NOTE: CVEB = Community Veterans Engagement Board; DoD = Department of Defense. Measuring Communities is an online social indicators project designed to strengthen community efforts to support military and veteran families (measuringcommunities.org).

To learn about the problems facing the veteran and military-affiliated populations in their community, almost all Local Partner collaboratives rely on the expertise and input of their member organizations (Figure 23). Many also rely on what they hear directly from the veterans they serve (“self-referral”). Three-quarters of collaboratives rely on publicly available data, and nearly two-thirds conduct town hall meetings and focus groups to gather insights about local issues.

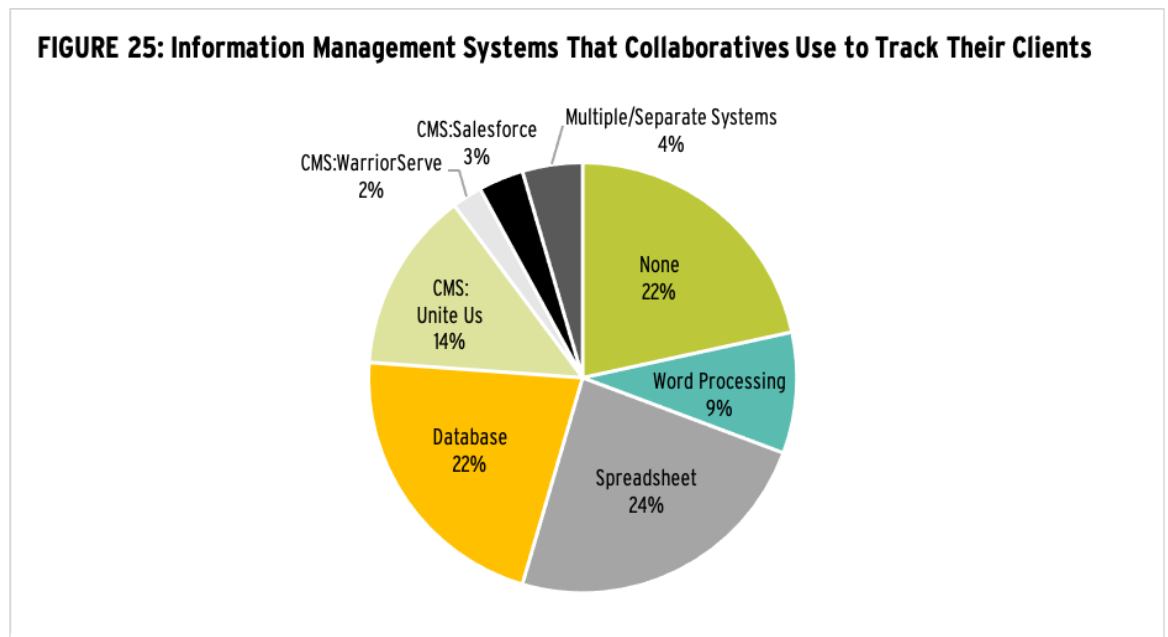


Large majorities of Local Partner collaboratives sometimes or frequently use data to determine needs and set goals (Figure 24). Smaller majorities use data for evaluative purposes. Sixteen percent of collaboratives report that they never use data to assess their impact, 22 percent never use data to assess individual services, and 26 percent never use data to track referrals within the collaborative.



To track referrals or assess performance, collaboratives need data collection systems. But more than one-fifth of Local Partner collaboratives do not use information management systems to track the veterans they serve (Figure 25). Collaboratives that do employ such systems are evenly split between using spreadsheets like Microsoft Excel, database systems like Microsoft Access, and basic client management systems. Unfortunately, simply having an information management system does not imply that it is being used optimally. Many collaboratives with information management systems still do not use data to assess their impact, assess individual services, or track referrals.

Members of private industry may be willing to provide in-kind contributions, such as training or IT support, to help collaboratives use technology more efficiently to collect and analyze data about veterans. That is a potential strategic approach Local Partners could pursue to improve their technology and data use for greater effectiveness and efficiency.



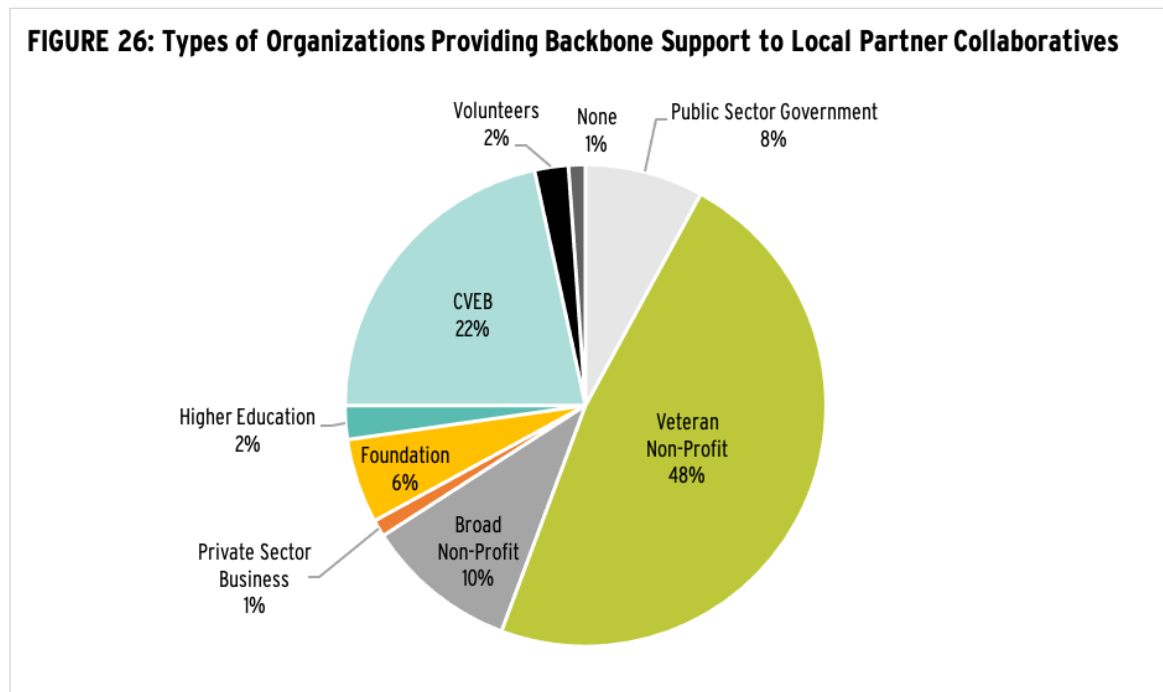
NOTE: CMS=Client Management System

Some Local Partners indicated that using data to track referrals within a collaborative is especially challenging. One Local Partner said, “We have no capacity, either with the volunteers who run [our organization] or with our member organizations, to track the movement of veterans within the system.” Another Local Partner said it is “hard to get people to agree on the software, who would be the lead responsible party for the database, as well as [who would pay for] the software.” That statement suggests that even collaboratives that want to use data and technology systems may be hindered by a lack of resources or by the lack of a member willing to assume responsibility for data management.

The Operational Structures of Collaboratives Vary, but Almost All Include Veterans in Leadership Positions

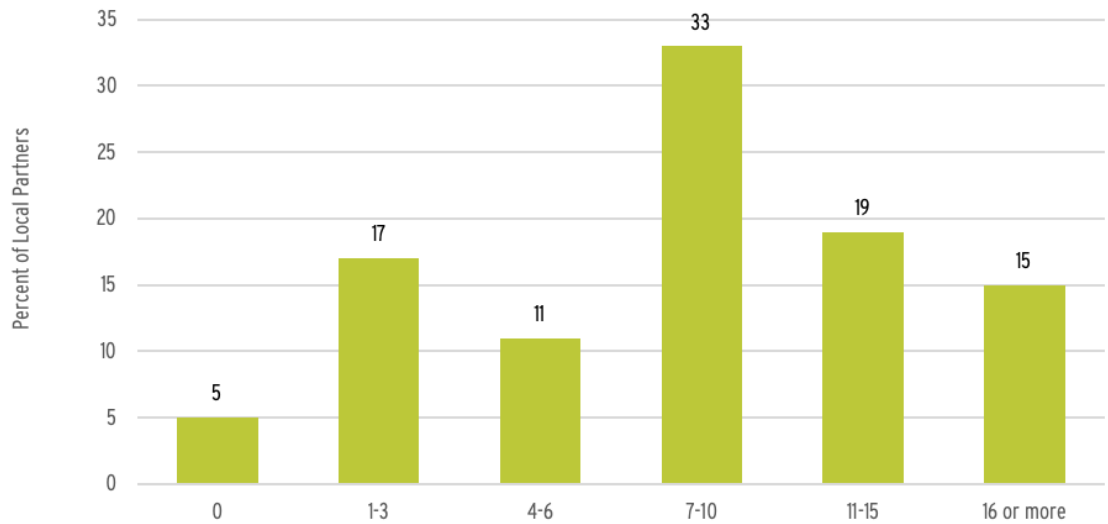
The leadership frameworks of Local Partner collaboratives differ from community to community, often reflecting the founding organization or organizations. To qualify as a BWF Local Partner, a collaborative must designate one member organization to serve in a backbone or management capacity. However, BWF’s “big tent” approach allows for leaders from all sectors and any number of fields to step up and serve in that role. The foundation does not require that a collaborative be based at an organization that serves veterans, nor does it mandate how LP collaboratives structure their operations or governance. Even so, almost half of the Local Partners are singular, nonprofit, veteran-focused organizations working at the community level. A much smaller share are nonprofits with broader missions that serve veterans along with other populations, and even fewer are public-sector government organizations (Figure 26).

More than half of Local Partner collaboratives include organizations that the VA has designated as Community Veterans Engagement Boards (CVEBs). Those boards are volunteer teams of community-based veterans’ advocates who try to communicate the local needs of veterans at the federal agency level.¹³ For 22 percent of Local Partner collaboratives, a CVEB serves as the lead organization.



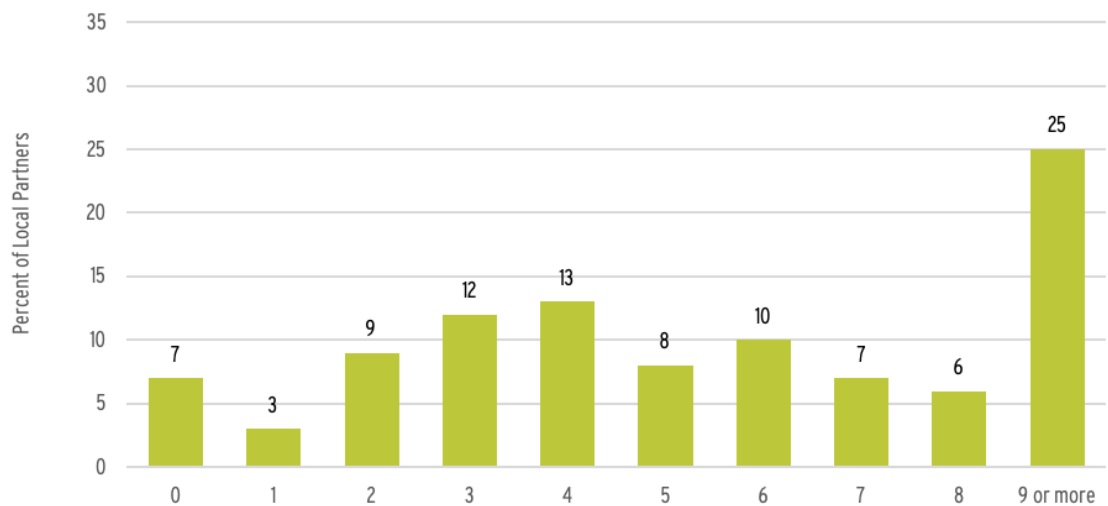
Almost all Local Partner collaboratives have a steering committee of individuals who guide the work of the collaborative, separate from the governance of the backbone organization. One-third of collaboratives have steering committees of 7 to 10 members (Figure 27). The other two-thirds are equally split between committees with fewer than 7 members and committees with more than 10 members.

FIGURE 27: Number of People on the Governing Committees of Local Partner Collaboratives



The involvement of stakeholders whose lives are impacted by the work of the collaborative is a critical condition of collaborative leadership and success.¹⁴ BWF’s Local Partner collaboratives fare well on that measure: 93 percent include veterans in leadership positions. Twenty-five percent have nine or more veterans serving on their boards, and only 7 percent lack a veteran at that level (Figure 28). The share of collaboratives that have significant governance by veterans is noteworthy and reflects what might be considered a best practice for achieving collective impact.

FIGURE 28: Number of Veterans on Local Partner Collaborative Governing Committees



Conclusion

Collectively, the collaboratives that make up BWF's Local Partner network represent a large and diverse array of community-based resources organized to meet the needs of veterans. The survey that BWF administered, the Local Partner Self-Assessment Tool, offered an extraordinary opportunity to collect new insights into the unique role that those groups play in the broader landscape of organizations that serve America's veterans. The LPSAT measures various aspects of Local Partner collaboratives' efficacy and impact in the communities where veterans settle and build their lives after service. Thus, the LPSAT results give service providers, scholars, grantmakers, civic leaders, and other stakeholders a new perspective on how their respective resources and contributions can be leveraged and optimized to meet veterans' needs at the local level.

The insights gained from the LPSAT, summarized below, affirm the current substantive contributions and enormous future potential of community-based collaborative models to help veterans reintegrate into civilian society. At the same time, the survey's results raise reasonable concerns about the sustainability of those efforts.

Community-based collaboratives are currently addressing, to some extent, nearly every need of veterans. BWF's Local Partners apply the collective impact framework in a variety of ways to address veterans' needs in the community. The collaboratives serve large, broad, and diverse veteran and military-affiliated populations; include a robust number and diversity of partner organizations and stakeholders; and, crucially, address to at least some extent almost every need presented by veterans. Perhaps most important, the LPSAT reveals the substantive extent to which LP collaboratives play a key role in community wellness—despite, in many cases, lacking the resources, capacity, or knowledge with which to do so adequately.

Physical and mental health, employment, and career training are the most common needs, but capacity to meet those needs varies. BWF's Local Partner network represents an overall geographic area that is home to approximately 11.5 million veterans. The most common needs of the populations that LP collaboratives serve are physical health, employment, career training, and mental health.

Not all needs can be addressed equally, however. The collaboratives have notable capacity to meet the employment and career-training needs of veterans and other military-affiliated clients (at least prior to COVID-19). But some of them have less capacity to meet mental health needs. Collaboratives attribute their challenges in addressing mental health needs to a lack of community resources for mental health and stigma against mental health treatment. Other ongoing issues that persistently challenge Local Partners are lack of affordable housing, transportation needs, and financial problems among veterans.

In addition, the majority of Local Partners are relatively new organizations that are still working through the sorts of operational issues that community initiatives commonly face in their earliest stages of development. Most Local Partners are striving to overcome challenges in the areas of leadership, trust, data sharing, recruitment of veteran clients and other stakeholders, and communications.

Local Partner collaboratives vary in composition, resource base, and geographic coverage. Above all, the insights provided by the collaboratives reflect diversity in all of those areas, painting a complex picture of how the unique characteristics of a given community inform, and are leveraged to serve, its veterans. For example, some collaboratives serve single cities, whereas others serve entire states. Rural areas face what one Local Partner called the "tyranny of geography" and a lack of transportation resources, whereas urban areas may struggle more with a lack of affordable housing.

Collaboratives may serve an area with fewer than 2,500 veterans or more than 200,000. Some collaboratives operate with no budget, running on volunteer power alone. Others operate with budgets of more than \$1 million a year and have their own paid staff.

How Local Partner collaboratives address their challenges varies as well and depends largely on the resources available in their community. In addition to their answers to the LPSAT, Local Partners have reported since the COVID-19 outbreak that they are diversifying their reach and seeking new partnerships. Collaborative structures are proving essential in communities' response to the effects of the pandemic on veterans and military families.

Veterans are well-represented in the leadership and governance of many collaboratives. Over three-quarters of collaboratives have at least three veterans serving on their board. That representation is noteworthy for two reasons: It constitutes a best practice for achieving collective impact, and it offers the possibility that engagement by stakeholders will provide greater cultural competence as the collaboratives evolve in the future.

Use of information management systems and data is limited. Despite the role that collaboratives' lead organizations play in coordinating care for veterans on the broader community and civic landscapes, 22 percent of those organizations do not have information management systems to collect data. And some lead organizations that do possess such systems are not using them optimally: The LPSAT results exposed notable gaps in Local Partners' use of data to track referrals among collaborative members and to evaluate the services that individual members provide.

The LPSAT results affirm that there is no one-size-fits-all model for community-based approaches to serving veterans. The diversity and scope of the Local Partner network notwithstanding, all Local Partners share a dedication to supporting veterans in their local community and to adopting a collective impact approach. The problem that approach is trying to address is articulated best in the words of one Local Partner, who noted:

We believe that veterans and their families have been socialized to expect a reasonably sophisticated network of systems and support as they transferred from assignment to assignment, base to base, and duty station to duty station. And the sophistication of this kind of network is not built in the communities they transition to after the military. Though most of the things that satisfy the various elements of such a network do exist in the communities, there isn't a purely defined orientation and check-in process to find their way around the community like exists in the military.

Local Partner collaboratives were established specifically to become the navigational tool that helps veterans find their way on the civilian landscape. But most collaboratives face considerable challenges.

BWF has an important role to play in building the capacity of organizations that serve veterans. American communities have long sought to support their veterans and military-affiliated populations. Particularly in the post-9/11 era, leaders from the public, private, nonprofit, and other sectors have begun to develop and test models for organizing and sustaining such community support. Findings from the Bob Woodruff Foundation's LPSAT affirm that community-based collaboratives play a key role in the lives of veterans—whose service-connected needs are often too numerous, complex, and individualized to be addressed adequately by large and frequently distant federal agencies.

Each day, BWF's network of more than 100 community-based collaboratives works directly with veterans in almost every state who are reintegrating into civilian society. At the same time, the collaboratives invite and facilitate the involvement, leverage the resources, and coordinate the partnership of many local businesses, public agencies, service providers, donors, and others. As BWF addresses the critical issues of assessing veterans' needs and the local capacity to meet those needs—and ensuring that the two are linked—our commitment to Local Partners is twofold:

- We are committed to increasing Local Partners' individual and collective capacity to meet the needs of veterans at the local level, in part by providing access to resources that help build their capacity for collective impact and in part by facilitating shared learning with their peers who serve veterans elsewhere across the country.
- Our Local Partners possess unique insights about the specific needs that veterans in their communities face and about their communities' ability to meet such needs. We are committed to learning from those insights and sharing them with the worlds of philanthropy, scholarship, public policy, and service provision.

The vast majority of BWF's Local Partner collaboratives have been operating for 10 years or less. Even so, almost two-thirds of collaboratives have already established formal working partnerships of more than 10 relevant and capable organizations in their communities, ready to collaborate to make an impact on the lives of veterans. To us, that trend signals a strong potential for greater collaboration and a demonstrated interest in expanding capacity and coordinating delivery of services to veterans at the local level.

The Bob Woodruff Foundation is steadfast in its commitment to continued investment in managing and building the strength, capacity, and influence of that network. Both the strengths of Local Partner collaboratives and their areas for improvement suggest compelling opportunities for the investment of financial, political, and intellectual capital by additional funders, civic leaders, and other influential entities in American communities. Results from the LPSAT indicate that the community-based, cross-sector, collaborative approach to reintegrating veterans is positioned to play a definitive role in the design of a new and enduring 21st-century model for veterans' care and well-being.

WHAT'S NEXT?

Stay tuned for the next paper in our series—we will discuss how the Bob Woodruff Foundation provides individualized findings to help each Local Partner identify its strengths and areas for improvement.

ENDNOTES

- ¹ <https://www.census.gov/data.html>, accessed March 27, 2020
- ² Anna Zogas, "US Military Veterans' Difficult Transitions Back to Civilian Life and the VA's Response," Watson Institute for International and Public Affairs Costs of War Project, February 2017.
- ³ Douglas McCormick, Emma Moore and Andrew Swick, "Working Paper - Changing Tides in the Sea of Goodwill: A Financial Analysis of Veteran-Serving Nonprofits," Center for a New American Security, October 2018.
- ⁴ John Kania and Mark Kramer, "Collective Impact," *Stanford Social Innovation Review*, available at: https://ssir.org/articles/entry/collective_impact
- ⁵ For more on "collective impact", see <https://www.collectiveimpactforum.org/what-collective-impact>
- ⁶ Margaret C. Harrell and Nancy Berglass, *Employing America's Veterans: Perspectives from Businesses* (Center for a New American Security, June 2012).
- ⁷ Formal arrangements are defined as an having a memorandum of understanding with, or having otherwise agreed to be part of, the collaborative.
- ⁸ John Kania, Fay Hanleybrown, and Jennifer Splansky Juster, "Essential Mindset Shifts for Collective Impact," *Stanford Social Innovation Review* (Fall 2014), https://ssir.org/articles/entry/essential_mindset_shifts_for_collective_impact.
- ⁹ U.S. Department of Labor, Bureau of Labor Statistics, "Employment Situation of Veterans News Release" (March 22, 2020), <https://www.bls.gov/news.release/vet.htm>.
- ¹⁰ U.S. Department of Labor, Bureau of Labor Statistics, "Employment Status of the Civilian Population 18 Years and Over by Veteran Status, Period of Service, and Sex, Not Seasonally Adjusted," *Economic News Release*, Table A-5 (May 11, 2020), <https://www.bls.gov/news.release/empsit.t05.htm>.
- ¹¹ See U.S. Department of Veterans Affairs, National Center for Veterans Analysis and Statistics, <https://www.va.gov/vetdata/>.
- ¹² See U.S. Census Bureau, "Explore Census Data," <https://data.census.gov/cedsci/>.
- ¹³ For more information about CVEBs, see U.S. Department of Veterans Affairs, Veterans Experience Office, <https://www.va.gov/ve/engagement/index.asp>.
- ¹⁴ Jeff Raderstrong and Tynesia Boyea-Robinson, "The Why and How of Working with Communities Through Collective Impact," *Journal of Community Development* 47, no. 2 (2016): 181-193.

ABOUT THE BOB WOODRUFF FOUNDATION

The Bob Woodruff Foundation (BWF) was founded in 2006 after reporter Bob Woodruff was hit by a roadside bomb while covering the war in Iraq. Since then, the Bob Woodruff Foundation has led an enduring call to action for people to stand up for heroes and meet the emerging and long-term needs of today's veterans. To date, BWF has invested nearly \$70 million to Find, Fund and Shape™ programs that have empowered impacted veterans, service members, and their family members, across the nation. Our team at the Bob Woodruff Foundation brings together a diverse range of backgrounds, experience and leadership - this expertise, coupled with constant engagement with our veterans and their families, has made BWF the trusted, nonpartisan voice and leading impact investor meeting the comprehensive needs of the post-9/11 veteran community. For more information, please visit bobwoodrufffoundation.org or follow us on Twitter at [@Stand4Heroes](https://twitter.com/Stand4Heroes).